



COVID-19 and Rhino-Cerebral Mucormycosis: Correspondence

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Dear Editor, we would like to share ideas on “Association of COVID-19 with Rhino-Cerebral Mucormycosis: An Observational Study [1].” Agarwal et al. reported that “*The findings show that mild COVID-19-infected patients and non-diabetic patients the significant risk of secondary mucormycosis in the post-recovery phase, even in those with mild or moderate symptoms.*”[1]. Risk of mucormycosis is an interesting new issue on COVID-19-related disorders. Some new reports show a similar finding to the present study [2, 3]. Emerging mucormycosis problem exists in many endemic area, and problem already exists during pandemic. Hence, it might not increase risk at post-COVID recovery as Agarwal et al. noted [1], but risk exists at present.

The problem might or might not be a long COVID-19. Immunoaberration might result in increases in risk to fungal infection, but there is no proof that COVID-19 significantly deteriorates specific T cell function [4]. Another possible consideration is the effect of lockdown. When a lockdown policy is implemented, local people usually live at home and closely lock their homes. In endemic area with crowdedness and poor local sanitation community, poor ventilation and lack of sunlight due to closed locking might occur and it might promote the growth of pathogenic fungi. This might be concordant with the fact that mild non-diabetic case which is usually

managed for COVID-19 at home can get risk for having superimposed mucormycosis.

Declaration

Conflict of interest Authors ask for waiving for any charge for this correspondence.

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