GASTROINTESTINAL MANIFESTATIONS AND CLINICAL OUTCOMES OF ADULT PATIENTS ADMITTED FOR COVID-19 IN A TERTIARY HOSPITAL: A RETROSPECTIVE STUDY

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ABSTRACT

Objectives: This study aimed to determine the gastrointestinal manifestations, baseline laboratory profiles, and clinical outcomes of adult symptomatic patients admitted for COVID-19 at Vicente Sotto Memorial Medical Center from March to August 2020. Likewise, this study aimed to determine the association of baseline laboratory profiles and presence of gastrointestinal manifestations to patients' clinical outcomes.

Methodology: This is a retrospective analytical study. Charts of patients with COVID-19 were inspected; variables were then extracted for processing and analysis.

Results: A total of 571 symptomatic adult COVID-19 patients were included. The median age is 53 years, 53.24% were males, 67.78% have co-morbidities, 82.31% were non-smoker and 69.35% were non-alcoholic drinker. Most common non GI COVID-19 manifestations were fever, cough, and dyspnea. Gastrointestinal manifestations account for 19.26% with diarrhea, abdominal pain and loss of appetite as the most common presentations. The overall mortality rate is at 31.17%. Among patients who expired, 17.4% had gastrointestinal manifestations. No significant correlation was noted between the presence of gastrointestinal manifestations and clinical outcomes (p=0.493). Prolonged Prothrombin time (PR=2.09; p=0.0001); elevated C - Reactive Protein (PR=1.19; p=0.0001); and Procalcitonin of >2 ng/mL (PR= 1.68; p=0.0038) had significantly higher prevalence in expired than in discharged patients. Binary Logistic Regression analyses reveal that Eosinophil count (P=0.005) is a significant predictor of death. Death is less likely to occur as the Eosinophil count increases.

Conclusion: Presence of Gastrointestinal manifestations is not associated with any of the clinical outcomes, however, a prospective study is recommended for better analysis. Further studies are needed to support the use of eosinophils as predictor of death in COVID-19 patients.

Keywords. *COVID-19, Gastrointestinal manifestations, clinical outcome*