# The effect of mental disorders and treatment with psychotropic agents on the course of COVID-19 (COVID-19 psychotropics)

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## Administrative details

#### **PURI**

https://redirect.ema.europa.eu/resource/39974

#### **EU PAS number**

EUPAS37790

#### Study ID

39974

#### DARWIN EU® study

No

#### Study countries

Denmark

#### Study description

Beyond the psycho-social consequences of the coronavirus disease 2019 (COVID-19) pandemic, people with severe mental disorders, such as schizophrenia and bipolar disorder have been reported with an up to 2-fold increased 30-days risk of death after a severe acute respiratory syndrome coronavirus 2 (SARS-Cov-2) positive test. Recent use of psychotropic agents has also been associated with increased risk of death, varying between 50% in users of antidepressants to a three-fold increase in users of antipsychotics. The importance of maintaining and adjusting pharmacological treatment of people with severe mental disorders during the COVID-19 pandemic has been

emphasized. Identifying those drugs with lower risk profiles regarding adverse outcomes to COVID-19 will support guidance of selecting and adjusting acute and maintenance treatment during the COVID-19 pandemic. The present study aims at providing a population-based description of the association and potential differential impact of frequently used psychotropic drugs on the course and outcomes of COVID-19 in people with hospital diagnosed and without hospital diagnosed psychiatric disorders. We hypothesize that psychotropic treatment patterns differ between community-treated COVID-19 patients and hospitalized or deceased COVID-19 patients with lower risks for unfavourable outcomes in users of a) aripiprazole, haloperidol, risperidone or paliperidone as oral or short-acting injectable antipsychotics vs. other oral or depot long-acting antipsychotics, b) short-acting benzodiazepines vs. long-acting benzodiazepines, c) SSRIs vs. tricyclic antidepressants. We will use data from the prospectively collected Danish COVID-19 cohort at Statens Serum Institut including all Danish residents tested by the reverse transcriptase polymerase chain reactions (RT-PCR) for SARS-CoV-2.

#### Study status

Ongoing

#### Research institution and networks

#### Institutions

## Aarhus University

First published: 01/02/2024 Last updated 01/02/2024

Institution

## Pharmacoepi center, University of Southern Denmark

Denmark

First published: 22/04/2010

Last updated

Institution

27/07/2023 **ENCePP** partner **Educational Institution** 

Department of Clinical Medicine, Department of Affective Disorders, Aarhus University (AU-ADA)

Denmark

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## Contact details

Study institution contact

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Primary lead investigator

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## Study timelines

Date when funding contract was signed

Actual:

22/07/2020

Study start date

Actual:

27/02/2020

Data analysis start date

Planned:

29/10/2020

Date of final study report

Planned:

30/04/2021

## Sources of funding

Other

### More details on funding

SSI, AU-ADA Pro bono

## Study protocol

Protocol\_COVID 19 mental disorders\_20200924\_corr\_ENCEPP\_signed.pdf(899.94 KB)

## Regulatory

Was the study required by a regulatory body?

No

Is the study required by a Risk Management Plan (RMP)?

Not applicable

## Methodological aspects

## Study type list

#### Study type:

Non-interventional study

#### Scope of the study:

Assessment of risk minimisation measure implementation or effectiveness Drug utilisation

#### Main study objective:

To provide a population-based description of the association and potential differential impact of frequently used psychotropic drugs on the course and outcomes of COVID-19 in people with hospital diagnosed and without hospital diagnosed psychiatric disorders.

## Study Design

## Study drug and medical condition

#### **Anatomical Therapeutic Chemical (ATC) code**

(N05A) ANTIPSYCHOTICS (N06A) ANTIDEPRESSANTS (N05B) ANXIOLYTICS (N05CD09) brotizolam

#### Medical condition to be studied

SARS-CoV-2 test positive

## Population studied

#### Age groups

Preterm newborn infants (0 - 27 days)Term newborn infants (0 - 27 days)

Infants and toddlers (28 days – 23 months)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

Adults (18 to < 46 years)

Adults (46 to < 65 years)

Adults (65 to < 75 years)

Adults (75 to < 85 years)

Adults (85 years and over)

#### Special population of interest

Renal impaired Hepatic impaired Immunocompromised Pregnant women

#### **Estimated number of subjects**

25000

## Study design details

#### **Outcomes**

Hospitalization within 14 days and death within -2 to 30 days since the verified positive test, (Among those hospitalized): Length of hospitalization, ICU treatment and ventilation (-2

#### Data analysis plan

We will describe the prevalence of specific drug use within 6 months before testing for community treated, hospitalized and deceased patients, stratified by age, sex and psychiatric comorbidity. In the primary analyses, we will investigate the association between cumulative and current psychotropic drug use prior to testing and risk of hospitalization and death using logistic regression analysis among all positively tested individuals. The analyses will be stratified, following clinical and power considerations, by psychiatric diagnoses (any diagnosis) and by individual psychiatric disorders PS methodology will be applied by either matching of adjustment for each drug-outcome association of the respective drug pairs. We will apply formal testing for interactions between psychiatric diagnoses/hospital contacts and psychotropic drug use. We will report crude and adjusted odds ratios (ORs) and 95% confidence intervals (95% CI).

## Data management

#### Data sources

#### Data source(s)

Danish registries (access/analysis)

#### Data source(s), other

Danish Registries (access/analysis)

#### Data sources (types)

Administrative data (e.g. claims)
Disease registry
Drug dispensing/prescription data
Other

#### Data sources (types), other

Prospective patient-based data collection

## Use of a Common Data Model (CDM)

#### **CDM** mapping

No

## Data quality specifications

#### Check conformance Unknown

#### **Check completeness**

Unknown

#### **Check stability**

Unknown

## **Check logical consistency**

Unknown

## Data characterisation

#### **Data characterisation conducted**

No