14/07/22 20.45



hamzah fkmunsri <hamzah@fkm.unsri.ac.id>

1 June 2022 at 08:24

1 June 2022 at 08:30

# Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review 23 messages

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hamzah fkmunsri <hamzah@fkm.unsri.ac.id> To: Jurnal Kesmas <jurnalkesmas.ui@gmail.com>

Faculty of Public Health, Universitas Sriwijaya, Indonesia

Date: 1.6.2022 Email: hamzah@fkm.unsri.ac.id

#### Submission of manuscript

Dear Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

Faculty of Public Health Universitas Indonesia G301 Building G 3rd Floor Kampus Baru UI Depok 16424 Phone: +62815 1141 6600

We kindly ask for consideration of our manuscript entitled: "Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review" in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue

Patients with diabetes are at greater risk of contracting COVID-19, which has a more severe course resulting in death. COVID-19 prevention is the most effective method of avoiding COVID-19 because of the disease's detrimental effect on diabetic patients and the lack of a treatment considered adequate for COVID-19.

By narrative literature review concluded that health education programs for diabetic patients regarding COVID-19 need to be improved to increase knowledge, encourage positive attitudes, and implement good COVID-19 prevention behaviours, among other things.

With the submission of this manuscript, we certify that this manuscript has neither been previously published nor is currently under consideration elsewhere, and we affirm that the script is an original work. We confirm that all authors have disclosed any actual or potential competing interests regarding the submitted article and the nature of those interests.

We hope that our manuscript is suitable for publication in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue

We look forward to hearing from you.

Yours sincerely,

Hamzah Hasyim (on behalf of all authors)

#### 5 attachments Title Page (with author details).docx 39K Manuscript (without author details).docx 110K Figure 1.docx 29K Figure 3.docx 296K Figure 2.docx 235K

hamzah fkmunsri <hamzah@fkm.unsri.ac.id> To: Patricia Dale <p.dale@griffith.edu.au>

Dear Prof Pat

Please see the following paper, which is also part of the special issue; in the meantime, we are awaiting comments from the editor or reviewers regarding the proofreading, in particular. Best

https://mail.google.com/mail/u/3/?ik=9fce323c14&view=pt&search=all&permthid=thread-a%3Ar4639936040390281760&simpl=msg-a%3Ar-42602328... 1/9

14/07/22 20.45

Sriwijaya University Mail - Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: ...



hamzah fkmunsri <hamzah@fkm.unsri.ac.id>

Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review - Please extend the submission.

4 messages

hamzah fkmunsri <hamzah@fkm.unsri.ac.id> To: Jurnal Kesmas <jurnalkesmas.ui@gmail.com>

#### Dear

Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

Please extend my new submission of the article. Currently, I am waiting for feedback for one of the coauthorships, like below.

I appreciate your flexibility.

Respectfully,

Hamzah Hasyim

------ Forwarded message ------From: Patricia Dale <p.dale@griffith.edu.au> Date: Sun, 5 Jun 2022 at 14:30 Subject: Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review To: <hamzah@fkm.unsri.ac.id>

Thanks Hamzah I will get it back to you in one or two days at latest. Best wishes Pat

School of Environment and Science, Centre for Planetary Health and Food Security, Griffith University, Nathan, Queensland, Australia 4111 Email: p.dale@griffith.edu.au

From: hamzah fkmunsri <hamzah@fkm.unsri.ac.id>
Sent: Sunday, 5 June 2022 1:48 pm
To: Patricia Dale cp.dale@griffith.edu.au>
Subject: Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review

Dear prof Pat,

Kindly see the manuscript entitled: "Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review," revised. Please recheck it.

The article has checked the author guidelines for Special Issue at https://journal.fkm.ui.ac.id/kesmas/about/submissions#authorGuidelines that the maximum word in the manus

In addition, please put you're signed in the image on the second page of the cover Letter for Submission of a paper manuscript.

Respectfully,

Hamzah Hasyim

On Sat, 4 Jun 2022 at 08:12, Patricia Dale <p.dale@griffith.edu.au> wrote: Dear Hamzah That is good. Now just to be clear. You will address the reviewer comments (don't worry about any about English), send the revised document to me and then I will fix the English easy for me). If that is all I have to do, it will not take a long time, depending on where I am and what else I am doing! Very best wishes Pat Emeritus Professor Pat Dale School of Environment and Science, Centre for Planetary Health and Food Security, Griffith University, Nathan, Queensland, Australia 4111 Email: p.dale@griffith.edu.au

On Thu, 2 Jun 2022 at 18:26, Jurnal Kesmas <jurnalkesmas.ui@gmail.com> wrote: | Dear Hamzah Hasyim,

Thank you for submitting to Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal). The manuscript will be considered for review. However, pl

Please also fill out the cover letter and statement letter.

Revision can be sent to the Editor by replying to this email no later than 4 days after receiving this email.

Thank you.

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nzah fkmunsri <hamzah@fkm.unsri.ac.id> 10 June 2022 at 08:43 Jurnal Kesmas <jurnalkesmas.ui@gmail.com></jurnalkesmas.ui@gmail.com></hamzah@fkm.unsri.ac.id>			
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/e will give you an extension. Please send it before June 11, 2022. hank you.			
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hamzah fkmunsri <hamzah@fkm.unsri.ac.id></hamzah@fkm.unsri.ac.id>			
nal Kesmas <jurnalkesmas.ui@gmail.com> 6 June 2022 at 10:35</jurnalkesmas.ui@gmail.com>			
Kampus Baru UI Depok 16424 Phone: +62815 1141 6600			
Universitas Indonesia G301 Building G 3rd Floor			
Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) Faculty of Public Health			
http://journal.fkm.ui.ac.id/kesmas			
Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) published by Faculty of Public Health Universitas Indonesia since August 2006 and has Education in July 2009 and re-accredited in 2012 (No.56/DIKTI/Kep/2012) and 2017 (No.32a/E/KPT/2017). Our journal is indexed in Scopus & SINTA1 and published quarte			
Hamzah Hasyim (on behalf of all authors)			
Yours sincerely,			
We look forward to hearing from you.			
We look forward to bearing form you			
We hope that our manuscript is suitable for publication in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue			
confirm that all authors have disclosed any actual or potential competing interests regarding the submitted article and the nature of those interests.			
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Phone: +62815 1141 6600			
G301 Building G 3rd Floor Kampus Baru UI Depok 16424			
Faculty of Public Health Universitas Indonesia			
Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)			
Dear Prof. Dr. Dewi Susanna, dra, MS.			
Submission of manuscript			
ate: 1.6.2022 mail: <b>hamzah@fkm.unsri.ac.id</b>			
Faculty of Public Health, Universitas Sriwijaya, Indonesia			
On Wed, Jun 1, 2022 at 8:25 AM hamzah fkmunsri <hamzah@fkm.unsri.ac.id> wrote:</hamzah@fkm.unsri.ac.id>			
Editor in Chief Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)			
Best Regards, Dewi Susanna			

Sriwijaya University Mail - Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: ...

Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

Kindly see the paper's revision attached and the cover Letter for Submission signed by all co-authors.

The article has checked the author guidelines for Special Issue at https://journal.fkm.ui.ac.id/kesmas/about/submissions#authorGuidelines. I hope the paper can be accepted at KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

Respectfully,

14/07/22 20.45

Hamzah Hasyim

[Quoted text hidden]

2 attachments

Hamzah Hasyim\_COVID-19 Prevention Behaviour in Diabetes Mellitus.docx
95K

Cover Letter for Submission of a Paper.doc 91K

hamzah fkmunsri <hamzah@fkm.unsri.ac.id> To: 10012682125022@student.unsri.ac.id, 10012682125088@student.unsri.ac.id

----- Forwarded message ------

From: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> Date: Fri, Jun 10, 2022, 08:43

Subject: Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review - Please extend the submission. To: Jurnal Kesmas <jurnalkesmas.ui@gmail.com>

Dear

Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

Kindly see the paper's revision attached and the cover Letter for Submission signed by all co-authors.

The article has checked the author guidelines for Special Issue at https://journal.fkm.ui.ac.id/kesmas/about/submissions#authorGuidelines. I hope the paper can be accepted a Public Health Journal)

Respectfully,

Hamzah Hasyim

On Mon, 6 Jun 2022 at 10:35, Jurnal Kesmas <jurnalkesmas.ui@gmail.com> wrote: Dear Hamzah Hasyim, We will give you an extension. Please send it before June 11, 2022. Thank you. On Sun, Jun 5, 2022 at 7:07 PM hamzah fkmunsri <hamzah@fkm.unsri.ac.id> wrote: Dear Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) Please extend my new submission of the article. Currently, I am waiting feedback from one of the coauthorships, like below. I appreciate your flexibility. Respectfully, Hamzah Hasyim ----- Forwarded message ------From: Patricia Dale Date: Sun, 5 Jun 2022 at 14:30 Subject: Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review To: <hamzah@fkm.unsri.ac.id>

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School of Environment and Science, Centre for Planetary Health and Food Security, Griffith University, Nathan, Queensland, Australia 4111

From: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> Sent: Sunday, 5 June 2022 1:48 pm To: Patricia Dale Subject: Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review [Quoted text hidden]

Hamzah Hasyim\_COVID-19 Prevention Behaviour in Diabetes Mellitus.docx 95K



hamzah fkmunsri <hamzah@fkm.unsri.ac.id>

# Please Submit Your Article in Author Version

5 messages

**Jurnal Kesmas** <jurnalkesmas2.ui@gmail.com> To: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> 5 July 2022 at 13:58

Dear Author,

Please submit your article (the latest revision) + supplementary files (Cover Letter & Statement) as soon as possible through your submission system in **Author Version**. We hereby attach the **Author Tutorial** as a submission guide.

If you have already submitted your article through the system, please let us know your **submission ID** by replying to this email or via WhatsApp: +62815-1141-6600.

Thank you.

Regards,

Editorial Team of Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

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AUTHOR TUTORIAL.pptx 3201K

hamzah fkmunsri <hamzah@fkm.unsri.ac.id> To: Patricia Dale <p.dale@griffith.edu.au>

**Dear Prof Pat** 

If you agree with the revision paper that I have made, I will submit it

Best,

Hamzah [Quoted text hidden]

#### 5 attachments

AUTHOR TUTORIAL.pptx 3201K

Hamzah Hasyim (clean)\_COVID-19 Prevention Behaviour in Diabetes (considered for review-belum ada MB).docx

6 July 2022 at 11:07



Dr.rer.med.Hamzah Hasyim <hamzah@fkm.unsri.ac.id>

# Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review

1 message

hamzah fkmunsri <hamzah@fkm.unsri.ac.id> To: Jurnal Kesmas <jurnalkesmas.ui@gmail.com> 1 June 2022 at 08:24

Faculty of Public Health, Universitas Sriwijaya, Indonesia

Date: 1.6.2022 Email: hamzah@fkm.unsri.ac.id

# Submission of manuscript

Dear Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

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- Manuscript (without author details).docx 110K
- Figure 1.docx 29K
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Dr.rer.med.Hamzah Hasyim <hamzah@fkm.unsri.ac.id>

# Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review

1 message

Jurnal Kesmas <jurnalkesmas.ui@gmail.com> To: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> 2 June 2022 at 18:25

Dear Hamzah Hasyim,

Thank you for submitting to Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal). The manuscript will be considered for review. However, please do some revisions as attached.

Please also fill out the cover letter and statement letter.

Revision can be sent to the Editor by replying to this email no later than 4 days after receiving this email.

Thank you.

Best Regards, Dewi Susanna Editor in Chief Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

On Wed, Jun 1, 2022 at 8:25 AM hamzah fkmunsri <hamzah@fkm.unsri.ac.id> wrote: Faculty of Public Health, Universitas Sriwijaya, Indonesia

Date: 1.6.2022 Email: hamzah@fkm.unsri.ac.id

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**Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)** published by Faculty of Public Health Universitas Indonesia since August 2006 and has been accredited by Director General of Higher Education in July 2009 and re-accredited in 2012 (No.56/DIKTI/Kep/2012) and 2017 (No.32a/E/KPT/2017). Our journal is indexed in Scopus & SINTA1 and published quarterly in February, May, August, and November.

## http://journal.fkm.ui.ac.id/kesmas

Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) Faculty of Public Health Universitas Indonesia G301 Building G 3rd Floor Kampus Baru UI Depok 16424 Phone: +62815 1141 6600

## 2 attachments

Hamzah Hasyim\_COVID-19 Prevention Behaviour in Diabetes Mellitus (1).docx 638K

COVER LETTER & STATEMENT\_KESMAS\_JURNAL KESEHATAN MASYARAKAT (NATIONAL PUBLIC HEALTH JOURNAL).doc 37K

# Cover Letter for Submission of a Paper

[Name] [Affiliation] [Address]

Dear [Publisher or Editor in Chief Name],

We would like to submit a new manuscript entitled "[title of article]" for consideration by the Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal).

We confirm that this work is original and has neither been published elsewhere nor currently under consideration for publication elsewhere.

In this paper, we report on [research statement]. This is significant because [reason]. The paper should be of interest to readers in [the areas of study].

[Please explain in your own words the significance and novelty of the work, the problem that is being addressed, and why the manuscript belongs in this journal. Do not simply insert your abstract into your cover letter! Briefly describe the research you are reporting in your paper, why it is important, and why you think the readership of the journal would be interested in it.

Please address all correspondence concerning this manuscript to me at [email address].

Thank you for your consideration of this manuscript.

Sincerely,

[Name, Signature]

[Date]

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- a. Author and co-author has sufficiently participated in the writing of this article so the article can be accountable to the public.
- b. All of the authors have reviewed the final version of the manuscript and agreed to publish this manuscript.
- c. This text has not been published in a form that is similar or the same in other journals or any magazines and are not processed in any other journal or any magazine.
- d. This text is really the original work of the authors and plagiarism free, if later found indications of plagiarism, the authors are willing to accept sanctions in accordance with prevailing regulations.
- e. This text is accompanied by copy of ethical clearance statement\*
- f. The manuscript was sent to *Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)* will not be withdrawn before it was decided whether the manuscript is accepted or rejected.
- g. The author is willing to pay the cost of the article publication if the article has been declared worthy of publication.

Place, Date

First Author	Co-author (1)	Co-author (2), etc
(name, signature)	(name, signature)	(name, signature)

Note:

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- Biodata is filled by the corresponding author only

- All Writers who contributed to this paper are required to provide consent signatures

-Signature with 10,000 stamped listed to only corresponding author

# Analysis of COVID-19 Prevention Behaviour in Diabetes Mellitus

Patients: A Literature Review

Hamzah Hasyim<sup>\*1</sup>, Gizka Putri<sup>2</sup>, Patricia Dale<sup>3</sup>

<sup>1</sup>Faculty of Public Health, Universitas Sriwijaya, Indonesia

<sup>2</sup>City Health Services Office, Palembang, Indonesia

<sup>3</sup>Centre for Planetary Health and Food Security (CPHFS) School of Environment and Science, Griffith University, Nathan, Queensland, Australia

\*Correspondence Author: Hamzah Hasyim, Faculty of Public Health, Universitas Sriwijaya, Indonesia. E-mails: hamzah@fkm.unsri.ac.id. Phone: +62 (711) 580068 **Commented [KJ1]:** Dear authors, kami membantu merapikan artikel yang anda kirimkan menjadi satu file. Silakan melakukan pada file ini saja dan lakukan perbaikan dengan rapi.

**Commented [KJ2]:** The maximum word in the manuscript is 4000 words.

Commented [KJ3]: Dear authors, ensure you've checked the author guidelines for Special Issue https://journal.fkm.ui.ac.id/kesmas/about/submissions#auth orGuidelines

Commented [KJ4]: Department? City?

Commented [KJ5]: Department? City?

#### Abstract

COVID-19 is a new human-infected coronavirus that causes respiratory problems. COVID-19 can affect people of all ages, but those with a history of chronic disease (comorbidity) are at higher risk of poor outcomes with COVID-19. Diabetes Mellitus (DM) is one of the comorbidities that aggravates COVID-19 patients. COVID-19 patients with diabetes are at risk of worsening critical conditions in the intensive care unit (ICU), leading to death. COVID-19 prevention is the best way to avoid COVID-19 because COVID-19 is not currently considered adequate. This article reviews 32 papers of narrative literature focusing on COVID-19, DM, COVID-19 in DM patients, COVID-19 preventive behaviour, and COVID-19 KAP (knowledge, attitude, practice) in chronic disease patients, specifically Diabetes Mellitus. Diabetes patients at high risk of COVID-19 must practice good COVID-19 behaviour. Improving knowledge, encouraging positive attitudes, and implementing good COVID-19 prevention behaviours in DM patients requires education and access to COVID-19 health information.

**Keywords:** COVID-19, Diabetes Mellitus, COVID-19 in Diabetes Mellitus Patients, Preventive Behaviour of COVID-19, KAP (Knowledge, Attitude, Practice) of COVID-19. **Commented [KJ6]:** Tulis kepanjangan terlebih dahulu kemudian singkatannya.

Commented [KJ7]: The aim of this article?

Commented [KJ8]: Sort alphabetically

Commented [KJ9]: Do not use abbreviation in the keywords.

#### Introduction

COVID-19 was first discovered in Wuhan City, Hubei, China, on December 1, 2019, and by March 11, 2020, WHO had declared it a worldwide pandemic. Initially, this disease was called 2019 Novel Coronavirus (2019-nCoV) by WHO, which renamed it Coronavirus Disease (COVID-19).<sup>1</sup> The COVID-19 virus is spread from human to human by droplets derived from coughing or sneezing. Symptoms are fever, dry cough, and fatigue.<sup>2</sup> The ongoing COVID-19 Pandemic impacts the health sector and the world's socio-economic system.<sup>3</sup> Based on WHO data, on June 20, 2021, there were 177,108,695 COVID-19 cases and 3,840,223 deaths. Indonesia is 18<sup>th</sup> in the world for COVID-19 occurrences.<sup>4</sup> Indonesian Ministry of Health (Kemenkes) verifies COVID-19 cases reached 1,989,909 patients who recovered 1 of 792,528 people and number of deaths 54,662 on June 20, 2021.<sup>5</sup> The elderly and people with a history of chronic disease (comorbid) are at greater risk and experience worse complications.<sup>6</sup>

Concerning comorbidities in COVID-19 patients in Indonesia, hypertension, DM, and cardiovascular disease are three of the most prevalent.<sup>7</sup> Hyperglycemia and imbalances in pathways involved in viral entry into cells and impaired immune and inflammatory responses cause this COVID-19-induced annoying mechanism in DM patients.<sup>8</sup> Uncontrolled blood sugar levels and complications accompanying DM accompany this group of COVID-19 patients, whose prognosis is poor.<sup>9</sup>

Data obtained from various countries show that the prevalence of DM patients in COVID-19 patients is generally lower than the general population but has a more severe impact than those without the disease.<sup>8</sup> Based on the Indonesian COVID-19 Handling Task Force data as of June 20, 2021, 4,332 patients had comorbidities. DM ranks second among diseases, with a percentage of 36.5%. Meanwhile, out of the 4,322 COVID-19 patients with comorbidities who died, most issues were related to DM, 9.7 per cent.<sup>5</sup>

Reduce efforts to prevent COVID-19, especially in DM patients with the current conditions. To avoid COVID-19 infection, one must focus on DM prevention.<sup>10</sup> On March 28, 2020, the Indonesian government announced measures to be implemented during the COVID-19 pandemic to help DM patients.<sup>11</sup> In addition, to prevent getting sick from COVID-19, the best step is to follow COVID-19 prevention behaviour. Knowledge and attitude reflect preventive behaviour. Knowledge, attitudes, and behaviour regarding COVID-19 affect community compliance.<sup>2</sup> People have good knowledge and positive attitudes and do good preventive action

in Indonesia.<sup>12</sup> Those at higher risk of contracting COVID-19 must maintain adequate COVID-19 prevention behaviour. Insufficient knowledge in DM and hypertension patients affects preventive behaviour, which increases the risk of COVID-19 transmission.<sup>13</sup> People's age, gender, education, and occupation all affect their COVID-19 prevention behaviour. COVID-19 prevention behaviour is related to age, gender, and employment.<sup>14</sup> Diabetics patients had a higher risk to get poor outcomes after COVID-19 infection. Previous studies reported knowledge, attitude and COVID-19 preventive measures in diabetics patients. This study aimed to conduct a narrative literature review on COVID-19 preventive behaviour in diabetic patients.

#### Method

We searched articles on PubMed and ProQuest. The inclusion criteria were articles from the last ten years based on keywords. Literature data sources containing keywords relevant to the topic of discussion are searched and reviewed. The article was recorded if it was a review or a research article and available with open access. Articles that were not available in open access were excluded. The search terms using the search term in Medical Subjects Headings (MeSH) and free text were (COVID-19 AND Diabetes Mellitus), (COVID-19 in Diabetes Mellitus patients) AND (Preventive Behaviourof COVID-19). The search focused on the literature about COVID-19 preventive behaviour in chronic illness patients, specifically diabetes mellitus. COVID-19 prevention behaviour in DM patients is assessed using relevant literature. The eligibility of the papers based on their title and abstract was assessed independently by GP and HH. If needed, the full paper was acquired to determine the eligibility status additionally. If there is disagreement, a consensus was reached by consulting a third reviewer (MA). Papers in languages other than English were excluded if no translated version of the paper was available. The full text of the papers that met the eligibility for the review was then assessed. We then pooled the results of the studies that focused on COVID-19 preventive behaviour in diabetics patients.

#### Results

From search keywords, we found 73 papers in Pubmed and ProQuest. Based on inclusion and exclusion criteria, 32 articles were selected and examined based on relevance to the topic. COVID-19, Diabetes mellitus, and COVID-19 in diabetes mellitus patients are subjects of 16 articles. Additionally, 16 studies on Preventive Behaviour of COVID-19 and KAP of COVID-19 in chronic illness patients were also obtained, particularly in people with diabetes. Finally,

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the articles were reviewed and discussed using objective and comprehensive analysis for COVID-19, Diabetes Mellitus, preventive behaviour and COVID-19 KAP in chronic illness patients, specifically in diabetics patients. Figure 1 shows the PubMed and ProQuest literature search strategy chart.

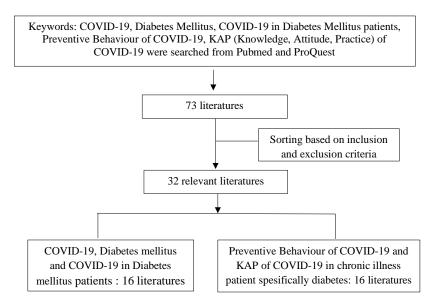


Figure 1. A Literature Search from Pubmed and ProQuest

#### Discussion

SARS-CoV-2 coronavirus originates from a pneumonia group in Wuhan City. Moreover, this is a brand-new coronavirus that infects humans and causes respiratory failure or sudden death. On January 30, 2020, the WHO declared COVID-19 an international health emergency.<sup>15</sup>

#### Actiology of COVID-19

SARS-CoV-2 infects humans. SARS-CoV and MERS-CoV cause atypical pneumonia.<sup>1</sup> 70% of the genetic sequence of COVID-19 is identical to SARS-CoV. This virus's target is the lungs, and the viral spike binds to the *Angiotensin-Converting Enzyme* 2 (ACE2) receptor on lung cells. SARS-CoV has an affinity about 10-20 times lower than the COVID-19 spike, making it easier to spread between individuals.<sup>1,16</sup> Structure of Severe Acute Respiratory Syndrome

Coronavirus-2 (SARS-CoV-2) shows in Figure 2, adapted from Li H, Liu S, Yu X, et al. Coronavirus disease 2019 (COVID-19): current status and future perspectives. *Int J Antimicrob Agents* 2020; 55: 105951.

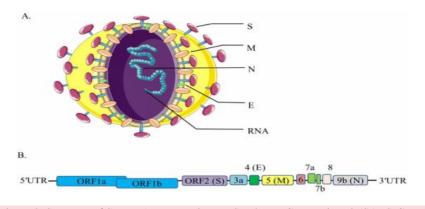


Figure 2. Structure of Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2)

Pneumonia of unknown cause is now reported from Wuhan City, China. They were previously exposed to the Wuhan City Huanan seafood market. The new coronavirus confirmed the diagnosis of an acute respiratory infection.<sup>1</sup> Several more cases emerged without having been in Wuhan. Besides, this indicates the possibility of human-to-human transmission.<sup>1,15</sup>

#### **Incubation period**

It takes about 3 to 7 days (on average) for COVID-19 to incubate. These data agree with the current WHO-recommended 14-days active monitoring period.<sup>1</sup> Pre-incubation, asymptomatic COVID-19 patients effectively transmit COVID-19. The most significant transmission risk is observed early in the infection due to virus concentration in secretions. Directly infectious up to 48 hours before symptom onset (presymptomatic) and up to 14 days after symptom onset.<sup>17</sup> The duration of the disease until it can cause death ranges from 6 to 41 days, depending on the patient's age, health, and clinical condition.<sup>16</sup>

#### Transmission

Coronavirus is a zoonotic disease (transmitted between animals and humans). Recent studies have shown that coronaviruses can infect numerous animal species. They can sometimes infect humans with the coronavirus.<sup>18</sup> Meanwhile, the animal responsible for COVID-19 transmission is still unknown.<sup>17</sup> Respiratory droplets are the only known method of transmitting COVID-19. COVID-19 can be transmitted through direct or indirect contact with the eyes, nose, or

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mouth. Aerosol transmission may also occur in a moderately closed environment exposed to significant concentrations of aerosols.<sup>1,19</sup>

Primarily symptomatic people pass on COVID-19 using droplets. occurs when a person is close to someone who has respiratory symptoms (e.g. coughing or sneezing) at risk of infecting mucosa (mouth and nose) and conjunctiva (eyes).<sup>1,18</sup> COVID-19 transmission is possible by contacting infected people or by exposure to contaminated surfaces used by infected people. There are asymptomatic confirmed cases, but still virtually risk of infection.<sup>1,19</sup>

#### **Detection and Diagnosis**

COVID-19 containment requires rapid and accurate COVID-19 detection. WHO advises testing for COVID-19 in suspected cases. The recommended approach is molecular detection, such as *Reverse Transcription Quantitative* PCR (RT-PCR) examination. This study was primarily using *Nucleic Acid Amplification Test* (NAAT) for the diagnosis.<sup>1,15,17</sup> Quantitative PCR (QPCR) is a molecular diagnostics technology based on nucleic acid sequences. RT-PCR can identify the viral nucleic acid in nasal and oral mucus, faeces, sputum, or blood samples. However, handling specimens of this type necessitates contact with patients, which increases the risk of spreading the virus to health workers.<sup>1,17</sup>

#### **Clinical Symptoms**

In common, symptoms of COVID-19 infection are fever, fatigue, dry cough, myalgia, and shortness of breath.<sup>1,18</sup> Severe patients often experience dyspnea and hypoxemia one week after onset. Septic shock, ARDS, metabolic acidosis is challenging to correct, and coagulation dysfunction develops rapidly. Sometimes, patients can develop ARDS, pneumonia, kidney failure, and even death. Mild patients only show fevers that are not too high, light fatigue, and no pneumonia.<sup>1</sup> Some infected individuals are symptom-free, feeling fine. These asymptomatic or mild cases can be COVID-19-reservoirs. In addition, symptoms of shortness of breath, dry cough, fever and contact history with COVID-19 patients or travelling to high COVID-19 transmission areas. If people experience any of these symptoms, the risk of contracting COVID-19 may increase.<sup>1,18</sup> Because of this, COVID-19 testing and checks are required. But there are varying recovery times for different patients and age groups.<sup>17,18</sup>

#### Management

The patient's treatment is aimed at symptomatic and supportive therapy. Treatment is conducted based on the presenting symptoms and complaints of the patient. Several vaccine

candidates and certain drugs are still in clinical trials.<sup>17</sup> COVID-19 treatment involves rest and supportive care, ensuring adequate energy intake, and monitoring vital signs. Confirmed cases of COVID-19 require treatment in a designated hospital under isolation and protection. Severe symptomatic cases and those with comorbidities require inpatient care with supervision from health workers. Immediate admission to the ICU is needed for severe cases.<sup>1,18</sup> Patients with mild symptoms don't require hospitalisation unless there is a concern about possible worsening or additional medical considerations. The older, sicker, and more diseases a patient is, the greater the likelihood of suffering severe symptoms and even death.<sup>1,3</sup>

#### Prevention

Prevention and treatment are required to control COVID-19. Because of this, the community and the government are needed on the same page. Wearing a mask, diligently washing hands with soap or using hand sanitiser, and maintaining distance are all methods to prevent COVID-19 exposure.<sup>17,20</sup> The community is advised to follow new habits and preventive measures in every activity.<sup>17</sup>

It is critical to keep one's immunity high during the COVID-19 pandemic.<sup>18,20</sup> People advised staying home, practising cough and sneeze etiquette, and asking a doctor if the issue persists.<sup>17,18</sup> Gatherings and crowds are to be avoided. Additionally, people should avoid crowds, and gatherings like in public places and children should not attend school.<sup>18</sup> COVID-19 vaccination is also necessary for preventing COVID-19, especially for vulnerable groups.<sup>20</sup>

#### **Population at Risk**

The COVID-19 risk is higher in elderly and sick patients.<sup>3</sup> Comorbidities at greater risk include diabetes, cancer, chronic kidney failure, heart disease, Chronic obstructive pulmonary disease (COPD), autoimmune diseases, obesity, and pregnancy. Seniors and people with comorbidities are more likely to develop severe cases, necessitating hospitalisation, ICU and death.<sup>3,18,21</sup> COVID-19-exposed pregnant women and newborns can develop severe pneumonia requiring intensive care in hospitals. People regularly exposed to COVID-19 patients, such as healthcare workers, are also at high risk.<sup>1</sup> In this situation, all patients and vulnerable people must concentrate on controlling COVID-19 infection. COVID-19 must be kept away from vulnerable people.<sup>1,18</sup>

#### **Diabetes Mellitus**

Diabetes Mellitus is a chronic disease characterised by high blood sugar levels. DM type rises due to the discussion of the cause of increased blood sugar.<sup>22</sup> A collection of symptoms characterised by hyperglycemia or high blood sugar due to insulin resistance and insulin secretion, also known as DM.<sup>23</sup> Diabetes mellitus consist of type 1 diabetes, type 2 diabetes, and gestational diabetes.<sup>22,24</sup> Diabetes is diagnosed when recommended blood sugar levels are measured enzymatically using venous blood plasma and accompanied by symptoms of hyperglycemia.<sup>23</sup>

#### **Clinical Symptoms**

DM clinical symptoms include polyphagia (increased appetite) and polyuria (frequent urination, especially at night). In addition, polydipsia (excessive thirst) and weight loss without known causes.<sup>23,24</sup> The atypical clinical symptoms include weakness, tingling in the extremities, itching, blurred vision, erectile dysfunction in men, and pruritus vulva in women.<sup>25</sup> The microvascular complications in eyes, kidneys, and nerves and an increased risk of cardiovascular disease are seen in patients with DM.<sup>24</sup> Typical symptoms of type 1 diabetes include nausea, vomiting, abdominal pain, vision problems, and weight loss. Symptoms may develop over several years in type 2 diabetes. Sometimes, type 2 diabetes is unknown because it has no symptoms.<sup>23,26</sup> During pregnancy, Gestational Diabetes may be acquired and without symptoms. Tests are usually given between 24 and 28 weeks into a pregnancy to examine the mother's and baby's health.<sup>26</sup> DM severity is due to the presence and duration of diabetes. Diabetes can lead to weakness, loss of consciousness (coma), and even death if it is not controlled.<sup>23</sup>

#### Management

The therapy for DM includes medication and lifestyle modifications.<sup>27</sup> The choice of treatment type is personal, dependent on the patient's condition, and generally using a combination of drugs with differing mechanisms of action. Oral hypoglycemic drugs are started with a low dose and are increased according to blood sugar levels to an optimal dose.<sup>25</sup> Lifestyle modification includes diet, exercise, and smoking cessation. A disease can be controlled with regular medication, lifestyle modification, and regular monitoring.<sup>25,27</sup>

Public health efforts must focus on dealing with DM.<sup>27</sup> Oral drugs are used as the first-line treatment or insulin.<sup>23,24</sup> Prevention and lifestyle interventions should be given more consideration. Lifestyle interventions took place in physical activity behaviour, eating patterns,

and DM/nutrition information. Focus on mental health, especially for young patients and adolescents.<sup>27</sup>

#### **Diabetes Mellitus Risk Factors**

DM risk factors are obesity, genetics, history of hypertension, Gestational Diabetes, and inactivity.<sup>25</sup> Type 1 diabetes is genetic mainly and age-dependent. Genetic factors and family history of DM Type 1 diabetes usually present in children and adolescents.<sup>28</sup> In youth, however, type 2 diabetes is more prevalent, causing an increase in obesity. Type 2 diabetes in children and adolescents is a severe medical problem because it also has a high complication rate.<sup>27</sup>

#### **Diabetes Mellitus and COVID-19**

#### **Diabetes Mellitus and COVID-19 Risk Mechanisms**

Diabetes mellitus, hypertension, and severe obesity increase morbidity and mortality in patients with COVID-19. Since DM is common in cardiovascular disease, obesity, and hypertension, it is unknown whether DM causes the disease or its complications.<sup>9</sup> COVID-19 in DM patients shares similar symptoms to other COVID-19 patients, but in DM patients, symptoms can be more severe. COVID-19 patients with DM are at a greater risk of severe complications such as ARDS and death.<sup>29,30</sup>

DM comorbidity in COVID-19 patients with hyperglycemia causes the aggravating mechanism.<sup>8</sup> Undiagnosed or uncontrolled diabetes increases the risk of infection, such as 2009 pandemic influenza A (H1N1), SARS-CoV, and MERS-CoV. In this case, patients with DM have a higher risk of experiencing severe COVID-19 and even death.<sup>31</sup> Also, DM-related complications are commonly associated with a poor prognosis. COVID-19 with DM increases the risk of critical conditions, requires intensive care in ICU, and patients may die.<sup>8</sup>

Mechanisms contributed to increased COVID-19 susceptibility in DM shows in Figure 3, adapted from Muniyappa R, Gubbi S. COVID-19 pandemic, coronaviruses, and diabetes mellitus. Am J Physiol - Endocrinol Metab 2020; 318: E736–E741.

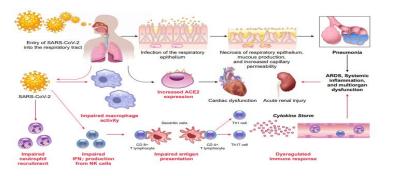


Figure 3. Mechanisms were Contributing to Increased COVID-19 Susceptibility in Diabetes Mellitus

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#### Glycemic control

Hyperglycemia weakens the body's defence system, activates inflammation, and increases the severity of COVID-19.<sup>30</sup> To prevent hyperglycemia which worsens the COVID-19 condition in diabetic patients taking insulin to control sugar and consuming low sugar content.<sup>8,32</sup>

## Impaired immune response and inflammation

Elderly patients with low immune systems are vulnerable to DMs. DM's effect on the adaptive immune response and inflammatory reactions support the emergence and development of COVID-19 infection.<sup>8,9</sup> DM is a risk factor for various infections, including respiratory viral infections, such as COVID-19. Also present are low-grade chronic pro-inflammatory and pro-coagulant conditions, characteristic of DM-related diseases.<sup>8,32</sup>

#### DM related comorbidities and complications

DM's adverse effect on COVID-19 is closely linked to hyperglycemia and other associated health problems.<sup>8,9</sup> Comorbidities associated with DM include obesity and hypertension. Additional complications of chronic hyperglycemia include cardiovascular disease and renal failure.<sup>8</sup> Macrovascular and microvascular complications frequently occur in DM patients.<sup>32</sup>

#### Managing Diabetes during the COVID-19 Pandemic

As of right now, research to treat COVID-19-infected DM patients continues. Close monitoring of blood sugar and drug interactions reduces aggravation symptoms.<sup>30,31</sup> One should not ignore the possibility of hypoglycemic episodes in diabetic patients. Following the severity of the

disease, other comorbidities and complications due to DM, age, and other conditions is required.<sup>31</sup> To recommend that DM patients with COVID-19 take oral or injectable drugs regularly and make regular checks on blood sugar levels.

Managing DM during the COVID-19 pandemic is a challenge. During a pandemic, fear of visiting health facilities obstructs DM patients to check their blood sugar more frequently. Due to the DM Pandemic, the opportunity to exercise is somewhat limited. Food habits that result in high-calorie and high-fat packaged foods are eaten daily. Complications resulting from glucose dysregulation include type 1 diabetes-related diseases.<sup>33</sup> Patients are advised to use telemedicine facilities to minimise visits to health facilities. DM patients should do home blood sugar checks, eat healthy foods, and get some exercise.<sup>29</sup>

#### Prevention of COVID-19 in diabetics

To prevent COVID-19, Clinicians advise DM patients to frequently wash their hands with soap and avoid touching their faces, except when necessary to minimise their exposure to virus carriers. Wearing a mask is strongly recommended if you have to leave the house. DM patients are advised to have a healthy diet and stay active. Furthermore, following a diabetic treatment, check blood sugar regularly, and see a doctor if there are complaints. Since patients have to handle both oral and injection drugs, it is imperative to wash hands frequently to prevent COVID-19 infection. <sup>34</sup> DM patients' risk of suffering from severe infections is due to uncontrolled blood sugar, which must be controlled regularly.<sup>30</sup> Healthy lifestyle choices and consistent medication administration are advised for DM patients. If any problems arise, contact your doctor. Taking advantage of telemedicine facilities reduces the risk of exposure. Additionally, monitor your blood sugar levels regularly.<sup>33,34</sup>

#### **COVID-19 Preventive Behaviors**

Behaviour and lifestyle significantly affect health status. Good habits are performed by someone who believes they are healthy, intending to better their health condition. Prevention behaviour is an activity performed by someone who believes they are healthy, inhibiting illness or detecting the disease when asymptomatic.<sup>35</sup> Lifestyle, behaviour, and environment responsiveness are affected by three factors: predisposing factors, enabling factors, and reinforcing elements, says Lawrence Green. Knowledge and attitudes are predisposing factors for behaviour change.<sup>36</sup>

There is no effective treatment for COVID-19, so prevention is the best way to prevent infection. Knowledge and attitude both demonstrate preventive behaviour. Susilawati in Indonesia found that respondents have good knowledge and positive attitudes and practised preventive behaviours.<sup>12</sup> Majority of the population has good knowledge, good attitudes, and practises appropriate COVID-19 prevention behaviours.<sup>2,14,37</sup> Based on Lee, Kang, and You's research in South Korea, knowledge about COVID-19 related to prevention behaviour, such as wearing masks, hand hygiene, and avoiding crowds.<sup>37</sup> In addition to good knowledge and attitudes toward COVID-19, the people of Sudan do not describe good behaviour.<sup>38</sup> To avoid misleading information, adequate information about COVID-19 precautions is essential.<sup>12</sup>

Many patients with comorbidities such as diabetes and hypertension are aware of the symptoms of COVID-19 and implement behaviours to prevent COVID-19. Many, however, have not made routine changes to prevent COVID-19.<sup>39</sup> In Vietnam and Ethiopia, patients had

strong knowledge, positive attitudes and performed COVID-19 prevention well.<sup>40,41</sup> Good knowledge and a positive attitude in patients with chronic diseases are significant for preventing COVID-19.<sup>41</sup> In comparison, many patients with chronic conditions had low perceptions and willingness to carry out COVID-19 intervention behaviours.<sup>42</sup> Additionally, Akalu's study found that chronic disease patients demonstrated poor preventive behaviour, such as failing to use masks when leaving the house, being unwilling to avoid crowds, and maintaining a distance. Patients with chronic disease have low knowledge and are less likely to follow COVID-19 prevention practice.<sup>6</sup>

COVID-19 risk for DM patients must be combated by good COVID-19 prevention behaviour. In studies on DM and hypertension patients, it was found that inadequate knowledge increases the risk of COVID-19 transmission.<sup>13</sup> COVID-19 use knowledge and attitudes were high in DM type 1 patients in a study.<sup>43</sup> To date, it is unclear if DM patients comply with COVID-19 prevention measures. Extra and optimal prevention practices are rare.<sup>34</sup> COVID-19 is at a higher risk of infection in DM patients than those who do not have DM. COVID-19 was avoided mainly during the COVID-19 pandemic due to behavioural changes such as maintaining diet, using a medication, and exercising.<sup>44</sup> During the lockdown during the COVID-19 Pandemic, DM patients were reportedly anxious about the COVID-19 pandemic. Taking preventive measures, they maintained a healthy diet. However, only 28% of DM patients monitor their blood sugar levels regularly.<sup>45</sup> In comparison, many young adults patients with type 1 diabetes are less aware of the risk of COVID-19.<sup>46</sup>

#### Knowledge

Sources of good information are needed to increase public knowledge about COVID-19. Correcting misinformation in the community will help reduce inappropriate preventive behaviour.<sup>14</sup> Social media is widely used to find information about COVID-19 in Indonesia.<sup>12</sup> To provide excellent and appropriate COVID-19 prevention practices, the overall health education programmes regarding COVID-19 must be improved.<sup>2</sup> Although COVID-19 is a new disease, Indonesia, Malaysia, South Korea, China, and Sudan all seem to know about it.<sup>2,12,14,37,38</sup> Knowledge of COVID-19 is related to COVID-19 attitudes and prevention practices.<sup>2,37</sup> DM patients in Ethiopia had adequate knowledge about COVID-19.<sup>13,34</sup> Meanwhile, in patients with such chronic diseases as diabetes, hypertension, and chronic lung disease, results from using COVID-19 have been inconclusive.<sup>6</sup>

#### Attitude

Assessment and measurement are essential in understanding human attitudes and behaviour.<sup>47</sup> COVID-19 studies show that people in the community favour and aware of COVID-19.<sup>2,12,14,37,38</sup> A positive attitude towards COVID-19 influences preventive behaviour. Having a positive COVID-19 attitude related to good COVID-19 prevention behaviour.<sup>2</sup>

Findings on DM and hypertension patients and DM type 1 patient showed positive attitudes toward COVID-19.<sup>13,43</sup> Type 1 DM patients are positive and aware of COVID-19 disease. They keep their distance and wash their hands frequently to protect themselves.<sup>43</sup> People with DM had an increased risk of getting infected with COVID-19 during the COVID-19 pandemic so that they took action to avoid infection.<sup>44</sup>

#### Characteristics

Because a person's grasp and mindset grow with age, the knowledge will become better and better.<sup>48</sup> The research found that knowledge and attitudes regarding COVID-19 are linked to age groups.<sup>12,14,38</sup> Age group, gender, education, and residence are significant variables relating to knowledge.<sup>2</sup> People with chronic diseases that less aware of COVID-19 are less likely to practise COVID-19 preventive behaviour, according to researchers.<sup>6</sup> Men behave rationally and analytically, while women are emotional. Knowledge of COVID-19 is connected to gender.<sup>2,14,37</sup> Research in Indonesia indicates that gender influences COVID-19 prevention behaviour; women have better preventive behaviour precisely.<sup>12</sup> As education increases, knowledge can be received and understood at a higher level. Knowledge about COVID-19 is related to a level of education.<sup>2,12,37,38</sup> Lower levels of education significantly impact patients chronic disease knowledge about COVID-19.<sup>6</sup> A study on DM and hypertensive patients found inadequate knowledge and behaviour COVID-19 associated with low educational attainment.<sup>13</sup>

A work environment can impart a person with both direct and indirect knowledge. The entrepreneur community is weaker when it comes to COVID-19 knowledge than those who work in the government.<sup>13</sup> Researchers discovered that knowledge and preventive behaviour of COVID-19 are related to occupation.<sup>14</sup> Research on patients with chronic disease shows that socio-economic characteristics, such as age, education, employment, and income, are connected to low knowledge and poor preventive behaviour.<sup>6</sup>

#### Conclusion

DM patients have a higher risk of being infected with COVID-19 and worse severity that can cause death. COVID-19 preventive behaviour is the best step to avoid COVID-19 due to its harmful effect on DM patients and the absence of treatment considered adequate for COVID-19. Health education programs regarding COVID-19 in DM patients need to be improved to increase knowledge and help encourage positive attitudes and implement good COVID-19 prevention behaviours. There is still little literature discussing COVID-19 prevention behaviour in DM patients in Indonesia, so further research and discussion are needed to control and prevent COVID-19 in DM patients.

#### **Conflicts of Interest:**

The authors declare that they have no conflict of interest.

## Authorship contributions

GP conceived the study. HH advised on the research. HH, MA, and GP wrote the main manuscript text, and all authors contributed to interpreting the results. All authors read and approved the final manuscript.

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- abbreviations
   ethics approval and consent to participate
- competing interest
- availibily of data and materials
- authors' contribution
- acknowledgment

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## Authors' original submitted files for Figures

#### **Figure legends**

Figure 1. A literature search from PubMed and ProQuest.

Figure 2. Structure of Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2).

Figure 3. Mechanisms were contributing to increased COVID-19 susceptibility in diabetes Mellitus.



Dr.rer.med.Hamzah Hasyim <hamzah@fkm.unsri.ac.id>

# Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review

1 message

Jurnal Kesmas <jurnalkesmas.ui@gmail.com> To: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> 27 June 2022 at 14:20

Dear Hamzah Hasyim,

Thank you for submitting to Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal). The manuscript will be considered for review. However, please do some revisions as attached.

Please also fill out the author response form.

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Revision can be sent to the Editor by replying to this email no later than 7 days after receiving this email.

Thank you.

Best Regards, Dewi Susanna Editor in Chief Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

On Wed, Jun 1, 2022 at 8:25 AM hamzah fkmunsri <hamzah@fkm.unsri.ac.id> wrote: Faculty of Public Health, Universitas Sriwijaya, Indonesia

Date: 1.6.2022 Email: hamzah@fkm.unsri.ac.id

# Submission of manuscript

Dear Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

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We kindly ask for consideration of our manuscript entitled: "Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review" in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue

Patients with diabetes are at greater risk of contracting COVID-19, which has a more severe course resulting in death. COVID-19 prevention is the most effective method of avoiding COVID-19 because of the disease's detrimental effect on diabetic patients and the lack of a treatment considered adequate for COVID-19.

By narrative literature review concluded that health education programs for diabetic patients regarding COVID-19 need to be improved to increase knowledge, encourage positive attitudes, and implement good COVID-19 prevention behaviours, among other things.

With the submission of this manuscript, we certify that this manuscript has neither been previously published nor is currently under consideration elsewhere, and we affirm that the script is an original work. We confirm that all authors have disclosed any actual or potential competing interests regarding the submitted article and the nature of those interests.

20/04/23, 11.57 Sriwijaya University Mail - Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Pati...

We hope that our manuscript is suitable for publication in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue

We look forward to hearing from you.

Yours sincerely,

Hamzah Hasyim (on behalf of all authors)

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# 2 attachments

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Dr.rer.med.Hamzah Hasyim <hamzah@fkm.unsri.ac.id>

# Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review

1 message

**Patricia Dale** <p.dale@griffith.edu.au> To: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> 30 June 2022 at 07:38

Thanks Hamzah Best wishes Pat

Emeritus Professor Pat Dale School of Environment and Science, Centre for Planetary Health and Food Security, Griffith University, Nathan, Queensland, Australia 4111 Email: p.dale@griffith.edu.au

From: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> Sent: Thursday, 30 June 2022 12:25 am To: Jurnal Kesmas <jurnalkesmas.ui@gmail.com> Subject: Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review

Submission of revision manuscript.

Dear Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

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I hope the article can be published in a special issue at Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)

Please let me know if you have any questions.

Respectfully,

Hamzah Hasyim

Lecturer in Faculty of Public Health, Universitas Sriwijaya, South Sumatra, alembang-Prabumulih, KM 32 Indralaya (Ogan Ilir) 30662 INDONESIA http://fkm.unsri.ac.id/id/ hamzah@fkm.unsri.ac.id Scopus ID 57200911734 Orcid ID 0000-0002-2780-8902 Web of Science Researcher ID AAO-1249-2020 https://scholar.google.com/citations?user=0OtyRq0AAAAJ&hl=id Sinta ID 5974146

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On Mon, 27 Jun 2022 at 14:20, Jurnal Kesmas <jurnalkesmas.ui@gmail.com> wrote:

20/04/23, 11.58 Sriwijaya University Mail - Re: Call for Paper COVID-19 [2022] Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Pati... Dear Hamzah Hasyim, Thank you for submitting to Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal). The manuscript will be considered for review. However, please do some revisions as attached. Please also fill out the author response form. [HIGHLIGHT THE CHANGED PART - CHANGE THE FONT COLOR OR GIVE A HIGHLIGHT; PLEASE ALSO WRITE THE LINE NUMBER. DO NOT USE TRACK CHANGES] Revision can be sent to the Editor by replying to this email no later than 7 days after receiving this email. Thank you. Best Regards, Dewi Susanna Editor in Chief Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) On Wed, Jun 1, 2022 at 8:25 AM hamzah fkmunsri <hamzah@fkm.unsri.ac.id> wrote: Faculty of Public Health, Universitas Sriwijaya, Indonesia Date: 1.6.2022 Email: hamzah@fkm.unsri.ac.id Submission of manuscript Dear Prof. Dr. Dewi Susanna, dra, MS. Editor in Chief KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) Faculty of Public Health Universitas Indonesia G301 Building G 3rd Floor Kampus Baru UI Depok 16424 Phone: +62815 1141 6600 We kindly ask for consideration of our manuscript entitled: "Analysis of Covid-19 Prevention Behaviour In Diabetes Mellitus Patients: A Literature Review" in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue Patients with diabetes are at greater risk of contracting COVID-19, which has a more severe course resulting in death. COVID-19 prevention is the most effective method of avoiding COVID-19 because of the disease's detrimental effect on diabetic patients and the lack of a treatment considered adequate for COVID-19. By narrative literature review concluded that health education programs for diabetic patients regarding COVID-19 need to be improved to increase knowledge, encourage positive attitudes, and implement good COVID-19 prevention behaviours, among other things. With the submission of this manuscript, we certify that this manuscript has neither been previously published nor is currently under consideration elsewhere, and we affirm that the script is an original work. We confirm that all authors have disclosed any actual or potential competing interests regarding the submitted article and the nature of those interests. We hope that our manuscript is suitable for publication in KESMAS: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) in a special issue We look forward to hearing from you. Yours sincerely, Hamzah Hasyim (on behalf of all authors)



Dr.rer.med.Hamzah Hasyim <hamzah@fkm.unsri.ac.id>

# **Dummy Article Confirmation**

1 message

Jurnal Kesmas <jurnalkesmas.ui@gmail.com> To: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> 29 July 2022 at 20:57

Dear Hamzah Hasyim,

Good evening,

We would like to send you the dummy of the article "Analysis of COVID-19 Preventive Behavior in Diabetes Mellitus Patients: A Literature Review" that will be published on Vol.17 (Special Issue 1), 2022. There are some highlights and notes that need to be confirmed. Please also confirm the whole article, whether there is typo on the article or the figure, miss spell, or else.

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# Analysis of COVID-19 Preventive Behavior in Diabetes Mellitus Patients: A Literature Review

# Hamzah Hasyim<sup>1\*</sup>, Gizka Putri<sup>2</sup>, Patricia Dale<sup>3</sup>

<sup>1</sup>Department of Environmental Health, Faculty of Public Health, Universitas Sriwijaya, Palembang, Indonesia, <sup>2</sup>Department of Health of Palembang City, Palembang, Indonesia, <sup>3</sup>Center for Planetary Health and Food Security (CPHFS), School of Environment and Science, Griffith University, Queensland, Australia

#### Abstract

The coronavirus disease 2019 (COVID-19) is a new human-infected coronavirus causing respiratory problems. The COVID-19 can affect people of all ages, but those with a record of chronic disease (comorbidity) are at higher risk of poor outcomes with the COVID-19. This study aimed to review COVID-19 preventative behavior in diabetes patients. Diabetes Mellitus (DM) is one of the comorbidities that aggravates COVID-19 in patients. Such patients are at risk of deteriorating critical conditions in the intensive care units (ICUs) and even death. Prevention is the best measure to avoid COVID-19, although it is currently considered adequate. This article reviewed 22 papers focusing on COVID-19, DM, COVID-19 in DM patients, COVID-19 preventive behavior, and COVID-19 knowledge, attitude, and practice in patients with chronic disease, while primary focusing on DM. It is revealed that diabetes patients at high risk of COVID-19 need to practice good preventive behaviors. Furthermore, it emphasizes that improving knowledge, encouraging positive attitudes, and implementing good COVID-19 preventive behaviors in DM patients requires education and access to COVID-19 health information.

Keywords: attitude, COVID-19, diabetes mellitus, knowledge, preventive behavior

#### Introduction

The ongoing COVID-19 pandemic impacts the health sector and the world's socioeconomic system.<sup>1</sup> Based on World Health Organization (WHO) data, on June 9, 2022, there were 531,550,610 confirmed cases of COVID-19 and 6,302,982 deaths globally.<sup>2</sup> The Ministry of Health of the Republic of Indonesia verified that, on June 8, 2022, there were 6,058,180 confirmed cases of COVID-19, with 5,897,630 recovered and 156,628 deaths.<sup>3</sup>

Based on data from the Indonesian COVID-19 Handling Task Force data as of June 20, 2021, around 4,332 patients had comorbidities. Diabetes Mellitus (DM) is the second-highest comorbid disease by 36.5 %. Of the 4,322 COVID-19 patients with comorbidities who died, 9.7% were related to DM.<sup>4</sup> Thus, this study addresses the challenge of identifying issues related to COVID-19 and DM. To attain this end, data were obtained from reported research on COVID-19 pertaining to various countries.

Existing evidence suggested that elderly people with a record of chronic disease (comorbid) are at increased risk and experience worse complications.<sup>5</sup> Nearly 30% of

COVID-19 deaths can be attributed to diabetes, hypertension, obesity, and smoking.<sup>6</sup> In Indonesia, three of most prevalent comorbidities in COVID-19 patients are hypertension, DM, and cardiovascular disease,<sup>7</sup> wherein diabetes is the second most common non-communicable disease (NCD) in COVID-19 patients which worsens disease severity and mortality.8 Other prevalent comorbidities include hypertension, diabetes, and thyroid diseases.9 Although the prevalence of DM in COVID-19 patients is generally lower compared to the general population, it has a more severe impact than on those without the disease.<sup>10</sup> However, the results obtained from the preliminary analysis showed that elderly male patients with diabetes exhibited a higher likelihood of having severe COVID-19 symptoms than those without such characteristics.<sup>11</sup> Hyperglycemia, imbalances in pathways involved in viral entry into cells, and impaired immune and inflammatory responses cause this COVID-19-induced mechanism in DM patients.<sup>10</sup> Uncontrolled blood sugar levels and complications related to DM critically affects this group of COVID-19 patients, whose prognosis was observed to be poor.<sup>12</sup>

As for the situation in Indonesia, the country's gov-

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**Correspondence\*:** Hamzah Hasyim, Department of Environmental Health, Faculty of Public Health, Universitas Sriwijaya, Ogan Ilir, South Sumatra 30862, Indonesia. E-mail: hamzah@fkm.unsri.ac.id. Phone: +62 (711) 580068

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ernment announced measures to be implemented to help DM patients during the COVID-19 pandemic on March 28, 2020.<sup>13</sup> To reduce the likelihood of contracting the disease, the most effective step is to follow COVID-19 preventive behavior. It should be noted that knowledge, attitudes, and behavior regarding COVID-19 largely affect community compliance with guidelines and regulations.<sup>14</sup> If people in Indonesia possess good knowledge and exhibit positive attitudes, they can be expected to take effective preventive action.<sup>15</sup> It is imperative that those at a higher risk of contracting COVID-19 must maintain adequate COVID-19 preventive behavior. However, the key problem is that insufficient knowledge among patients with DM and hypertension affects their preventive behavior, thus increasing their risk of contracting COVID-19.<sup>16</sup> Notably, COVID-19 prevention behavior is closely related to age, sex, and employment.<sup>17</sup> As explained above, it is evident that one must also focus on DM prevention to avoid DM complications arising from COVID-19 infection and reduce its incidence.18 However, there is a gap in the literature regarding discussions on COVID-19 preventive behavior in DM patients in Indonesia, suggesting that further research and investigations are required to control and prevent COVID-19 in such patients. This study aimed to fill this gap by conducting a literature review of COVID-19 preventive behavior in diabetic patients.

## Method

The literature searched for this review focused on study relevant to COVID-19 preventive behavior in patients with chronic illness, specifically DM. Relevant articles were searched for and identified on PubMed and ProQuest. About 22 of the 73 shortlisted articles met the exclusion and inclusion criteria. The inclusion criteria were articles published in the last three years based on the keywords COVID-19 and DM as well as COVID-19 preventive behavior in DM patients. The exclusion criterion was articles whose summary of contents did not correspond to the relevant keywords. An article was considered for this study if it was either a review or a research article that was available for open access. Articles that were unavailable for open access were excluded. The search terms used in Medical Subjects Headings (MeSH) were (COVID-19 AND Diabetes Mellitus), (COVID-19 in Diabetes Mellitus patients), AND (Preventive Behavior of COVID-19).

The eligibility of the papers based on their title and abstract was assessed independently by the first two authors. Additionally, if needed, the full paper was acquired to determine its eligibility status. In case of any disagreement, a consensus was reached by consulting the third author. Papers in languages other than English were excluded if their translations were unavailable. The full text of the papers that met the eligibility criteria for the review was then assessed. The authors then pooled the results of the studies focusing on COVID-19 preventive behavior in diabetic patients. Finally, the articles were reviewed and discussed thoroughly, critically, and objectively using the same method from the related previous study.<sup>19</sup>

# **Results and Discussion**

# Article Selection

After searching with the selected keywords, the authors identified 73 research articles on PubMed and ProQuest, after removing duplicate entries. Based on the inclusion and exclusion criteria, 22 articles were finally selected and examined based on their relevance to the topic. COVID-19, diabetes mellitus, and COVID-19 in DM patients were the subjects of five articles. Additionally, 17 studies were based on preventive behavior for COVID-19, including knowledge, attitude, and practice (KAP) in patients with chronic illnesses, particularly those with diabetes. Finally, the articles were reviewed and discussed using objective and comprehensive analysis with regard to COVID-19, diabetes mellitus preventive behavior, and COVID-19 KAP in patients with chronic illness, specifically in diabetic patients.

This review analyzes articles dealing with the prevention of COVID-19 in diabetics and COVID-19 preventive behaviors. Areas for further study that emerged from the articles have been identified, including knowledge, attitudes, and characteristics in relation to COVID-19 among diabetics. While, the relative lack of publications regarding preventative behavior among diabetic COVID-19 patients can be regarded as a limitation and weakness of the present review. The strengths of this review are twofold: one, it has employed reputable databases (PubMed and ProQuest) consisting of recent publications to select relevant articles; and two, it has facilitated the review of publications on COVID-19 preventive behavior in diabetic. This study recommends that COVID-19 preventive behavior is the most effective strategy to avoid COVID-19, and further emphasizes the need for improving COVID-19 health education programs for DM patients to encourage knowledge development, positive attitudes, and efficient preventative behaviors among them.

## Prevention of COVID-19 in Diabetics

To prevent COVID-19, clinicians advise DM patients to wash their hands frequently with soap and avoid touching their faces, except when necessary, to minimize their exposure to virus carriers. Wearing a mask outdoors is also strongly recommended. In addition, DM patients are advised to maintain a healthy diet and stay active. Furthermore, when following a diabetic treatment, patients should check their blood sugar levels regularly,<sup>20,21</sup> and consult a doctor in case of discrepancies. Since patients must handle both oral and injected drugs, it is imperative for them to wash hands frequently to prevent COVID-19 infection.<sup>21</sup> DM patients' increased risk of suffering from severe diseases is primarily due to uncontrolled blood sugar levels; therefore, it must be monitored regularly.<sup>21</sup> Moreover, healthy lifestyle choices and consistent administration of medication are also advised for DM patients. Besides, taking advantage of telemedicine facilities may further reduce the risk of exposure.

## COVID-19 Preventive Behaviors

Behavior and lifestyle significantly affect health status. To reduce patient risk factors and comorbidities public policies should promote healthier lifestyles, including healthier diets and regular physical activity.<sup>6</sup> Since there is no effective treatment for COVID-19 yet, prevention is the best way to minimize infection. Under such circumstances, knowledge and attitude are fundamental for preventive behavior. Sulistyawati, et al.,15 found that in Indonesia respondents with good knowledge and positive attitudes practiced preventive behaviors. Similarly, good knowledge and positive attitudes among the majority of a population indicated a higher likelihood of appropriate COVID-19 preventive behaviors.<sup>14,22</sup> Based on Lee. Kang, and You's study in South Korea, knowledge about COVID-19 related to preventive behaviors, such as wearing masks, hand hygiene, and avoiding crowds impelled people to adopt preventive practices.<sup>22</sup> However, having good knowledge and attitudes to COVID-19 does not necessarily result in improved health practices, as was found for the people of Sudan.<sup>23</sup> To avoid misleading information, adequate information on COVID-19 precautions is essential.15

Although a large number of patients with comorbidities, such as diabetes and hypertension, are aware of the symptoms of COVID-19 and have implemented appropriate behaviors, many are yet to make routine changes for preventing infection.<sup>24</sup> Contrary to this, patients in Vietnam and Ethiopia exhibit strong knowledge, positive attitudes, and performed COVID-19 prevention well.<sup>25,26</sup> As mentioned before, sufficient knowledge and a positive attitude in patients with chronic diseases are significant for preventing COVID-19.26 In comparison, many patients with chronic conditions had low perceptions and willingness to carry out COVID-19 intervention behaviors.<sup>27</sup> Akalu's study (2020) in Ethiopia found that patients with chronic diseases demonstrated poor preventive behavior, such as failing to use masks outdoors as well as unwillingness to avoid crowds and maintaining a distance. In general, patients with chronic diseases and low level of knowledge are less likely to practice COVID-19 preventive behaviors.<sup>5</sup>

The risk of COVID-19 for DM patients must be encountered by appropriate preventive behavior. A study on DM and hypertension patients found that inadequate knowledge increased their risk of COVID-19 infection.<sup>16</sup> COVID-19 knowledge and attitudes were observed to be high in type 1 diabetes mellitus (T1DM) patients in a study involving young adults in India.<sup>28</sup> However, many young adult patients with T1DM were less aware of the risk of COVID-19 compared to those with other kinds of diabetes.<sup>28</sup>

To date, it is unclear whether DM patients comply with COVID-19 preventive measures. Extra and optimal preventive practices were rarely observed in Pakistan.<sup>21</sup> In a Chinese study, DM patients were reportedly more anxious about COVID-19 than non-DM people. In the same study, it was reported that infection was avoided during the COVID-19 pandemic primarily due to behavioral changes, such as maintaining a healthy diet, using medication, and exercising.<sup>29</sup> Furthermore, an Indian study showed that only 28% of DM patients regularly monitored their blood sugar levels during the COVID-19 pandemic.<sup>30</sup>

#### Knowledge

Sources of verified accurate information are the utmost importance in increasing public knowledge on COVID-19. Fixing hoax circulating in the community will also help reduce inappropriate preventive behavior.<sup>17</sup> Social media is widely used to find information on COVID-19 in Indonesia.<sup>15</sup> To provide error-free and appropriate COVID-19 preventive practices, the overall health education programs regarding COVID-19 must be improved.<sup>14</sup> Although COVID-19 is a new disease, Indonesia, Malaysia, South Korea, China, and Sudan all seem to possess some amount of prior knowledge about it.<sup>15,22,23</sup> Knowledge of COVID-19 is related to COVID-19 attitudes and preventive practices.<sup>22</sup> As an example, DM patients in Ethiopia had adequate knowledge of COVID-19.16 Meanwhile, results have been inconclusive with regard to appropriate knowledge of COVID-19 and its preventive behavior among patients with chronic diseases like diabetes, hypertension, and chronic lung disease.<sup>5</sup> Considering that effective prevention practices are associated with possessing sufficient knowledge of the same, health sectors should cooperate to increase access to COVID-19 information.<sup>16</sup>

#### Attitude

Assessment and measurement are essential tools for understanding human attitudes and behavior.<sup>31</sup> Studies related to COVID-19 have shown that communities are becoming increasingly aware of COVID-19.<sup>15,17,22,23</sup> A positive attitude to protection against COVID-19 influences preventive behavior.<sup>2</sup> Since people with DM face an increased risk of being infected with COVID-19 during the pandemic, they took sufficient preventive action to avoid infection.<sup>29</sup> Findings with regard to DM and hypertension patients as well as T1DM patients showed positive attitudes to COVID-19 preventive behavior.<sup>16,28</sup> These patients maintained social distance and washed their hands frequently to protect themselves.<sup>28</sup>

#### **Characteristics**

With an increase in education, knowledge can also be better received and understood. Knowledge of COVID-19 is, therefore, closely related to the level of education.<sup>22,23</sup> Lower levels of education significantly impact knowledge of COVID-19 among patients suffering from chronic diseases. A study on DM and hypertensive patients found that inadequate knowledge and appropriate behavior related to COVID-19 was associated with low educational attainment.<sup>16</sup> The demographic characteristics related to the KAP could serve as a compass for policymakers to focus health education programs toward appropriate target groups.32 The evaluation of the diabetes KAP has become essential for directing behavioral changes among individuals with diabetes and those at risk.<sup>33</sup> Furthermore, a study on patients with chronic diseases shows that socio-economic characteristics, such as age, education, employment, and income, are connected to low knowledge and poor preventive behaviour.<sup>5</sup>

#### **Conclusion and Recommendation**

This study concludes that COVID-19 preventive behavior is the best strategy to avoid contracting the disease, especially in view of its harmful effect on DM patients and the lack of treatment considered adequate for COVID-19. Although vaccination is one of the main steps to avoid transmission, severity of infection, and death as a result of contracting COVID-19 among highrisk patients (comorbid), it is still necessary to practice protective behavior to reduce the risk of transmission of COVID-19. Therefore, future studies on the current topic are recommended, so that health education programs regarding COVID-19 in DM patients can be improved to increase knowledge, help encourage positive attitudes, and implement appropriate COVID-19 prevention behaviors.

#### Abbreviations

COVID-19: Coronavirus Disease 2019; DM: Diabetes Mellitus; ICU: Intensive Care Unit; KAP: Knowledge, Attitude, and Practice; WHO: World Health Organization; NCD: Non-communicable Disease; MeSH: Medical Subjects Headings; T1DM: Type 1 Diabetes Mellitus.

#### Ethics Approval and Consent to Participate

Not Applicable.

#### **Competing Interest**

The authors declare that there are no significant competing financial,

professional, or personal interests that might have affected the performance or presentation of the work described in this manuscript.

#### Availability of Data and Materials

The authors have full access to all the data in the study and take responsibility for the data integrity.

#### Authors' Contribution

HH and GP conceptualized, investigated, wrote the draft of the manuscript, and validated the study. HH and PD wrote the main manuscript text. PD edited the draft, and all authors contributed to interpreting the results. All authors read and approved the final manuscript.

#### Acknowledgment

The authors gratefully acknowledge those who have helped and supported this study, and the authors would like to thank the reviewer for the constructive feedback.

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# **KESMAS 2022 Special Issue Certificate of Contributing Writer**

1 message

Jurnal Kesmas <jurnalkesmas.ui@gmail.com> To: hamzah fkmunsri <hamzah@fkm.unsri.ac.id> 23 August 2022 at 09:44

Dear Hamzah Hasyim,

Along with saying our gratitude for your time in researching and entrusting your study to be published in our journal, hereby we attach the certificate of becoming a contributing writer for Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal) Volume 17 Special Issue 1. We are looking forward to having your writing again in the near future.

Regards, Editor in Chief Dewi Susanna

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# #6052 Summary

SUMMARY REVIEW EDITING Submission Authors Hamzah Hasyim, Giszka Putri, Patricia Dale Title Analysis of COVID-19 Prevention Behavior in Diabetes Mellitus Patients: A Literature Review Original file None Supp. files 6052-19841-1-SP.PDF 2022-07-17 6052-19842-1-SP.PDF 2022-07-18 6052-19843-1-SP.DOCX 2022-07-18 .... Sub

Submitter	Mr Hamzah Hasyim 💷
Date submitted	July 7, 2022 - 05:30 AM
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Name	Giszka Putri 🖾

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Name	Patricia Dale 🕮
Affiliation	Center for Planetary Health and Food Security (CPHFS), School of Environment and Science, Griffith University, Queensland, Australia
Country	Australia
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#### Title and Abstract

Title

Abstract

Analysis of COVID-19 Prevention Behavior in Diabetes Mellitus Patients: A Literature Review

The Coronavirus Disease 2019 (COVID-19) is a new human-infected coronavirus causing respiratory problems. The COVID-19 can affect people of all ages, but those with a record of chronic disease (comorbidity) are at higher risk of poor outcomes with the COVID-19. This study aimed to review COVID-19 preventative behavior in diabetes patients. Diabetes Mellitus (DM) is one of the comorbidities that aggravates COVID-19 in patients. Such patients are at risk of deteriorating critical conditions in the intensive care units (ICUS) and even death. Prevention is the best measure to avoid COVID-19, although it is currently considered adequate. This article reviewed 22 papers focusing on COVID-19, DM, COVID-19 in DM patients, COVID-19 preventive behavior, and COVID-19 knowledge, attitude, and practice in patients at high risk of COVID19 need to practice good preventive behaviors. Furthermore, it emphasizes that improving knowledge, encouraging positive attitudes, and implementing good COVID-19 preventive behaviors in DM patients requires education and access to the COVID-19 related health information.

#### Indexing

Keywords	attitude, COVID-19, diabetes mellitus, knowledge, preventive behavior
Language	en

#### Supporting Agencies

Agencies

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# #6052 Summary

SUMMARY REVIEW EDITING

#### Submission

Dubinission	
Authors Title	Hamzah Hasyim, Giszka Putri, Patricia Dale Analysis of COVID-19 Prevention Behavior in Diabetes Mellitus Patients: A Literature
hite	Review
Original file	None
Supp. files	6052-19841-1-SP.PDF 2022-07-17 6052-19842-1-SP.PDF 2022-07-18
	6052-19843-1-SP.DOCX 2022-07-
Submitter	18 Mr Hamzah Hasyim 🖾
Date submitted	July 7, 2022 - 05:30 AM
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#### Title and Abstract

Title

Abstract

Analysis of COVID-19 Prevention Behavior in Diabetes Mellitus Patients: A Literature Review

The Coronavirus Disease 2019 (COVID-19) is a new human-infected coronavirus causing respiratory problems. The COVID-19 can affect people of all ages, but those with a record of chronic disease (comorbidity) are at higher risk of poor outcomes with the COVID-19. This study aimed to review COVID-19 preventative behavior in diabetes patients. Diabetes Mellitus (DM) is one of the comorbidities that aggravates COVID-19 in patients. Such patients are at risk of deteriorating critical conditions in the intensive care units (ICUs) and even death. Prevention is the best measure to avoid COVID-19, although it is currently considered adequate. This article reviewed 22 papers focusing on COVID-19 hnDM, COVID-19 in DM patients, COVID-19 preventive behavior, and COVID-19 knowledge, attitude, and practice in patients with chronic disease, while primary focusing on DM. It is revealed that diabetes patients at high risk of COVID-19 need to practice good preventive behaviors. Furthermore, it emphasizes that improving knowledge, encouraging positive attitudes, and implementing good COVID-19 preventive behaviors in DM patients requires education and access to the COVID-19 related health information.

#### Indexing Keywords

Language

attitude, COVID-19, diabetes mellitus, knowledge, preventive behavior en

#### Supporting Agencies

Agencies

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