

KNOW THE RELATIONSHIP BETWEEN CHRONIC LUNG DISEASE AND COVID-19

COVID-19 spreads fast. In some people it can start with mild symptoms and quickly progress to more severe disease.



What is COVID-19?

Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus.¹ If you are infected with the virus, you will most likely experience mild to moderate respiratory illness.¹

Most people can expect to get better without needing special treatment, but some people can become very sick and require medical attention.¹

Are you at increased risk?

3 in 5 (60%)
adults in the United States
have a chronic disease²



The older you are, the greater the chance of having at least one medical condition that can put you at high risk of getting very sick from COVID-19.³

The likelihood of **having one or more such medical conditions** increases by³:

10% for people up to and including age **25 years**

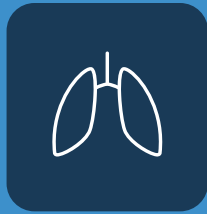
33% for people up to and including age **50 years**

66% for people up to and including age **70 years**

You are more likely to develop serious illness from COVID-19 if you have a condition or risk factor like⁴:



Heart conditions



Lung disease



Diabetes



Cancer



Racial, ethnic, and socioeconomic disparities



Overweight or obese



Immunocompromised condition



Age

This list does not include all possible conditions.

If you have diabetes, heart disease, lung disease, or cancer and you get COVID-19, **you are more likely to**⁴⁻⁸:

Get very sick

Be hospitalized

Need a machine to help you breathe

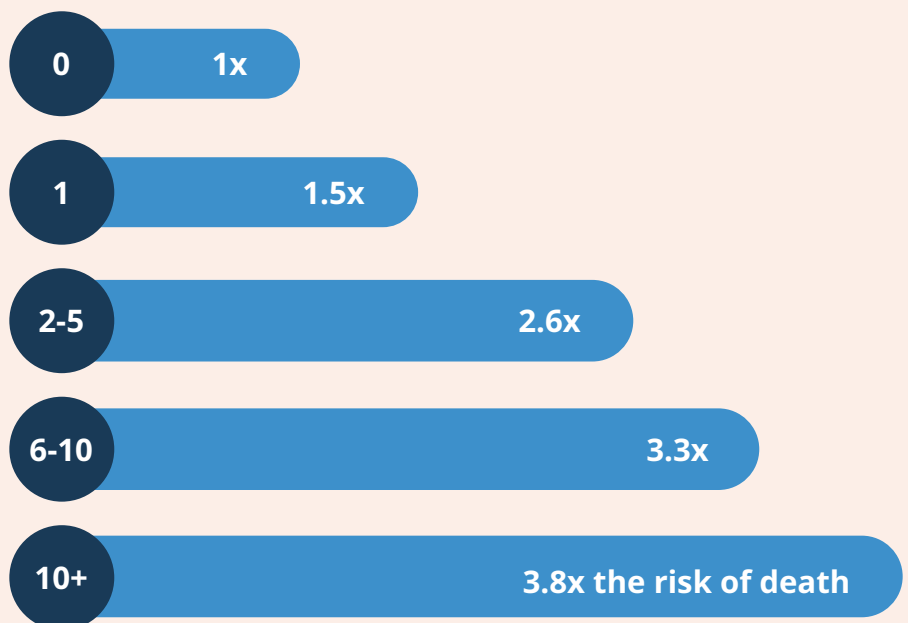
Need intensive care

Die

The number of high-risk medical conditions you have **increases your risk of death** from COVID-19^{4,7}:

● Number of high-risk medical conditions⁷

● Risk of death⁷



COVID-19 and chronic lung diseases

If you have a chronic lung disease, you are at **high risk of getting very sick and having complications** from COVID-19.^{4,9,10}



If you **smoke now or used to smoke**, your risk of getting very sick from COVID-19 is

1.5x

higher than for a person with no smoking history.⁷

People with **chronic obstructive pulmonary disease (COPD)** are older, and if they get COVID-19 they are

more than
2x

as likely to be hospitalized as those who do not have COPD and get COVID-19.¹¹

The risk of a COVID-19-related death is **more than doubled in people with COPD** versus those without COPD.¹¹

Chronic lung diseases can include:

BRONCHIECTASIS

The thickening of the lungs' airways, causing excess mucus that can make the lungs more vulnerable to infection¹²

CYSTIC FIBROSIS

A genetic disease that causes a thick liquid to build up in the lungs, and can start by 2 years of age¹⁴

MODERATE TO SEVERE ASTHMA

Daily occurrences of wheezing, breathlessness, chest tightness, and early morning or nighttime coughing that can cause an asthma attack¹⁶

PULMONARY EMBOLISM

A blood clot that develops and gets stuck in an artery in the lung that can restrict air flow and cause a stroke¹⁸

COPD

A group of diseases that cause airflow blockage and breathing problems, including emphysema and bronchitis¹³

OCCUPATIONAL LUNG DISEASE

Lung conditions that have been caused or made worse by long-term exposure or even single exposure to irritants in the workplace¹⁵

INTERSTITIAL LUNG DISEASE

A large group of diseases that causes damage or scarring to lung tissue, which makes it difficult to breathe and get oxygen to the blood stream¹⁷

PULMONARY HYPERTENSION

When the pressure in the blood vessels leading from the heart to the lungs is too high, the arteries narrow and the blood does not flow as well, which results in less oxygen in the blood¹⁹

If you think you have been infected with COVID-19, remember to **ACT** fast.

A

Assess for COVID-19 symptoms and your risk factors

C

Confirm that you have COVID-19 with your healthcare professional

T

Talk to your healthcare professional about treatment options

A

Assess for COVID-19 symptoms and your risk factors like a chronic lung disease

If you have been exposed to COVID-19, you may start having symptoms 2 to 14 days after exposure.²⁰ COVID-19 symptoms can be similar to other infections, like the flu.²¹

If you have flu-like symptoms, it may be COVID-19.²¹
Symptoms of COVID-19 can look like²⁰:



Congestion or runny nose



Headache



Cough



Muscle or body aches



Sore throat



Nausea or vomiting



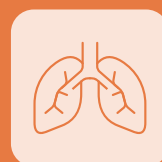
Fatigue



Diarrhea



New loss of smell and/or taste



Shortness of breath or difficulty breathing



Fever or chills

C

Confirm that you have COVID-19 with your healthcare professional

If you have any COVID-19 symptoms or test positive, **talk to your healthcare professional right away.**

If you do not have symptoms but think you've been exposed to COVID-19, wait at least 5 full days after exposure and then test for COVID-19 infection.²²



If you have COVID-19, **do not delay.** Even if your symptoms are mild, treatment must be started within days after you first develop symptoms to be effective.²³



If you find it hard to breathe, get **immediate medical attention.**¹⁰

T

Talk to your healthcare professional about treatment options



Treatment options for COVID-19 can be discussed to see if one is right for you.²³



These treatments must be taken within days if you begin having symptoms.²³



This is why it is so important to contact your healthcare professional as soon as possible.²³

References

1. World Health Organization. Coronavirus disease (COVID-19). Accessed October 12, 2022. https://www.who.int/health-topics/coronavirus#tab=tab_1
2. Centers for Disease Control and Prevention. Chronic diseases in America. Reviewed May 6, 2022. Accessed October 12, 2022. <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm>
3. Clark A, Jit M, Warren-Gash C, et al. How many are at increased risk of severe COVID-19 disease? Rapid global, regional and national estimates for 2020. Posted April 22, 2020. Accessed October 13, 2022. <https://doi.org/10.1101/2020.04.18.20064774>
4. Centers for Disease Control and Prevention. People with certain medical conditions. Updated September 2, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html#:~:text=Older%20adults%20are%20at%20highest,18%2D29%20years>
5. Centers for Disease Control and Prevention. Basics of COVID-19. Updated November 4, 2021. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/about-covid-19/basics-covid-19.html>
6. European Centre for Disease Prevention and Control. Risk factors and risk groups. Updated January 21, 2022. Accessed October 12, 2022. <https://www.ecdc.europa.eu/en/covid-19/latest-evidence/risk-factors-risk-groups>
7. Centers for Disease Control and Prevention. Underlying medical conditions associated with higher risk for severe COVID-19: information for healthcare professionals. Updated June 15, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html>
8. Gao YD, Ding M, Dong X, et al. Risk factors for severe and critically ill COVID-19 patients: a review. *Allergy*. 2021;76(2):428-455. doi:10.1111/all.14657
9. American Lung Association. Controlling chronic lung diseases amid COVID-19. Accessed November 8, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/covid-19/chronic-lung-diseases-and-covid>
10. World Health Organization. COVID-19: symptoms and severity. Updated April 18, 2022. Accessed October 12, 2022. <https://www.who.int/westernpacific/emergencies/covid-19/information/asymptomatic-covid-19>
11. National Institutes of Health. National EHR data resource reveals COVID-19's stark mortality risk in people with COPD. Updated March 23, 2022. Accessed October 7, 2022. <https://ncats.nih.gov/pubs/features/national-ehr-data-resource-reveals-covid-19-stark-mortality-risk-in-people-with-copd>
12. United Kingdom National Health Service. Bronchiectasis. Updated July 27, 2021. Accessed October 11, 2022. <https://www.nhs.uk/conditions/bronchiectasis/>
13. Centers for Disease Control and Prevention. Chronic obstructive pulmonary disease. Updated April 8, 2022. Accessed October 11, 2022. <https://www.cdc.gov/copd/index.html>
14. UnitedHealth Group. Cystic fibrosis. Accessed October 11, 2022. <https://justplainclear.com/en/term/cystic-fibrosis1536>
15. Johns Hopkins Medicine. Occupational lung disease. Accessed October 7, 2022. <https://www.hopkinsmedicine.org/health/conditions-and-diseases/occupational-lung-diseases>
16. Centers for Disease Control and Prevention. Asthma. Updated September 22, 2022. Accessed October 6, 2022. <https://www.cdc.gov/asthma/default.htm>
17. American Lung Association. Interstitial lung disease. Accessed October 7, 2022. <https://www.lung.org/lung-health-diseases/lung-disease-lookup/interstitial-lung-disease>
18. Johns Hopkins Medicine. Pulmonary embolism. Accessed October 7, 2022. <https://www.hopkinsmedicine.org/health/conditions-and-diseases/pulmonary-embolism>
19. Centers for Disease Control and Prevention. Pulmonary hypertension. Updated December 3, 2019. Accessed October 7, 2022. https://www.cdc.gov/heartdisease/pulmonary_hypertension.htm
20. Centers for Disease Control and Prevention. Symptoms of COVID-19. Updated August 11, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
21. Centers for Disease Control and Prevention. Similarities and differences between flu and COVID-19. Reviewed September 28, 2022. Accessed October 12, 2022. <https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm>
22. Centers for Disease Control and Prevention. What to do if you were exposed to COVID-19. Updated August 24, 2022. Accessed October 31, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/if-you-were-exposed.html>
23. Centers for Disease Control and Prevention. COVID-19 treatments and medications. Updated August 5, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/treatments-for-severe-illness.html>

