Gastrointestinal (GI) and Hepatic Manifestations Identified Through the Advocate Lutheran Coronavirus (ALCO) Database

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Introduction
SAR-CoV-2 is a new coronavirus first identified in Wuhan, China that has led to a global pandemic with an associated high mortality. Literature from Wuhan, China, has shown that digestive symptoms are also very common in those patients with COVID 19 infection in addition to elevated liver enzymes.

Objective
The ALCO database is being created at Advocate Lutheran General Hospital, Park Ridge, Illinois to evaluate the prevalence, incidence and outcomes of those patients with affected by COVID19 with GI manifestations.

Methods
Retrospective analysis was performed of all patients presenting to Lutheran General Hospital Emergency Department (ED) between March 1, 2020 to April 30,2020 due to an active COVID 19 infection identified by ICD Code 007.1COVID19. After comprehensive chart review, clinical features and laboratory values between those with digestive versus those without were compared.

Results
• 144 patient encounters have been analyzed from a total of 385 patients seen in the ED: 60 patients were treated in the ED and 82 were hospitalized.
• Those presenting with GI symptoms were more likely to be hospitalized (n=42, 61%) versus those without (n=34, 44%).
• Length of stay was greater in those presenting with GI symptoms (M1=5.43 days) versus those without (M2=4.42 days), (p =0.273, Mann–Whitney test.)
• No difference in mortality was seen.

Discussion
Preliminary data supports studies from China that GI symptoms are rather common secondary to COVID19. Initial trends from the ALCO database support that GI symptoms are indicative of severe disease characterized by increased inflammation, elevated transaminases and longer hospitalizations.

We hope continued investigation during the current outbreak will lead to more information to clarify the role of GI manifestations in COVID19.