

## ELEMENTS: IN THIS MONTH'S ISSUE

# Coronavirus disease 2019—lessons learnt

Seamas C. Donnelly

Editor-in-Chief QJM

## Well-controlled diabetes not a contraindication for intensive care unit care in acute coronavirus disease 2019 infection

Those of us responsible for the in-patient care of coronavirus disease 2019 (COVID-19) patients over the last 2 years know that difficult decisions were made in relation to which patients were for escalation of treatment beyond ward-based care. Early on in the pandemic, it was recognized that certain pre-existing disease states were associated with a significant adverse prognosis and consequently influenced our decisions. These comorbidities included chronic heart failure, chronic renal failure, hypertension, chronic lung conditions and diabetes. As hospital resources, and in particular intensive care unit resources, were stretched during each of the COVID-19 surges—oftentimes a single co-morbidity significantly influenced the decision to escalate or not.

The QJM has over recent months published seminal articles in relation to prognosis and outcome for COVID-19 infection.<sup>1–6</sup> We are now heading into the third year of the pandemic and it is important that we highlight lessons learnt over that time to better inform future infectious epidemic/pandemics. We therefore wish to highlight the important study by Dr Zhan and colleagues from Southwest Medical University, and the Army Medical University, China in which they prospectively evaluated the association between glycaemic control on hospital presentation and outcome in 574 COVID-19 patients with type-2 diabetes in Wuhan, China followed for up to 12 months.

Reported mortality in pre-OMICRON COVID-19 infection for the general population with no underlying health conditions is 3%.<sup>7</sup> In this study, researchers reported a significant 75% reduction in mortality in the well-controlled diabetic group compared to the poorly controlled diabetes cohort with a mortality of 2.5%. In the context of lessons learnt—we need to refine our criteria for diabetic patients admitted to hospital with COVID-19 infection in the context of the decision to escalate beyond

ward-based care—a history of well-controlled disease has the same prognosis as the healthy population.

## Invitation to submit photographs for the QJM cover

A call to all you budding photographers—we extend an invitation to you to submit photographs for consideration for the cover of the QJM. Photographs can be in black and white or colour and of high definition (>300 dpi, File size <5 MB). In general, we avoid photographs where individuals are in the photo who can be identified. Please provide a brief caption and include a credit for the photographer or artist. Please email your images to [qjmedj.oup@kwglobal.com](mailto:qjmedj.oup@kwglobal.com).

## References

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