

MDS Alert

Care Planning: Beware Potential Effect of Diabetes on COVID-19 Infection

Keep everyone safe by knowing how to manage this chronic disease amidst COVID exposures.

Diabetes is a common chronic disease for residents in nursing facilities - and staff members may also be managing their own diabetes disease processes. New data suggests that people who have type 1 or type 2 diabetes are at an increased risk for more serious symptoms if infected with SARS-CoV-2, the virus that causes COVID-19 infection. Although researchers and providers are still learning about how diabetes affects the disease process of COVID-19, the knowledge gained so far suggests that nursing facilities should carefully manage residents' diabetes and encourage any affected staff to be quite attentive and careful as well.

"The ongoing COVID-19 pandemic has only underscored the importance of diabetes management since we know that people with diabetes are more likely than others to become severely ill if infected. Higher prevalence of disease and greater likelihood of severe outcome suggests we need to support people with diabetes by helping them effectively manage their condition and minimize exposure to the virus," said **Celeste Philip, MD, MPH**, deputy director for noninfectious diseases and deputy incident manager for COVID-19 Response at the Centers for Disease Control and Prevention (CDC) in Atlanta, in a recent Clinician Outreach and Communication Activity (COCA) call on diabetes and COVID-19.



Understand Role of Social Determinants of Health

Social determinants of health (SDoH) are receiving more focus during the COVID-19 pandemic as public health officials and doctors realize how home, neighborhood, and regional environments affect health in general - and contribute to COVID-19 infection specifically. With the data available to the CDC, researchers are noting that many of the people infected with COVID-19 and requiring hospitalization or dying are older, black, and have chronic disease comorbidities like obesity or diabetes, Dr. Philip said.

"The COVID-19 pandemic has highlighted persistent health disparities in the United States. Racial and ethnic minority groups are at higher risk for severe complications from COVID-19 due to increased prevalence of diabetes, cardiovascular disease, and underlying conditions in the population. Social determinants of health including factors related to housing, economic stability, and work circumstances may also contribute to the disproportionate impact of COVID-19 on racial and ethnic minorities," she said.

Nursing facilities should carefully monitor and manage the diabetes of any resident who has type 1 or type 2 diabetes. "What we do know at this time is that people of any age with certain underlying conditions are at an increased risk for severe illness from COVID-19, including people with type 2 diabetes," said **Sharon Saydah, PhD**, commander of the epidemiology task force for COVID-19 Response at CDC.



Adjust Care Plan to Address These Mitigations

If your residents require multiple medications dispensed multiple times a day, consider working with their clinicians to adjust their medication schedule.

"For patients who rely on caregivers, simplification will also minimize the amount of face-to-face interaction, thereby

reducing the potential exposure to COVID-19. Consolidating daily medications to once or twice daily dosing and reducing polypharmacy can be another helpful way to decrease treatment burden," say **Sarah L. Sy, MD**, and **Medha N. Munshi, MD**, at Joslin Diabetes Center and Harvard Medical School in Boston, in a July 2020 "Viewpoint" letter in JAMA Internal Medicine.

Make sure to include residents in their own care plans, despite social distancing. Since long-term care populations are made up of people with various diseases and conditions, often within a single resident, diabetes management must be particularly individualized, says Munshi et al in "Management of Diabetes in Long-Term Care and Skilled Nursing Facilities" in Diabetes Care Volume 39 Number 2.

"When people are living with a disease like diabetes, it does require their involvement. They are the center of the treatment plan, that having that support, that reassurance, particularly during something like COVID-19, this pandemic, is really vital," said **Ann Albright, PhD, RD**, director of Division of Diabetes, at CDC.

Protect Staff, Too

Extend extra protections for staff who may be at higher risk, too. "... Healthcare providers who care for confirmed or suspected COVID-19 patients should adhere to the standard transmission-based precautions. To the extent feasible, healthcare facilities should consider prioritizing healthcare professionals who are not at higher risk of developing severe illness from COVID-19 or who are not pregnant to care for confirmed or suspected COVID-19 patients," Commander Saydah said.