Impact of the COVID-19 Pandemic on Asthma Exacerbations: A Retrospective Study in Singapore

The COVID-19 pandemic led to restrictions such as social distancing and lockdowns, which were associated with decreased asthma exacerbations¹. This decline has been attributed to pandemic-related measures, improved air quality, changes in healthcare-seeking behavior, and reduced exposure to respiratory viruses¹. However, patient variables linked to asthma exacerbations before and after the pandemic remain unexamined. To address this gap, we analyzed the profile of asthma exacerbators in Singapore pre- and post-COVID-19.

This retrospective study included asthma patients seen at a tertiary hospital in Singapore from 2016 to 2023. COVID-19 restrictions began in February 2020. Exacerbators were defined as patients with at least one emergency department (ED) visit during the prespecified period. Those with any ED visit after COVID-19 onset were classified as post-COVID-19 exacerbators. We compared exacerbator profiles using T-tests and chi-square tests, with logistic regression identifying variables linked to post-COVID-19 exacerbators.

Among 35,939 asthma patients, 1,900 pre-COVID-19 exacerbators had a mean of 2.11 ED visits per patient, while 770 post-COVID-19 exacerbators had a mean of 2.91 ED visits. Post-COVID-19 exacerbators were less likely to be GINA Step 2–5 (OR=0.229–0.658, p<0.01) or have bronchiectasis (OR=0.468, p<0.05) or prior pneumonia (OR=0.734, p<0.05) but were more likely to be smokers (OR=2.12, p<0.001).

Mean ED visits per patient increased post-COVID-19. Pre-pandemic exacerbators were more likely to be non-smokers, have higher GINA steps, and have prior pneumonia. Changes in healthcare-seeking behavior and air quality during lockdown may explain these trends.

References

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