

Outcomes in Hispanics with COVID-19 are Similar to Caucasian Patients in Suburban New York

Benjamin E Fombonne*, Rolando G Valenzuela, Alexander Bracey, Priscilla Cruz, William K Mallon, Rafael Fernandes, Henry C Thode, Adam J Singer, Yamil Michelen and Bettina C Fries

**Stony Brook University Hospital, USA.*

Published December 12th, 2020

ABSTRACT

Background: Despite reported higher rates and worse outcomes due to COVID-19 in certain racial and ethnic groups, much remains unknown. We explored the association between Hispanic ethnicity and outcomes in COVID-19 patients in Long Island, New York.

Methods: We conducted a retrospective cohort study of 2,039 Hispanic and non-Hispanic Caucasian patients testing positive for SARS-CoV-2 between March 7 to May 23, 2020 at a large suburban academic tertiary-care hospital near New York City. We explored the association of ethnicity with need for intensive care (ICU), invasive mechanical ventilation (IMV), and mortality.

Results: Of all patients, 1,079 (53%) were non-Hispanic Caucasians and 960 (47%) were Hispanic. Hispanic patients presented in higher numbers than expected for our catchment area. Compared with Caucasians, Hispanics were younger (45 vs 59), had fewer comorbidities (66% with no comorbidities vs 40%), were less likely to have commercial insurance (35% vs 59%), or come from a nursing home (2% vs 10%). In univariate comparisons, Hispanics were less likely to be admitted (37% vs 59%) or to die (3% vs 10%). Age, shortness of breath, congestive heart failure (CHF), coronary artery disease (CAD), hypoxemia, and presentation from nursing homes were associated with admission. Male sex and hypoxemia were associated with ICU admission. Male sex, chronic obstructive pulmonary disease, and hypoxemia were associated with IMV. Male sex, CHF, CAD, and hypoxemia were associated with mortality. After adjusting for other factors Hispanics were less likely to be admitted (OR 0.62, 95% I 0.52-0.92) but Hispanic ethnicity was not associated with ICU admission, IMV or mortality.

Conclusions: Hispanics presented at higher rates than average for our population but outcomes among Hispanic patients with COVID-19 were similar to Caucasian patients.

Keywords: COVID-19, Ethnicity, Health care disparities, Public health, Race, Hispanics

Corresponding author: Benjamin E Fombonne, Stony Brook University Hospital, USA. E-mail: Benjamin.Fombonne@stonybrookmedicine.edu

Citation: Fombonne BE, Valenzuela RG, Bracey A, Cruz P, Mallon WK, et al. (2020) Outcomes in Hispanics with COVID-19 are Similar to Caucasian Patients in Suburban New York. J Infect Dis Res, 3(S3): 04.

Copyright: ©2020 Fombonne BE, Valenzuela RG, Bracey A, Cruz P, Mallon WK, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.