Objectives: Pregnant and postpartum women may be particularly susceptible to pandemic-induced anxiety/depression, which can adversely affect maternal and infant health. This study investigates the COVID-19 concerns expressed by pregnant and postpartum women and their influence on health-related quality-of-life (HRQoL).

Methods: We conducted an online, national US survey (EuroQol grant: 260-2020RA) between May and June 2021. Respondents completed the EQ-5D-5L instrument. Two waves of web-based survey were conducted in April 2020 and 2021. We used median regression to estimate the EQ-5D-5L utility and EQ-VAS scores by level of maternal concerns.

Results: Among 2,070 respondents, pregnant and postpartum women commonly expressed strong concerns about giving birth during the pandemic (44%; 95% CI 39%, 48%), the health of their baby (44%; 95% CI 40%, 48%), and the health of their family (38%; 95% CI 34%, 42%), and being pregnant during the pandemic (38%; 95% CI 34%, 42%). Fewer respondents expressed strong concerns about their own health (27%; 95% CI 23%, 31%). Overall, there was no association between HRQoL measures and maternal concerns during COVID-19. Among women who gave birth during 2020 (n=536), each unit increase in concerns about being pregnant was associated a 0.02 decline in the EQ-5D-5L utility (95% CI -0.04, -0.01). No difference was observed in EQ-VAS scores (p=0.00, 95% CI -0.01, 0.01). No other differences in HRQoL were observed.

Conclusions: Overall, there was no relationship between maternal concerns during the COVID-19 pandemic and HRQoL. We observed small declines in HRQoL associated with concern of being pregnant during the pandemic among women pregnant early in the pandemic.

P64
EVALUATING THE IMPACT OF THE COVID-19 PANDEMIC ON MORTALITY AFTER MYOCARDIAL INFARCTIONS HOSPITALIZATION IN GERMANY

Krieger J, Hardstock F, Wilke T, Mayeur L, U S

Gytel Med, Berlin, Germany; Gytel Inc, New York, NY, USA; 2IAM e.V, Wismar, Germany; 3AOK PLUS, Dresden, Germany

Objectives: It was hypothesized that COVID-19 lockdown measures led to lower admission of myocardial infarction (MI) patients to hospitals and, consequently, higher case severity and mortality. The aim of this study was to compare MI-associated mortality between COVID-19 lockdown and pre-COVID-19 periods.

Methods: We used German claims data from continuously insured adults hospitalized with a MI (ICD-10 I21), and compared 30-days mortality for cases in March-May 2020 (first COVID lockdown in Germany) with March to May 2017-2019. Multivariable logistic regression models were conducted to test for differences in mortality between pre-COVID and COVID periods while controlling for patients’ age, sex, previous MIs (2-years baseline), and cardiovascular comorbidities.

Results: In 2020, we observed 758/612/712 MIs in March/April/May which was fewer MIs than the average for the same months between 2017-2019 (March: 901; April: 716; May: 853). Over the observational years, there was a shift towards younger patients (average age 2017: 77; 2020: 74), and the proportion of women decreased (2017: 42.54%; 2020: 39.10%). The length of the index-hospitalization was significantly lower during the COVID-19 pandemic (March-May 2017-2019: 9.19 days; March-May 2020: 8.11 days; p=0.001). Furthermore, the number of deceased patients was lower during the COVID lock down period (March 2017-2019: 16.53% vs. March 2020: 14.12%; April: 17.15% vs. 16.99%; May: 16.72% vs. 13.48%). However, regression models showed no significant difference between COVID and pre-COVID months except for May (OR COVID vs. pre-COVID: 0.73, p=0.014). Conclusions: Even if we cannot rule out the possibility of a higher MI-related mortality during COVID lockdown periods in non-hospitalized MI patients, we cannot confirm the hypothesis that hospitalized patients generally showed a higher mortality due to later admission to hospitals and thus more higher case severity at time of hospital admission.

Using Real World Data to Assess Patient Outcomes

P65
HEALTH CARE RESOURCE UTILIZATION AND POTENTIAL DISEASE DETERIORATION AFTER HERPES ZOSTER INCIDENCE IN PATIENTS WITH UNDERLYING CONDITIONS: A RETROSPECTIVE COHORT STUDY BASED ON GERMAN CLAMS DATA, 2007-2018

Witte J, Baramat M, Schwarz M, Hain J, Ulfats B, Steinmann M, Bhashar AB, Greiner W

1Department for Health Economics and Health Care Management, Bielefeld University, Bielefeld, Germany; 2Department for Economics, Bielefeld University, Bielefeld, Germany; 3GSK, Munich, Germany; 4GSK, Munich, BY, Germany; 5GSK: Vaccines, Werr, WER, Belgium

Objectives: This study aimed to investigate potential disease deterioration for underlying conditions (UCs): chronic obstructive pulmonary disease, rheumatoid arthritis, type 1 or 2, depression, coronary heart disease, chronic heart failure (CHF), and rheumatoid arthritis) after an acute herpes zoster (HZ) using health care resource utilization (HCRU) and disease-specific worsening indicators. Methods: Analyses were based on German claims data, representing 13% of the German statutory health insurance population (corresponding to 87% of the entire German population). Patients aged ≥18 years with UCs were included when an incident HZ-diagnosis (defined by International Classification of Diseases and prescription of an antiviral drug) was reported between 08/2008-07/2018 before the HZ and not within the observational period using propensity scores. HCRU was analyzed for four quarters prior and eight quarters after acute HZ. Regression models...