

# Direct and indirect effects of COVID 19 on thalassemia care in an adult thalassaemia care unit in Sri Lanka

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## Abstract

Patients with thalassemia syndromes(TS) affected with COVID 19 attending a thalassemia center in Sri Lanka situated in the region most affected with COVID 19 were studied over a 16- month period. To assess the collateral effects on overall thalassemia care in the center, data on transfusion, chelation, clinic attendance was analyzed. Morbidity events and deaths recorded during the COVID 19 period and a similar period before the beginning of COVID 19 infection in Sri Lanka too were reordered in all clinic registrants. Seven patients (of 502) with TS had developed COVID 19 during the 16-month period and all were minimally symptomatic and had recovered without complications. Number of monthly clinic visits reduced from 338 in pre-COVID19 to 268 during COVID-19 ( $P = 0.004$ ). Iron chelators usage too reduced during pandemic period ( $P < 0.001$ ). Though admissions related to morbidity reduced during the pandemic (58 vs 16,  $P < 0.001$ ) there were more non COVID19 deaths (8 vs 4). Numbers affected with COVID 19 and the severity of infection seemed milder in this cohort of patients with TS but the collateral effects on the management of the unit and its effects on mortality in this vulnerable population appears to have been substantial.

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