

Press release –

*Abstract 803: Impact of social isolation and quarantine on the course of diabetes mellitus and its complications during Covid 19 pandemic in Adjara Region Country of Georgia*

*Abstract 1337: Psychological distress in patients with hypocortisolism during mass quarantine for Covid-19 epidemic in Italy*

## **EMBARGOED UNTIL WEDNESDAY 26 MAY 2021 AT 14:14 CET**

### **Studies reveal that social isolation and quarantine throughout the COVID-19 pandemic may have a detrimental impact on people living with pre-existing conditions.**

Social isolation and quarantine can have a detrimental impact on physical and mental health of people living with pre-existing conditions, according to two studies being presented at the 23<sup>rd</sup> European Congress of Endocrinology (e-ECE 2021) on Wednesday 26 May at 14:14 CET ([www.ece2021.org](http://www.ece2021.org)).

The studies bring together research on the impact of social isolation and quarantine for people living with diabetes in the Adjara Region of Georgia, and on patients with hypocortisolism in Italy. Both studies reported that social isolation during the pandemic caused significant psychological and/or physical distress on the observed individuals.

Data from the first study revealed that the impact of quarantine on people living with diabetes in the Adjara Region caused blood pressure (BP) levels to increase in 88.2% of patients with 50% of these cases resulting in high BP hospitalisation. In addition to these physical factors, increased feelings of anxiety and fear were observed on 82% of patients. In the second study, patients with hypocortisolism experienced increased anxiety and depression, associated with a dissatisfaction feeling of self and a reduced resiliency, when compared with Italian healthy controls. As these are all contributing factors to overall health deterioration, these findings suggest further research is required to allow patients with pre-existing conditions to remain fit and healthy during the current pandemic.

In the Adjara Region study, Dr Liana Jashi and the research team disseminated an online questionnaire and collected answers from 16 endocrinologists and 22 family and general practice doctors. The study confirmed the negative, indirect effects social isolation and quarantine had on people living with diabetes. It reported a list of negative effects such as the reduced access to medical care, weight gain and increased cigarette and alcohol consumption. Physical activity decreased by 29.8%, a vital preventative to further physical and psychological problems.

“This study highlights that people living with diabetes require greater support during pandemics to maintain exercise and protect their physical and mental health. National health services should use these data and future studies to implement better social care around supporting people with pre-existing conditions,” commented Dr Jashi.

In the second study, Dr Chiara Simeoli reported data collected during the last three weeks of the mass quarantine lasted 2 months in Italy, in a web-survey-based, multicenter, case-control research involving 12 different Italian centres. The study confirmed that a large cohort of 478 patients with hypocortisolism, and particularly, 363 with adrenal insufficiency and 115 with congenital adrenal hyperplasia, adequately treated with glucocorticoids, showed higher anxiety and depression, associated with a dissatisfaction feeling of self and a reduced resiliency, when compared with Italian healthy controls, suggesting the detrimental impact of social isolation on mental health of these

patients, particularly frail and vulnerable to infections and stress. Moreover, patients with adrenal insufficiency reported a worse quality of life than patients with congenital adrenal hyperplasia.

“These findings confirmed that beyond the huge impact on physical health, COVID-19 epidemic, social isolation and mass quarantine represent significant psychological stressors, causing severe effects on mental health, even more on people with pre-existing conditions. An empowerment of psychological counselling for these vulnerable patients during COVID-19 should be considered by national health-care services,” adds Dr Simeoli.

Both studies indicate that additional larger studies over a longer period of time are needed for further investigation.

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### Notes for Editors

1. The presentation “Psychological distress in patients with hypocortisolism during mass quarantine for Covid-19 epidemic in Italy” will be presented on Wednesday 26 May at 14:14 CET, online during e-ECE 2021.
2. e- ECE 2021 is held online on the 22-26 May 2021. You can access [here](#).
3. The [European Society of Endocrinology](#) was created to promote research, education and clinical practice in endocrinology by the organisation of conferences, training courses and publications, by raising public awareness, liaison with national and international legislators and by any other appropriate means.

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### Abstract

803

### **Impact of social isolation and quarantine on the course of diabetes mellitus and its complications during Covid 19 pandemic in Adjara Region Country of Georgia**

**Category:** Diabetes complications

**Background:** SARS-CoV-2 infection produces greater morbidity and mortality in people with cardiovascular disease, diabetes, and obesity. Quarantine and social distancing are necessary measures to prevent the virus from spreading but also lead to elevated levels of loneliness and social isolation. The aim of the study was to research impact of social isolation and quarantine on compensation of diabetes and on progression of its complications.

**Methods:** A specific questionnaire was developed by us and was launched on the Google platform. In this Survey was participated 16 endocrinologists and 22 family and general practice doctors.

**Results:** In the clinics patients application decreased by 79,9 %; in 64,8 % patients for communication was used mobile phone and social media. New diabetes cases manifestation was in 58,4% ; HbA1c 6% to 23.5% , 7%-26.5 % , 8%-41.2% and up 8.8% ketoacidosis (DKA) -4%; Hypoclicemia-22% anxiety and fear were observed on 82% of patients . 11.5% of ambulatory patients was switched on insulin therapy; stable angina pectoris attack increased by 35.5%, hospitalization MI was needed in 41.5% ; BP levels increased in 88.2% of patients, high blood pressure hospitalization was declared in 50% cases, HF -35.5%, Nephropathy was complicated -4.9% ,deterioration of vision was in 55.9% of patients; weight gain in 97.1% ; cigarette consumption has increased on 35.3% ; alcohol- 29.4%; Physical activity decreased in 29.8%.

**Conclusion:** According to doctors survey, social isolation and quarantine in diabetes reduces the availability of medical care, increases the weight of the patient, blood pressure, causes bad cigarette habits, increases alcohol consumption, and also worsens the emotional background of patients, which leads to the development of pre-existing cardiovascular diseases and other complications risk.

The issue requires additional large-scale research.

## **Abstract**

1337

### **Psychological distress in patients with hypocortisolism during mass quarantine for Covid-19 epidemic in Italy**

**Category:** COVID-19

**Background:** Beyond the huge impact on physical health, coronavirus disease-19 (COVID-19) epidemic represents a significant psychological stressor, causing effects on mental health. The psychological distress of the epidemic and consequent mass quarantine on patients with hypocortisolism, particularly frail and vulnerable to infections and stress, is unknown. The current multicentre, web-survey-based, case- control study evaluated the psychological impact of COVID-19 quarantine in a large cohort of patients with hypocortisolism.

**Method:** The study was performed on 478 patients with hypocortisolism adequately treated with glucocorticoids, of which 363 with adrenal insufficiency (AI)(215F, 148M, 47.61± 12.44 yrs) and 115 with congenital adrenal hyperplasia (CAH)(75F, 40M, 38.84 ± 13.23 yrs), matched with 478 Italian healthy controls. Major disabilities, ongoing/recent hospitalization, psychiatric illnesses/medications, COVID-19 infection/suspicion represented exclusion criteria. All patients with hypocortisolism were informed on required glucocorticoid dose adjustments in case of intercurrent illnesses and stress conditions. AddiQoL, General Anxiety Disorder-7 (GAD-7), Perceived Stress Scale (PSS), Patient Health Questionnaire-9 (PHQ-9), Specific Psychotic Experiences (SPEQ), Ego-Resiliency Revised Scale (ER89-R), and 18-items Psychological Well-Being (PWB) questionnaires were telematically and anonymously administered to participants during the last 3-weeks of quarantine, lasted 2 months in Italy; higher scores of GAD-7, PSS, PHQ-9 and SPEQ indicated higher anxiety, perceived stress, depression, and psychosis, whereas lower scores in AddiQoL, ER89-R and PWB indicated lower QoL, resiliency and psychological well-being.

**Results:** In the whole cohort of patients, GAD-7 ( $p<0.001$ ), PHQ-9 ( $p<0.001$ ) and PWB-environmental mastery ( $p=0.043$ ) scores appeared significantly higher, whereas ER89-R related to openness to life experience (ER89-R-OL) ( $p=0.003$ ) and PWB-self-acceptance ( $p=0.004$ ) scores significantly lower in patients than in controls. AI patients reported significantly lower AddiQoL ( $p<0.001$ ) scores than CAH patients, with significantly higher PSS ( $p=0.022$ ) scores in AI than CAH females, and higher ER89-R-OL ( $p=0.035$ ) scores in AI than CAH males. During quarantine, 64 (13.4%) patients, 53 (14.6%) AI and 11 (9.6%) CAH patients required glucocorticoid dose increase, with females reporting a significantly higher prevalence of glucocorticoid dose increase than males (16.9% vs 8%,  $p=0.0057$ ).

**Conclusion:** In conclusion, patients with hypocortisolism suffered increased anxiety and depression, associated with a dissatisfaction feeling of self and a reduced resiliency, although reporting a higher sense of mastery in managing the environment, being able to choose contexts suitable to personal needs. Moreover, AI patients reported a worse QoL than CAH patients, with higher perceived stress in females, and higher resiliency in males. Therefore, an empowerment of psychological counselling for these vulnerable patients during COVID-19 should be considered by national health-care services.