Are patients with asthma at a higher risk of infection with SARS-CoV-2 and are they also more likely to experience a more severe course of COVID-19 illness?

What the research says
There is no evidence to suggest that individuals with well controlled asthma are at increased risk of COVID-19 infection or of developing severe COVID-19 disease. Patients with poorly controlled asthma may be at increased risk for hospitalization during COVID-19 infection, especially those for whom viral infections are a known asthma trigger. Regular asthma medications, including oral corticosteroids and biologics, do not increase the risk for COVID-19 infection or progression to severe disease. Fixed airflow obstruction may be associated with an increased risk for more severe COVID-19 disease.

What this means for your clinical practice
- Ensure patients with asthma are symptomatically well controlled
- Encourage your patients with asthma to ensure they take their asthma medications as prescribed and report any increase in respiratory symptoms promptly
- Ensure patients prescribed biologic therapy for asthma continue to receive their medication
  - Consider training patients to self-administer their biologic therapy at home if shielding or hospital visits are not considered appropriate under the National situation
- Oral steroids should be used for the treatment of moderate to severe asthma exacerbations not responding adequately to bronchodilator therapy
- Support your patients with asthma to follow National guidelines, including shielding, in order to minimise their risk of becoming infected with COVID-19
- When seeing patients face to face, follow National guidelines to minimise cross-infection

For additional information on the treatment of an acutely unwell person with COVID 19 in the primary care setting please see our guidance at: https://www.ipcrg.org/ICEQ21
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Useful links and supporting references


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