## Comments on: Rise of the phoenix: Mucormycosis in COVID-19 times

Dear Editor,

We read the paper titled "Rise of the phoenix: Mucormycosis in COVID-19 times" by Ravani and colleagues[1] with great interest and would like to congratulate all the authors for reporting a relatively large case series from India of high public health importance at the moment. However, some corrections are in order and justified. First, it appears that authors have confused about the unit of glycated hemoglobin (HbA1c) and used mmol/mol and % interchangeably across the manuscript and sometimes reported without any unit, which is summarily incorrect. While the abstract reads "HbA1c value of ≥8 were found to be significant in the prediction of survival of patients with mucormycosis," the body of the manuscript reads "the average value of HbA1c of these patients was 7.57 mmol/mol" at one place, and "HbA1c≥8 mmol/mol and cerebral involvement were associated with high mortality" at another place. We suggest authors to correct these figures to either % (which seems to be case here) or convert it to mmol/mol or put value of both units (ideally) everywhere in the manuscript, accordingly. Just to recapitulate that the unit of HbA1c by the National Glycohemoglobin Standardization Program (NGSP) approved by Diabetes Control and Complication Trial (DCCT) is expressed as %, while HbA1c is expressed in mmol/mol as recommended by the International Federation of Clinical Chemistry (IFCC). All trials and studies of diabetes express HbA1c in both units currently. An HbA1c of 8.0% is equivalent to 64 mmol/mol.<sup>[2]</sup> Second, while the manuscript says patients received intravenous dexamethasone in a dose of 0.1 to 0.2 mg/kg body weight for the mild to moderate and 0.4 mg/kg body weight for severe COVID-19, Table 2 reads intravenous methylprednisolone instead. It is confusing exactly what steroid did these patients receive finally? Third, the manuscript says "statistical analysis was done using Chi-square test and a P value  $\leq 0.05$  was taken as significant." P value is only significant when it is < 0.05, not  $\le 0.05$ . Based on this fact, the location of mucormycosis in Table 6 deemed insignificant. Finally, the manuscript mentioning type II and type I diabetes mellitus should be replaced by type 2 and type 1 diabetes mellitus, because that terminology is obsolete for a decade, for multiple reasons.

Nonetheless, we fully agree with the authors that an unholy trinity of diabetes, rampant use of corticosteroid, and immune change created by COVID-19 itself do exists that appears to creates an ideal environment for mucormycosis spores to grow, as evident from a recent systematic review of 101 cases of mucormycosis in COVID-19 from the world including India. [4]

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## **Conflicts of interest**

There are no conflicts of interest.

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