

Hospitalized COVID-19 patients with diabetes represent more than 20 percent of ICU population

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The COVID-19 pandemic presents new challenges for clinicians caring for infected patients with diabetes, according to new guidance published in the Endocrine Society's *Journal of Clinical Endocrinology &*

Metabolism.

Hospitalized patients with COVID-19 and diabetes need to receive glucose-lowering therapy in addition to other complex [medical management](#) as a way of minimizing risk for complications and death. However, appropriate glycemic management—including bedside glucose monitoring and insulin administration—requires intensive patient interactions and puts clinicians at risk.

"This manuscript provides guidance for [healthcare providers](#) caring for patients hospitalized for COVID-19 who also have a prior history of diabetes or who have high blood sugar levels at the time of hospitalization," said lead author Mary T. Korytkowski, M.D., of the University of Pittsburgh School of Medicine in Pittsburgh, Pa. "These healthcare providers are at risk for contracting COVID-19, and while glycemic management in the hospital improves patient outcomes, it also intensifies the amount of time with direct patient contact."

Clinicians may limit their risk of exposure by minimizing the use of IV insulin infusions and using remote glucose monitoring devices and non-insulin therapies when possible. Diabetes self-management by selected patients who are knowledgeable and capable of this in the hospital also can be considered as a way of limiting direct patient interactions. Clinicians should be aware that some medications used in treating COVID-19 [patients](#), including glucocorticoids and hydroxychloroquine, can affect blood glucose levels.

More information: Mary Korytkowski et al, A Pragmatic Approach to Inpatient Diabetes Management during the COVID-19 Pandemic, *The Journal of Clinical Endocrinology & Metabolism* (2020). [DOI: 10.1210/clinem/dgaa342](#)

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