

Impact of Social Distancing Due to Coronavirus Disease 2019 on the Changes in Glycosylated Hemoglobin Level in People with Type 2 Diabetes Mellitus (*Diabetes Metab J* 2021;45:109-14)

Junghyun Noh

Division of Endocrinology and Metabolism, Department of Internal Medicine, Inje University Ilsan Paik Hospital, Goyang, Korea

The coronavirus disease 2019 (COVID-19) pandemic emerged in December, 2019, and is still in progress. Glycemic control in diabetic patients as well as diabetes itself has been identified as an important risk factor for COVID-19 outcomes including disease severity and mortality [1,2]. Close attention and timely, adequate care of diabetes are critical in the COVID-19 pandemic era. However, social distancing and stay-at-home policies which are essential during the COVID-19 pandemic, may result in changes to lifestyle behaviors that worsen glycemic control in diabetic patients. An international electronic survey detailed changes in lifestyle behaviors that reduced physical activity at all intensity levels (vigorous, moderate, walking, and overall), increased sitting time and unhealthy food consumption during social distancing due to COVID-19 [3]. These results suggest that lifestyle changes caused by the COVID-19 pandemic will adversely affect glycemic control in diabetic patients, although there is a lack of studies that assess the effects of behavior changes on glycemic control in diabetic patients during the COVID-19 pandemic.

Park et al. [4] reported that glycosylated hemoglobin (HbA1c) level was increased in the COVID-19 cohort (2019 to 2020) in people with type 2 diabetes mellitus (T2DM) but not in the non-COVID-19 cohorts defined at the same dates during the 2 previous years. This study included all T2DM patients aged ≥ 19 years who visited hospitals and had their HbA1c levels

measured during the designated periods. Many newly diagnosed diabetic patients usually experience a rapid decrease in HbA1c with proper management. Since access to health care services might be more difficult for patients who may be reluctant to visit health care facilities during the pandemic period, it is suspected that the number of newly diagnosed diabetic patients is smaller in the COVID-19 cohort. The different number of new-onset patients may affect changes in HbA1c level. It might be reasonable to exclude newly diagnosed patients from this study to clarify this suspicion. It is critical to identify the effect of the COVID-19 pandemic on glycemic control, to identify the factors that affect deterioration of glycemic control during the pandemic, and to find solutions for these issues. In that sense, Park et al.'s [4] study is a very important start.

CONFLICTS OF INTEREST

No potential conflict of interest relevant to this article was reported.

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Corresponding author: Junghyun Noh  <https://orcid.org/0000-0002-7964-0515>
Division of Endocrinology and Metabolism, Department of Internal Medicine, Inje University Ilsan Paik Hospital, 170 Juhwa-ro, Ilsanseo-gu, Goyang 10380, Korea
E-mail: jhnoh@paik.ac.kr

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