**Persons with Serious Mental Illness or Substance Use Disorder Prioritization for COVID Vaccination**

Persons with Serious Mental Illness or Substance Use Disorder should be part of the CDC Phase 1c Cohort

* People aged 65—74 years because they are at high risk of hospitalization, illness, and death from COVID-19. People aged 65—74 years who are also residents of long-term care facilities should be offered vaccination in Phase 1a.
* People aged 16—64 years with underlying medical conditions which increase the risk of serious, life-threatening complications from COVID-19.
* Other essential workers, such as people who work in transportation and logistics, food service, housing construction and finance, information technology, communications, energy, law, media, public safety, and public health.

Justifacation – Persons with SMI or SUD meet the second criteria - People aged 16—64 years with underlying medical conditions which increase the risk of serious, life-threatening complications from COVID-19.

1. People with severe mental disorders on average tend to die earlier than the general population. This is referred to as premature mortality. There is a 10-25 year life expectancy reduction in patients with severe mental disorders. The vast majority of these deaths are due to chronic physical medical conditions such as cardiovascular, respiratory and infectious diseases, diabetes and hypertension.

<https://www.who.int/mental_health/management/info_sheet.pdf>

<https://www.nasmhpd.org/sites/default/files/Mortality%20and%20Morbidity%20Final%20Report%208.18.08_0.pdf>

1. The increased incidence of COVID-19 among individuals with mental disorders has been reported in at least 2 nationwide cohort studies in the US

<https://onlinelibrary.wiley.com/doi/10.1002/wps.20806>

<https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(20)30462-4/fulltext>

1. In a cohort study of 7348 adults with laboratory-confirmed COVID-19 in a New York health system after adjusting for demographic and medical risk factors, investigators found that patients who had been diagnosed with schizophrenia were two to three times more likely to die of COVID-19 if they contracted the disease.

<https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2775179>

1. A Swedish cross-sectional, population-based analysis of 7.9 million patients, 103,999 with severe mental disorders and 7.8 million in the control group found that persons with SMI without other medical risk factors had had three-fold odds of COVID-19 associated death compared to persons without SMI.

<https://www.frontiersin.org/articles/10.3389/fpsyt.2020.609579/full>

1. In a retrospective case-control study of electronic health records (EHRs) data of 73,099,850 unique patients, of whom 12,030 had a diagnosis of COVID-19. Patients with a recent diagnosis of SUD (within past year) were at significantly increased risk for COVID-19 of 8.7 X persons without SUD.

<https://www.nature.com/articles/s41380-020-00880-7>

<https://jamanetwork.com/journals/jama/fullarticle/2772258#:~:text=Having%20a%20substance%20use%20disorder,2019%20in%20a%20recent%20study.&text=Volkow%20and%20her%20coauthors%20conducted,030%20with%20diagnosed%20COVID%2D19>.

1. Analysis of electronic medical record (EMR) data from 35 health care organizations representing hospitals, primary care clinics, and specialty treatment providers of 54,529 adult patients (≥18 years) diagnosed as having COVID-19 between February 20 and June 30, 2020 found persons with SUD had higher rates of hospitalization (2.3X), ventilator use (2.0X), and mortality (1.8X) within 21 days of COVID-19 diagnosis versus non–substance use disorder cohorts.

<https://ps.psychiatryonline.org/doi/full/10.1176/appi.ps.202000534>