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Severe coronavirus disease 2019 in children and young adults



To the Editor:

DeBiasi et al¹ report that 3% of the pediatric patients who tested positive with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) at their center had a history of diabetes. Diabetes is currently listed by the Centers for Disease Control and Prevention as an underlying condition that places individuals at higher risk for severe illness. Two of the 5 patients with diabetes required hospitalization. Of the 2 patients, 1 patient with type 1 diabetes and brain injury required intensive care unit-level care. It would be informative to know the type of diabetes, duration of diagnosis, and glycemic control for those patients. Would the authors be able to provide these data, as well as whether the patients presented with symptoms related to diabetes vs symptoms related to SARS-CoV-2? Were any of the patients with SARS-CoV-2 newly diagnosed with diabetes?

At the Mount Sinai Kravis Children's Hospital, during the height of the pandemic in New York City, 10 pediatric patients (average age, 14.5 years; 8 female; 5 with newonset diabetes) were treated in the emergency department or hospitalized with diabetes related complications. Eight were found to be in diabetic ketoacidosis when presenting to the emergency department. Three patients tested SARS-CoV-2 positive, and 3 patients had symptoms suggestive of

SARS-CoV-2 and were in contact with sick family members. Compared with the prior 3 years at our children's hospital, no significant difference was noted in the number of patients with type 1 diabetes admitted or treated in the emergency department. There were also no significant differences in the number of newly diagnosed patients or severity of diabetic ketoacidosis.

To date, as part of the ongoing Type 1 diabetes COVID-19 Surveillance Study (www.tldexchange.org/COVID19) coordinated by the T1D Exchange, there have been more than 20 reported cases of SARS-CoV-2 nationally in pediatric patients with type 1 diabetes.

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 DeBiasi RL, Song X, Delaney M, Bell M, Smith K, Pershad J, et al. Severe coronavirus disease-2019 in children and young adults in the Washington, DC, Metropolitan Region. J Pediatr 2020;223:199-203.e1.

Reply



To the Editor:

In our interim report describing the first 177 severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)-positive symptomatic pediatric patients presenting for care at our institution, 5 patients (3%) had an underlying diagnoses of diabetes. All 5 of these patients were female, ranging from 13 to 20 years of age. Four of the 5 patients had type 2 diabetes and only 1 patient had type 1 diabetes. All of the patients had been diagnosed with diabetes from 1.5 to 9.0 years before their SARS-CoV-2 infection; none of these patients had new-onset diabetes and none presented in diabetic ketoacidosis.

Two of the 5 patients did not require hospitalization and both presented with symptoms referable to respiratory infection, rather than any exacerbation related to their underlying type 2 diabetes. One patient presented primarily with minor upper respiratory symptoms without hypoxia. This patient did not present with hyperglycemia or hypoglycemia, but had a history of poor glycemic control despite metformin therapy with consistently and markedly elevated A1C documented as recently as 3 months before infection with SARS-CoV-2. The second patient, who also had asthma as