HEMATOLOGY, TRANSFUSION AND CELL THERAPY

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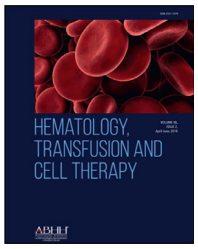

Letter to the Editor

Hemoglobinopathy and COVID-19

Dear Editor,

We would like to share ideas on the publication "Hemoglobinopathy and pediatrics in the time of COVID-19.[1]" Vilela *et al.* concluded that, "*Despite pediatric population with SCD needs more intensive care, the outcome after infection by COVID-19 is favorable.*[1]" A previous report from Iran noted that patients with thalassemia/hemoglobinopathy had a possible susceptible nature to severe COVID-19.[2] However, a report from Southeast Asia showed an opposite conclusion.[3] Based on the data from our setting, Indochina, where beta-thalassemia and hemoglobin E are very common, only a few cases (less than 5) among more than 20,000 local COVID-19 patients had associated hemoglobinopathy. This marked low incidence might confirm the hypothesis on COVID-19 resistance of patients with hemoglobinopathy. Additionally, all infected cases with underlying hemoglobinopathy usually have mild symptoms. The effect of standard iron chelation therapy in patients with hemoglobinopathy is a possible explanation for mild COVID-19.[4] Pharmacologically, the iron chelating agent can suppress endothelial inflammation, which is the main pathophysiologic mechanism in COVID-19.[4]

Conflicts of interest

None.

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