

## Human Obesity and Diabetes, Is it Associated with COVID-19 Mortality

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### Abstract

The coronavirus (COVID-19, SARS-Co-2) pandemic is growing rapidly in 2020. The origin and pandemic of COVID-19 raised our concern, yet the global cooperation and confidence was devastating. To speed up global efforts against COVID-19 spread, some lines of clinical evidence and therapeutic association are discussed in the article. Obesity is a prevalence metabolic phenotype caused by either abnormal metabolic homeostasis or gene-environmental interactions. Genetic and molecular basis of obesity and diabetes associated with COVID-19 is required to improve targeted therapy against metabolic abnormality people.

**Keywords:** Obesity; COVID-19; Endocrinology; Human Genome; Inflammatory Factors; Viral Infection

### Background

The coronavirus (COVID-19, SARS-Co-2) pandemic is growing rapidly in 2020. The origin and pandemic of COVID-19 raised our concern, yet the global cooperation and confidence was devastating [1-3]. To speed up global efforts against COVID-19 spread, some lines of clinical evidence and therapeutic association are discussed in the article [4-9]. Currently, no therapeutic drugs are formally licensed for COVID-19 infection in most countries [10-11]. Herbal drugs are alternative option for many viral diseases [12-15].

### Human metabolic diseases

Obesity and type 2 diabetes are prevalence metabolic and physiological disorders [16-22]. Many types of preventive and therapeutic options have been widely sought after. A number of genetic/molecular interactions have been argued for the development of morbidity and mortality for viral infection [18].

### New therapeutic convention

Different types of counteractive measures are suitable for different individuals [23-34]. Apart from life-style and energy limitation, cellular and molecular etiologic/pathological mechanism study may be other ways for obese therapeutics in patients with potential viral infections, especially drug combination [35-39]. Good drug combination can dramatically improve therapeutic outcomes in many refractory diseases and co-morbidity like this clinical situation.

### Conclusion

Human obesity is a strong risk factor for human morbidity and mortality. Modern genetic/molecular diagnosis in the clinic is indispensable for therapeutic promotions or deficits. Future work is needed.

### Conflict of Interests

None.

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