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Letter to Editor

LETTER TO EDITOR

COVID-19 and diabetes—double whammy

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The article by Zhan *et al.*[1] is an excellent documentation of the importance of good glycaemic control in improving prognosis in coronavirus disease 2019 (COVID-19) among patients with type 2 diabetes mellitus. However, there are certain findings which can be discussed further:

- The population was divided into well-controlled and poorly controlled glycaemic status based on a single emergency visit or admission blood sugar value. The patients who are admitted in emergency having severe COVID-19 may have started medications including corticosteroids before admission which can affect this stat measurement. A more reliable parameter like Hemoglobin A1c (HbA1c) could have been preferred or additionally measured as this delineation into the two groups was essential to study the prognosis and outcome.[2]
- Besides, the glycaemic control during the hospital stay especially in patients admitted in intensive care could have been studied in a sub-group analysis to further help understand the importance of glycaemic control in a favourable patient outcome. If the outcome is worse in patients who are admitted with deranged glycaemic control despite optimization with use of drugs and insulin during hospital stay, the pathophysiological links between severe COVID-19 due to baseline hyperglycaemia will be strengthened.[3]
- It is clear that fatigue was the most common sequelae seen in over 30% of patients. The older population (median age of 65 years) and over 40% severe COVID-19 requiring oxygenation or ventilatory support could have led to deconditioning and increased prevalence of fatigue. However, the classification of short breath in cardiovascular sequelae while dyspnoea in respiratory sequelae is unclear. This is particularly important as authors have claimed that respiratory sequelae were lower in patients with glycaemic control.

However, the article is a constant reminder to all healthcare professionals and the population at large, for having a good glycaemic control to have an improved outcome and prognosis in COVID-19, which is particularly relevant in severe cases and can help decrease mortality.

Conflict of interest. None declared.

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