Role of micronutrients in the management of coronavirus disease 2019

M. AbdAllah¹, H. Ez Elarab², E. Raslan³, L. Saber⁴, E. Daoud¹ and M. Saber¹

I Complementary Medicine Department, Medical Research Division, National Research Centre, Giza, Egypt, 2 Department of Community, Environmental and Occupational Medicine, Faculty of Medicine, Ain Shams University, 3 Family Medicine Department, Faculty of Medicine, Cairo University and 4 Department of Medical Biochemistry, Al-Azhar University, Cairo, Egypt

Abstract

Micronutrients play an important role in enhancing the immune system, therefore, proper nutritional support of micronutrients could have a positive impact on COVID-19 outcome.

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 $\textbf{Corresponding author:} \ M. \ AbdAllah, \ National \ Research \ Centre,$

Dokki, Giza, Egypt.

E-mail: dr.mohamedabda@gmail.com

To the Editor,

Coronavirus disease-19 (COVID-19) is a highly contagious disease that is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which is a single-stranded RNA virus that was identified in China in December 2019 [1].

The disease has an asymptomatic or mild course in 80% of cases where fever, cough and sore throat are its most common presentations [2]. Host immunological response against SARS-CoV-2 can affect the disease outcome. Higher levels of interleukin-6, interleukin-10 and tumour necrosis factor- α are associated with poor outcome [3].

Micronutrients play an important role in the immune system and consequently could have a positive impact on COVID-19 outcome [4]. Antioxidants enhance natural killer cells and lymphocytic activity and increase interleukin-2 production [5]. Vitamin D is vital for the protection of the respiratory tract through its role in preserving tight junctions, killing enveloped viruses and inducing cathelicidin and defensins. It also reduces the risk of cytokine storm by decreasing the production of proinflammatory cytokines. However, poor sun exposure during hospitalization or home isolation may aggravate vitamin D deficiency [6]. Additionally, zinc has an inhibitory effect on the RNA-dependent RNA polymerase of SARS-CoV-2 by binding and elongation in Vero-E6 cells [7].

Based on these data, the nutritional state of individuals with COVID-19 may affect the progression and outcome of the illness. Despite the absence of any reports on malnutrition inside hospitals or in home isolation during the COVID-19 pandemic, conditions such as chewing problems, physical disabilities and cognitive disturbance may precipitate malnutrition [8].

According to the Egyptian guidelines for the management of COVID-19, daily supplementation of vitamin C (I g) and zinc (50 mg) is mandatory for all symptomatic cases. Most patients receive these requirements through pharmaceuticals. As a consequence, drug shortages have been reported. Shifting to natural sources of these elements has become preferable to ensure delivery of the needed requirements each day.

The complementary medicine department of the National Research Centre has developed nutritional recommendations for natural micronutrient supplementation in individuals with COVID-19. These recommendations are based on the dietary supplement fact sheets of the US National Institutes of Health. Antioxidants and trace elements should be supplied in adequate amounts, as described in Table 1. Supplementation is described as daily value. This unit was developed by the US Food and Drug Administration to help consumers to compare the nutrients of food and dietary supplements.

Proper nutrition can also play a role in prophylaxis against COVID-19. Some reports recommend a Mediterranean diet

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TABLE 1. Daily suggested amounts of micronutrients to be delivered to COVID-19 patients^a

Micronutrient	Recommended dietary allowances				
	Male	Female	Source	Micrograms per source unit	Daily value (%) ^b
Vitamin A	900 µg	700 µg	Beef liver, pan-fried, 85 g Sweet potato, baked in skin, 117 g Spinach, frozen, boiled, 125 g Carrots, raw, 125 g	6582 1403 573 459	731 156 64 51
Vitamin D	15 µg	15 µg	Salmon, cooked, 85 g Mushrooms, white, raw, sliced, exposed to UV light, 125 g Milk, 2% milk-fat, vitamin D fortified, 250 g	570 366 120	71 46 15
Vitamin C	90 mg	75 mg	Red pepper, sweet, raw, 125 g Orange juice, 187.5 g Orange, 88 g	95 93 70	106 103 78
Zinc	II mg	8 mg	Oysters, cooked, breaded and fried, 85 g Beef chuck roast, braised, 85 g Crab, cooked, 85 g	74.0 7.0 6.5	673 64 59
Folate	400 µg	400 µg	Beef liver, braised, 85 g Spinach, boiled, 125 g Breakfast cereals, 50 g Rice, white, medium-grain, cooked, 125 g	215 131 100 90	54 33 25 22
Vitamin E	II mg	II mg	Almonds, dry roasted, 28 g Sunflower oil, 1 tablespoon Hazelnuts, dry roasted, 28 g	6.8 5.6 4.3	45 37 29

^aThese data are based on the US NIH dietary supplement fact sheet (available from: https://www.federalregister.gov/documents/2017/10/02/2017-21019/food-labeling-revision-of-the-nutrition-and-supplement-facts-labels-and-serving-sizes-of-foods-that).

plan as the most suitable pattern to be followed in quarantine [5,9]. Unfortunately, however, lockdown and the other community preventive measures may affect people's diet plans. Boredom and stress may lead to large caloric intake, mainly carbohydrates. Carbohydrates enhance serotonin production, which aids in stress relief; natural sources such as bananas, cherries and oats may be healthier alternatives [5]. More studies are needed to improve nutritional plans as a complementary factor for both prophylaxis and treatment of COVID-19.

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Conflict of interest

The authors declare that there are no conflicts of interest in relation to this article.

References

- Alanagreh L, Alzoughool F, Atoum M. The human coronavirus disease COVID-19: its origin, characteristics, and insights into potential drugs and its mechanisms. Pathogens 2020;9:331.
- [2] Kakodkar P, Kaka N, Baig MN. A comprehensive literature review on the clinical presentation, and management of the pandemic coronavirus disease 2019 (COVID-19). Cureus 2020;12:e7560.
- [3] Pedersen SF, Ho YC. SARS-CoV-2: a storm is raging. J Clin Invest 2020:130:2202-5.
- [4] Carr AC. Micronutrient status of COVID-19 patients: a critical consideration. Crit Care 2020;24:349.
- [5] Muscogiuri G, Barrea L, Savastano S, Colao A. Nutritional recommendations for CoVID-19 quarantine. Eur J Clin Nutr 2020;74:850–1.
- [6] Grant WB, Lahore H, McDonnell SL, Baggerly CA, French CB, Aliano JL, et al. Evidence that vitamin D supplementation could reduce risk of influenza and COVID-19 infections and deaths. Nutrients 2020;12:988.
- [7] te Velthuis AJ, van den Worm SH, Sims AC, Baric RS, Snijder EJ, van Hemert MJ. Zn²⁺ inhibits coronavirus and arterivirus RNA polymerase activity in vitro and zinc ionophores block the replication of these viruses in cell culture. PLoS Pathog 2010;6:e1001176.
- [8] Mehta S. Nutritional status and COVID-19: an opportunity for lasting change? Clin Med (Lond) 2020;20:270–3.
- [9] Di Renzo L, Gualtieri P, Pivari F, Soldati L, Attina A, Cinelli G, et al. Eating habits and lifestyle changes during COVID-19 lockdown: an Italian survey. J Transl Med 2020;18:229.

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bDaily value (%) describes the ability of a certain amount and type of food to satisfy the recommended daily dietary allowance to satisfy the daily needs of a nutrient. Foods providing 20% or more of the daily value are considered to be high sources of a nutrient.