Nutritional implications of COVID-19 in the community – Current evidence base

Clinical literature to date suggests that those more severely affected by COVID-19 are those with pre-existing co-morbidities including cardiovascular disease and diabetes

73% of those admitted for critical care are overweight and obese (ICNARC April 2020)

These patients may have previously been given dietary advice to manage their health but due to being acutely and severely unwell, patients may require nutritional support and modified texture diets due to dysphagia (post extubation in those who required mechanical ventilation). Patients may also experience a reduced/interrupted food intake and loss of muscle mass due to illness and reduced activity

To assist recovery, rehabilitation and repletion of lost muscle mass it is likely that patients will be encouraged to consume adequate energy, protein and micronutrients, combined with physiotherapy

In addition, COVID-19, like any infection, can adversely affect glycaemic control so special consideration may be needed regarding use of nutrition products with the lowest glycaemic index and relaxation of usual dietary guidance for diabetes

For patients who struggle to achieve adequate glycaemic control or in whom dietary advice is conflicting, please consider referring to a dietitian or contacting their specialist MDT team for further individualised advice.