

KNOW THE RELATIONSHIP BETWEEN TYPE 1 OR TYPE 2 DIABETES AND COVID-19

COVID-19 spreads quickly. In some people it can start with mild symptoms and quickly progress to more severe disease.



What is COVID-19?

Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus.¹ If you are infected with the virus, you will most likely experience mild to moderate respiratory illness.¹

Most people can expect to get better without needing special treatment, but some people can become very sick and require medical attention.¹

Are you at increased risk?

3 in 5 (60%)
adults in the United States
have a chronic disease²



The older you are, the greater the chance of having at least one medical condition that can put you at high risk of getting very sick from COVID-19.³

The likelihood of **having one or more such medical conditions** increases by³:

10% for people up to and including age **25 years**

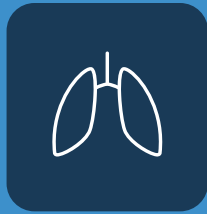
33% for people up to and including age **50 years**

66% for people up to and including age **70 years**

You are more likely to develop serious illness from COVID-19 if you have a condition or risk factor like⁴:



Heart conditions



Lung disease



Diabetes



Cancer



Racial, ethnic, and socioeconomic disparities



Overweight or obese



Immunocompromised condition



Age

This list does not include all possible conditions.

If you have diabetes, heart disease, lung disease, or cancer and you get COVID-19, **you are more likely to**⁴⁻⁸:

Get very sick

Be hospitalized

Need a machine to help you breathe

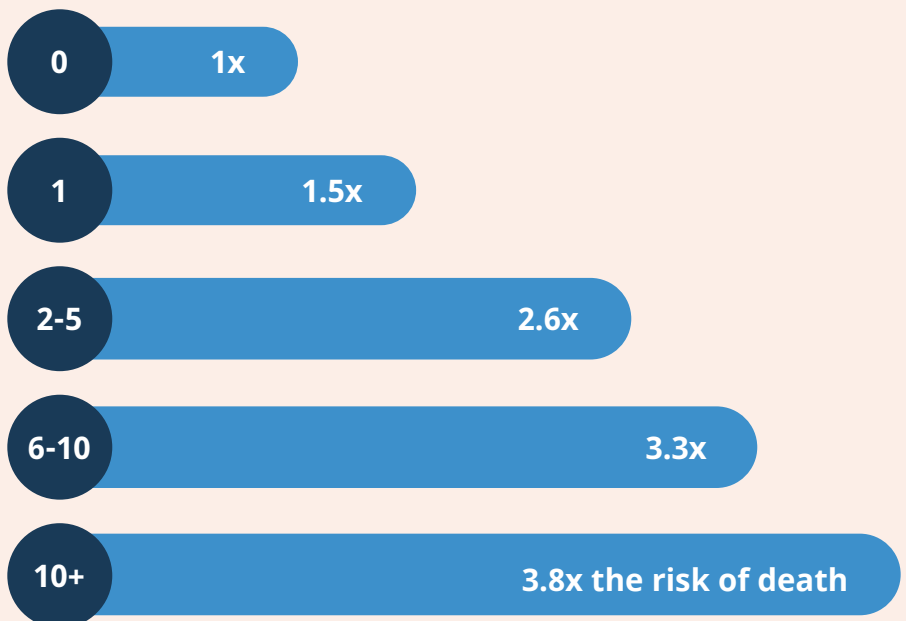
Need intensive care

Die

The number of high-risk medical conditions you have **increases your risk of death** from COVID-19^{4,7}:

● Number of high-risk medical conditions⁷

● Risk of death⁷



COVID-19 and type 1 and type 2 diabetes

If you have type 1 or type 2 diabetes, you are:

2-4x more likely to get very sick from COVID-19 than a person who does not have diabetes.⁹

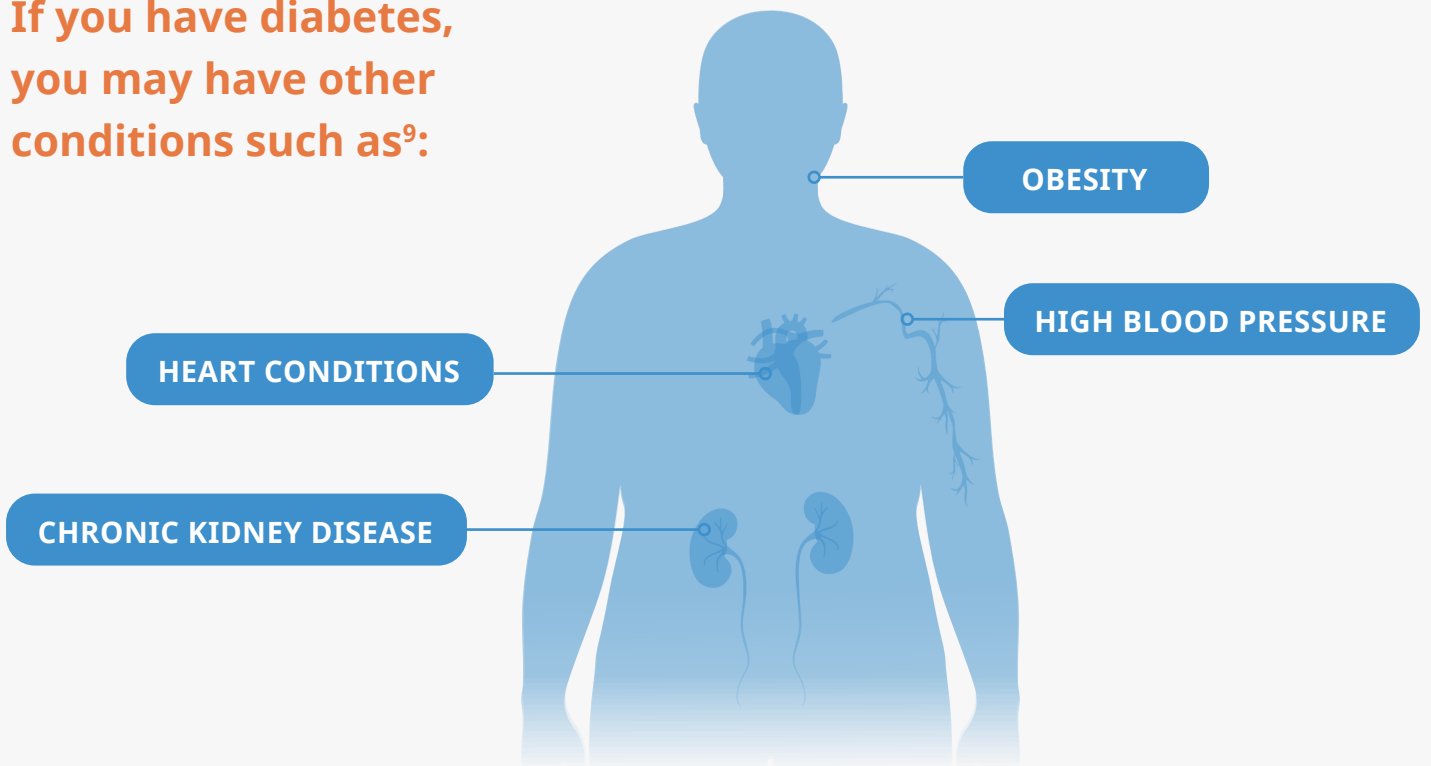
almost **1.75x** more likely to die compared with someone who does not have diabetes.¹⁰

Type 1 diabetes has appeared to have a slightly higher risk for negative COVID-19–related outcomes in recent studies.⁹

More than **12%** of people with diabetes and COVID-19 needed a machine (ventilator) to help them breathe.¹⁰

Almost **19%** of people with diabetes and COVID-19 spent time in an intensive care unit.¹⁰

If you have diabetes, you may have other conditions such as⁹:



When people with diabetes develop a viral infection, like COVID-19, it can be harder to treat due to changes in blood glucose levels. This can be because¹¹:

The immune system is being compromised, which makes it harder to fight infections and leads to longer recovery periods.

The virus may thrive in an environment of high blood glucose.

If you think you have been infected with COVID-19, remember to **ACT** fast.

A

Assess for COVID-19 symptoms and your risk factors

C

Confirm through COVID-19 testing

T

Talk to your healthcare provider about treatment options

A

Assess for COVID-19 symptoms and your risk factors like type 1 or type 2 diabetes

If you have been exposed to COVID-19, you may start having symptoms 2 to 14 days after exposure.¹² COVID-19 symptoms can be similar to other infections, like the flu.¹³

If you have flu-like symptoms, it may be COVID-19.¹³
Symptoms of COVID-19 can look like¹²:



Congestion or runny nose



Headache



Cough



Muscle or body aches



Sore throat



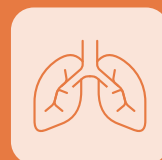
Nausea or vomiting



New loss of smell and/or taste



Fatigue



Shortness of breath or difficulty breathing



Diarrhea



Fever or chills

C

Confirm through COVID-19 testing

If you have any COVID-19 symptoms, **get tested as soon as possible**.¹⁴

If you think you have been exposed to COVID-19, wait at least 5 full days after your last exposure, and then test for COVID-19 infection.¹⁴



If your test result is positive for COVID-19, **do not delay**. Let your healthcare provider know as soon as possible, even if your symptoms are mild.¹⁵



If you find it hard to breathe, get **immediate medical attention**.¹⁶

T

Talk to your healthcare provider about treatment options



Treatment options, including authorized oral treatments for COVID-19, can be discussed to see if one is right for you.¹⁵



These treatments must be taken within days if you begin having symptoms.¹⁵



This is why it is so important to contact your healthcare provider as soon as possible.¹⁵

References

1. World Health Organization. Coronavirus disease (COVID-19). Accessed October 12, 2022. https://www.who.int/health-topics/coronavirus#tab=tab_1
2. Centers for Disease Control and Prevention. Chronic diseases in America. Reviewed May 6, 2022. Accessed October 12, 2022. <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm>
3. Clark A, Jit M, Warren-Gash C, et al. How many are at increased risk of severe COVID-19 disease? Rapid global, regional and national estimates for 2020. Posted April 22, 2020. Accessed October 13, 2022. <https://doi.org/10.1101/2020.04.18.20064774>
4. Centers for Disease Control and Prevention. People with certain medical conditions. Updated September 2, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html#:~:text=Older%20adults%20are%20at%20highest,18%2D29%20years>
5. Centers for Disease Control and Prevention. Basics of COVID-19. Updated November 4, 2021. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/about-covid-19/basics-covid-19.html>
6. European Centre for Disease Prevention and Control. Risk factors and risk groups. Updated January 21, 2022. Accessed October 12, 2022. <https://www.ecdc.europa.eu/en/covid-19/latest-evidence/risk-factors-risk-groups>
7. Centers for Disease Control and Prevention. Underlying medical conditions associated with higher risk for severe COVID-19: information for healthcare professionals. Updated June 15, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinicalcare/underlyingconditions.html>
8. Gao YD, Ding M, Dong X, et al. Risk factors for severe and critically ill COVID-19 patients: a review. *Allergy*. 2021;76(2):428-455. doi:10.1111/all.14657
9. Landstra CP, de Koning EJP. COVID-19 and diabetes: understanding the interrelationship and risks for a severe course. *Front Endocrinol (Lausanne)*. 2021;12:649525. doi:10.3389/fendo.2021.649525
10. Kastora S, Patel M, Carter B, Delibegovic M, Myint PK. Impact of diabetes on COVID-19 mortality and hospital outcomes from a global perspective: an umbrella systematic review and meta-analysis. *Endocrinol Diabetes Metab*. 2022;5(3):e00338. doi:10.1002/edm2.338
11. International Diabetes Federation. COVID-19 and diabetes. Updated September 21, 2020. Accessed October 12, 2022. <https://www.idf.org/aboutdiabetes/what-is-diabetes/covid-19-and-diabetes/1-covid-19-and-diabetes.html>
12. Centers for Disease Control and Prevention. Symptoms of COVID-19. Updated August 11, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
13. Centers for Disease Control and Prevention. Similarities and differences between flu and COVID-19. Reviewed September 28, 2022. Accessed October 12, 2022. <https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm>
14. Centers for Disease Control and Prevention. What to do if you were exposed to COVID-19. Updated August 24, 2022. Accessed October 31, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/if-you-were-exposed.html>
15. Centers for Disease Control and Prevention. COVID-19 treatments and medications. Updated August 5, 2022. Accessed October 12, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/treatments-for-severe-illness.html>
16. World Health Organization. COVID-19: symptoms and severity. Updated April 18, 2022. Accessed October 12, 2022. <https://www.who.int/westernpacific/emergencies/covid-19/information/asymptomatic-covid-19>

