

A novel coronavirus has recently emerged into human populations, which was first identified in December 2019 in Wuhan, China and has spread globally causing a global pandemic [1–3]. Here, clinical data of COVID–19 patients from Saudi Arabia were retrospectively analyzed in order to search for (i) biomarkers associated with the mortality of the disease, and (ii) predictors of the OS of the patients. Given the heterogeneous clinical outcomes of COVID–19, identification of biomarkers of the disease that can be measured at the time of infection (baseline) is useful and urgently needed to enable clinicians to predict the disease prognosis. Laboratory diagnosis is achieved mainly by reverse transcription–polymerase chain reaction (RT–PCR) tests to detect parts of the viral genes in respiratory samples [17]. The majority of patients exhibit a mild form of the disease with no major complications and full recovery after receiving proper clinical care, whereas a small proportion of the patients show a severe disease manifestation with rapid progression to high–risk of death [4,21]. Inflammatory proteins such as C–reactive protein (CRP) and main constituents of plasma proteins like albumin were significantly associated with the severe form of the disease [21,22]. The virus transmission occurs through breathing droplets carrying the virus from cough or sneezing via close contact [14,15] especially from symptomatic patients [16], and contaminated items or surfaces can also be a source of COVID–19 infection [4,16]. Other less common symptoms reported to be vomiting, diarrhoea, nausea, abdominal pain [9,12,13