

Review of: "[Review] Sarcopenia in Coronavirus Disease (COVID-19): All to Know from Basic to Nutritional Interventions from Hospital to Home"

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Potential competing interests: No potential competing interests to declare.

Dear Authors

The topic of the study ([Review] Sarcopenia in Coronavirus Disease (COVID-19): All to Know from Basic to Nutritional Interventions from Hospital to Home)) is very interesting and relevant.

the following brief questions and additional suggestions came up during reading:

- 1. I did not find any sentences or descriptions about how to find removal of risks of sarcopenia even after recovery?
- 2. in reference 13 is told ((For example, a trend indicates that treatment with corticosteroids is harmful in mild COVID-19 patients, whereas there is a substantial benefit among patients with critical respiratory failure)). its better to say a trend indicates that treatment with corticosteroids <u>can be</u> harmful in mild COVID-19 patients. according to patients histories and having disabling diseases such as Diabetes and etc, sometimes its better to give corticosteroids from the first days to prevent future side effects.
- 3. on page 10: ((Protein plays a vital role in maintaining muscle and tissue. The target daily protein intake is better to be at least 1.2 g/kg body-weight of patients and increase up to 2 g/kg according to clinical stage and the speed of wasting)) .please clarify which patients? Do all patients take 1.2 g/kg?? are ICU and intubated patients as same as usual patients?
- 4. please describe about Covid-19 drugs such as corticosteroids, Remdesivir, Antibiotics and etc, more about their mechanisms and effects on Sarcopenia.
- 5. Please clarify Hormonotherapy more. what do you mean exactly??
- 6. in assessment tools especially SARC-F which you said is verbal, how should the differences in understanding of the questions be controlled?
- 7. what do you think about diseases such as dementia and Alzheimer diseases which are and are not appropriate for Covid-19 patients? it is suitable for patient because they can control their anxiety and stress in order to the cognitive impairment and they are not suitable for patients because they affect malnutrition, disorientations and etc.

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