Information about COVID-19 and diabetes in adults

- There are no data demonstrating that COVID-19 affects patients with diabetes more frequently than in persons without diabetes.

- There are no data regarding the association of higher glucose levels and COVID-19 infection, but adverse clinical outcomes appear to be higher in patients with pneumonia if preprandial glucose levels are above 9 mmol/l. Importantly, good glycemic control reduces the risk of infection and severity.

- The risk of COVID-19 infection and adverse outcomes (Intensive care unit and death) is higher in the presence of associated comorbidities (coronary heart disease, heart failure, stroke, hypertension, chronic kidney disease, history of transplantation, and cancer), and in adults over the age of 65 years.

- The risk of being infected by COVID-19 exists regardless of the type of diabetes (type 1, type 2, other). There are no current data on the frequency of severe forms of COVID-19 in patients with different forms of diabetes (type 1 vs. type 2).

- Children with type 1 diabetes affected by COVID-19 appear to have moderate symptoms, and no severe forms were observed in children under 10 years of age.

- In the case of a COVID-19 infection - and any other infection - insulin requirements tend to increase. However, loss of appetite has also been reported and thus could lead to hypoglycemia. Therefore, more regular monitoring of blood glucose levels is recommended.

- Importantly, individuals with diabetes must preserve the continuity of care (e.g. through phone calls, video calls, or office visits).

- Do not hesitate to contact your provider in case of unexplained symptoms, polyuria, and polydipsia.

- In case of high fever (>40°) and/or difficulties breathing, you must contact your provider urgently.

- Antihypertensive medication should be continued unless the treating physician recommends otherwise.

- There is no clear evidence that the use of non-steroidal anti-inflammatory drugs (NSAIDs) is associated with adverse outcomes; their use should be discussed with the treating physician.

Baden, March 20, 2020