

EUROPEAN ENDOCRINOLOGY AND DIABETES CONGRESS

August 22-23, 2022 | Webinar

Diabetes does not increase the risk of hospitalization due to COVID-19 in patients aged 50 years or older in primary care—APHOSDIAB—COVID-19 multicenter study**Domingo Orozco-Beltrán***San Juan de Alicante, Spain*

Abstract: The purpose of this study was to identify clinical, analytical, and sociodemographic variables associated with the need for hospital admission in people over 50 years infected with SARS-CoV-2 and to assess whether diabetes mellitus conditions the risk of hospitalization. A multicenter casecontrol study analyzing electronic medical records in patients with COVID-19 from 1 March 2020 to 30 April 2021 was conducted. We included 790 patients: 295 cases admitted to the hospital and 495 controls. Under half (n = 386, 48.8%) were women, and 8.5% were active smokers. The main comorbidities were hypertension (50.5%), dyslipidemia, obesity, and diabetes (37.5%). Multivariable logistic regression showed that hospital admission was associated with age above 65 years (OR from 2.45 to 3.89, ascending with age group); male sex (OR 2.15, 95% CI 1.47–3.15), fever (OR 4.31, 95% CI 2.87–6.47), cough (OR 1.89, 95% CI 1.28–2.80), asthenia/malaise (OR 2.04, 95% CI 1.38–3.03), dyspnea (4.69, 95% CI 3.00–7.33), confusion (OR 8.87, 95% CI 1.68–46.78), and a history of hypertension (OR 1.61, 95% CI 1.08–2.41) or immunosuppression (OR 4.97, 95% CI 1.45–17.09). Diabetes was not associated with increased risk of hospital admission (OR 1.18, 95% CI 0.80–1.72; p = 0.38). Diabetes did not increase the risk of hospital admission in people over 50 years old, but advanced age, male sex, fever, cough, asthenia, dyspnea/confusion, and hypertension or immunosuppression did.

Biography

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