ClinicSearch

International Journal of Clinical Case Reports

Ibrahim M. Hamouda

Open Access Review Article

Clinical Management and Awareness of Covid-19 'SARS-coV-2' Among Faculty members, Department of Eastern Medicine and peoples of Faisalabad

Muhammad Muzammal Masood¹, Noor-Ul-Ain¹, Maha Saleem¹, Muhammad Akram¹, Surendar Rangasamy², Joseph C. Hokororo³, Ibrahim M. Hamouda^{4*}

¹Department of Eastern Medicine, Government College University Faisalabad

²Department of Community Medicine, Sri Venkateshwaraa Medical College Hospital and Research Centre, Puducherry, India.

³Health Quality Assurance Unit, Ministry of Health, Tanzania

⁴Department of Restorative Dentistry, College of Dentistry, Umm Alqura University, Makkah, KSA.

*Corresponding Author: Ibrahim M. Hamouda. Department of Restorative Dentistry, College of Dentistry, Umm Alqura University, Makkah, KSA.

Received date: September 06, 2022; Accepted date: September 23, 2022; Published date: September 30, 2022.

Citation: Muhammad Akram, Surendar Rangasamy, Joseph C. Hokororo, Ibrahim M. Hamouda, Muhammad Muzammal, Masood et al. (2022). Clinical Management and Awareness of Covid-19 'SARS-coV-2' Among Faculty members, Department of Eastern Medicine and peoples of Faisalabad, *International Journal of Clinical Case Reports*, 1(1) DOI: 10.31579/2834-8389/001

Copyright: © 2022 Ibrahim M. Hamouda. This is an open-access article distributed under the terms of The Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract:

COVID 19 a plague that has been spread worldwide in a brief time period. It is a sickness caused by contamination with the newly localized coronavirus "SARScoV2". Health specialists appreciate and tried for offerings that are near most people, irrespective of the chance of contamination. Consequently, in such situations, it ought to be essential to evaluate the statistics and views of medical specialists and numerous human beings particularly this pandemic and speak the effect of this catastrophe on psychosocial balance. The usual educational intervention sand schooling packages for COVID 19 pollutants manipulation and practices in all healthcare specialists are lacking, place of work fitness and safety are paramount to reducing the chance of transmission to students, healthcare experts and healthcare experts.

Keywords: Covid 19 awareness; clinical management

Introduction:

In the last trimester of the year 2019, a viral infection out breaks the world from China. It has been speared very swiftly all over the world in no time. It was a respiratory disease and a type of coronavirus named with SAR-cov-2 was responsible. This name to this particular virus was given due to its high resemblance with SAR-Cov which caused a huge threat to life in all over the world back in 2002. These are RNA viruses that affecting both animals and human being. This type of virus was discovered in 1966 by a physician who found this type of virus in a patient of common Cold [1].

Due to their morphological resemblance with the Solar corona, they named as coronavirus. It has different variant of Alpha, Beta, Gamma and Delta type. Alpha and Beta variants were primarily originated from the Mammals e.g. Bats. While Delta and Gamma were originated from Pigs. There are approximately 7 subtypes of coronavirus, Beta variant can

cause more severe illness. Alpha variant has minor signs and symptoms. But Beta variant is closer to SAR-COV [2].

There are four main Genes Encode for Nucleopsid protein, small membrane protein, Member glycoprotein, spike protein which occur in HCOV-OC43 and HKU1 virus [3]. This SAR-COV-2 is about more than 95% in genome is similar to bat corona virus [2]. It has managed to make a transmission to humans from animals in china. For the investigations, host of this virus must be examined and its rout of transmission must be evaluated. Covid pandemic caused so much stresses and pressure on the health care providers in China. The main reason of this stress is the high degree of admission in hospitals. This pandemic opened the reality of life to the community around the world and values of the hospitals and health care centers.

The low availability of the Equipment is stressful the managements with inflation in the cases of Covid-19. While seeing the tremendous increase

in the cases, Health care providers are going through number of mental health issues of anxiety and depression. Family relations damaged due to the covid-19 pandemic because of isolation in homes creating so much stresses on the papers and Healthcare workers in China. Family violence and rate of divorce increased to Sky rocket due to log down however there is not enough prove that co relate relationship between family violence mental stress and covid situations [4].

As this pandemic started, the demand of healthcare workers increased in China. Due to high admissions in hospitals and lack of staff resulted in increased work of other medical care providers. It is very important to take proper measure into save the mental health of these Health Care providers who are saving life of other people with their knowledge. Without Healthcare provider's the situation could be very worse and it could lead to high mortality rate. So it is very important to counter the situation of Mental Health Care providers. It could be very beneficial for community around the world if the health care providers are healthy because they could perform well in this pandemic reference if possible [5].

The prevalence of covid19 is increasing in the community, around 40% of the patients are presented with Gastrointestinal issues. This virus is directly affecting the Gastrointestinal track by neurological involvements [6] with the production of unknown cytokines. High amount of RNA virus is being detected in stool which is giving a high possibility of oral transmission [7]. More than 50% of the covid patients were presented with olfactory and test disorders [8]. In female patients, MRI confirmed bilateral inflammation in olfactory cleft and having no abnormalities of bulb and track [9].

However, for complete evaluation of covid and anosmia need more study. This observation is made by evaluating many patients of respiratory infection [10]. Observations in animals have shown that corona virus could be found in brain through the olfactory track which may cause neural damage and eventually cause death [14]. Case studies from USA and China have indicated some neurological complications in covid patients including encephalopathy, Guillain-Barre syndrome, ischemia, and stroke, but still there is no any proof of viral invasion [11]. So, testing for COV-2 must be mandatory in the neurological patients.

In covid patients, cardiovascular events are also have been seen which include myocarditis, cardiac arrhythmias, heart failure, myopericarditis, reduced systolic functions and other coronary syndrome [12]. It was also reported that covid have associations with hypercoagulation in China, with high risk of pulmonary and venous thrombo embolism events[13]. Also, conjunctival hyperemia, and increased secretions were observed in more than 30% of infected patients in china, thus SAR-cov-2 may be detected in tears of infected persons [14].

Diagnosis of this infection could be complicated in different age groups, as peads have less severe symptoms then adults some of them presented without symptoms [15]. It is not clear that, how it is less harmful for child and how it is leading to asymptomatic infection in child or atypical symptoms that are missed in case study. In aged individuals, diagnosis of infectious illness can be very difficult as its symptoms could be screened like pneumonia may cause only mild temperature leading to misdiagnosis. Late diagnosis has most severe outcomes in the old ages, it could increases the severity of the illness and may end up fatal [16].

In Middle East, respiratory syndrome coronavirus caused cardiovascular events with troponin elevation which include myocarditis, cardiac arrhythmias, heart failure, physiologic stress, hypoxia, cardiac injury and other coronary syndrome [17-19]. Fist observation of myocardial injury with SAR-cov-2 was studied in China, showed increased troponin level above the normal limits [18]. Studies have found that myocardial injury due to high level of troponin may be founded in 17% of hospitalized and above 30% of the patients of ICU due to Covid-19 [19-21].

Myocarditis also had been identified in patients with high viral inflation in autopsy reports of some patients [22-24]. Some studies revealed that

about more than 8 percent of mortality were due to myocarditis [25]. Patients with myocarditis have a different rage in the severity and its diagnosis was a huge challenge. Covid patient can present with left ventricular failure, dyspnea, chest pain and arrhythmia [26-28]. Electrocardiography (ECG) gives a many of observations in circumstances of coronary syndrome in the patient of myocarditis who presents with elevated troponin level. ECG abnormalities contains ST segment and T wave abnormalities. In these particular patients ST segment deviations and T wave inversion can be seen. Echocardiographic demonstration is likely a focal wall motion while critically ill patient due to Covid-19 patient may present with Global wall dysfunction or no wall motion [29,30]. Abnormalities of Echo and ECG may mark degree of severity with worse results [31-34]. High degree of elevated troponin in covid patient are associated with high risk of severe outcomes in critical patient and high mortality rate [35-37].

Acute Myocardial Infarction (AMI):

Intense fundamental inflammation will expand the danger of atherosclerotic plaque and MI issues [37,38]. A 2018 look at found that flu and different settled on viral contaminations had been connected with an extended danger of MI inside the initial 7 days of forecast, with a middle frequency of 6.1 influenza and a couple of 8 various infections [39]. More than one investigation of hospitalized victims, because of local area gained pneumonia decided a drawn-out danger of vivacious (CVD) that persevered for quite a longer time after hospitalization [35]. Because of monster bothering and hypercoagulability, the danger of MI might be available in patients with COVID-19 [40,41].

AMI cure is dubious in patients with COVID-19. In patients related to ST rise myocardial dead tissue and COVID-19, the yank school of Cardiology expressed that, in spite of the way that fibrinolysis can be thought about for individuals with "slim likelihood of STEMI", characterized low STEMI and not utilizing a right ventricular contribution or - AMI returned without hemodynamic aggravations., coronary percutaneous mediation is normally finished in numerous settings and stays a treatment decision [41]. while PCI was noticed, collection of laborers ought to offer fitting protective gadget, and complete evacuation of the catheterization lab should be done in sync with the cycle. For individuals with COVID-19 inside the NSTEMI routine, a symptomatic test become accomplished preceding catheterization; write the complete words before the abbreviation (ACC) word, in appropriately chosen victims with guaranteed COVID-19, moderate cure might be sufficient. victims who're hemodynamically unstable in a country of NSTEMI ought to be treated in the equivalent way as those with STEMI [42].

Cardiomyopathy &Acute Heart Failure:

Initial demonstration of Covid-19 contamination may possibly be the heart failure. One look at found extreme heart failure was more likely to be found in more than 20% of patients with initial introduction of Covid-19, by means of cardiomyopathy happening in more than 30% of sufferers [39]. One observes located that coronary heart failure became found in 25% of sufferers and were accompanying with an accelerated chance of demise. In between people with cardiac disorder, approximately partial had no regarded past history of CVD or hypertension [25]. Presently, it is unidentified whether or not new cardiomyopathy is a cause of heart failure towards an unprecedented growth in coronary failure [43]. It's very important to aware of those capability coronary heart troubles while directing iv what this abbreviation, write it in complete words?? fluids and to evade overdose. Significantly, right coronary heart failure could also occur, specifically amongst inpatients of Lungs and ARDS [44,45].

Dysrhythmias

Heart shivers could be the most prominent symptom in greater than 10% of patients with covid [15]. Listing of dysrhythmias that have been detected in patients inflamed with COVID-19. usually, sinus tachycardia is more prevalent in these kinds of patients, due to a number of causes, on the equal time (hypoperfusion, fever, hypoxia, tension, and

many others [50]. One study has evidence that dysrhythmias were reported in more than 15% of hospitalized and about 45% of ICU patients with Covid. [30]. Dysrhythmias possibly will arise inside the context of viral infection because of hypoxia, peculiar metabolism and inflammatory despair, [32]. If dysrhythmias were accompanying with enriched troponin, the health practitioner must keep in mind myocardial impairment, malignin myocarditis and ACS in degree of difference in analysis [31].

Venous Thromboembolysis (VTE):

LVictims of covid are similarly at elevated danger of VTE [46] irritation, coagulation popularity, a couple of organ dysfunction and essential contamination are all factors which can result in an upgraded danger of VTE. Research suggests incontinence problems in diagnosed patients of COVID, which include high D-dimer [47-49]. Another research examined about of 26 victims of Covid-19, pneumonia was observed with high D-dimer levels an average 6.0 of organisms per ml in all sufferers and ten patients with pulmonary embolism acquired from CTPA . These patients of pulmonary embolism detected with 11.0 micrograms per ml of D-dimer levels [50]. Overhead 1 μg / mL of D-dimer levels were seen in high probability of death in more severe cases of covid-19 patients [36] Studies proofed that anticoagulation therapy mainly heparin might be an important key point to reduce the death rates in highly critical cases of covid-19 and in those patients also who have a high degree of D-dimer levels [49].

Encephalitis is regarded as an intense inception of fever, nausea, fainting, and reduced attention [51]. Although uncommon CoV-2 encephalitis were reported in some circumstances, based on medical findings and photos no enough evidence of Cov-2 has not found in CSF [52]. The pathophysiology is uncertain however it might be associated with secondary edema of demagogic lesions towards viral contamination [53]. As with other instances of encephalitis, violent sympathetic care and management of accelerated intracranial pressure are important. Acute necrotizing encephalopathy is an uncommon neuro disease as a result of a cytokine typhoon and harm to the blood-brain fence [66]. In contrast to different diseases of the central frightened system, blood loss isn't always found in ANE [54].

Literature Review

Other than the existence of preventive suggestions and suggestions regarding disease control, many practices do now not have the minimal necessities for infection manipulate, ensuing in a low hobby in taking preventive measures. This lack of hobby in making extra attempt because of the huge range of patients being treated in clinics [55]. This example is real in lots of states as in many different international locations, it has an extensive kind of clinics that effectively use infectious ailment manage methods in clinics that abuse prevention strategies. It's far vital to use effective prevention strategies in clinics and to increase the extent of recognition of health care companies to improve their prevention. There's no precise remedy for this ailment, so fitness care concerns deal with clinical signs and symptoms (e.g. fever, shortness of breath) of sufferers.

Supportive care may be more powerful in sufferers with signs [56]. International locations can be at specific degrees of the epidemic, and the screening method can also vary in keeping with national coverage. This is interchangeable with the scenario at the local and national degree [57]. The reason of this look at is to evaluate the extent of awareness and understanding of humans about the outbreak of COVID-19 and to follow steps to fight the virus and to make pointers that can help humans and health authorities round the arena. It is far essential to assess the expertise, attitudes and behaviors of the public about vital and prevalent infectious diseases. Such traits offer basic facts for the prevention and manipulate of those diseases through measuring the impact of preceding authorities' prevention efforts and directing the need for further intervention.

Epidemiology

There are no enough epidemiological facts presently to determine how effortlessly and continuously the virus spreads among human beings, but it's far currently envisioned that one individual with the virus will infect between two and 3 greater people [58]. The virus seems to be transmitted specially via respiration droplets that people sneeze, cough, or exhale. The virus also can stay for several hours in areas including tables and door handles [59].

The incubation period of COVID-19 is anticipated to be between 2-14 days. At this level, we know that the virus may be transmitted when inflamed humans show flu-like signs and symptoms ranging from respiratory infection to innovative pneumonia and multiple organ failure [60]. Signs encompass, shortness of breath, fever, cough, fatigue and muscle aches. The maximum severe cases were intense pneumonia, acute breathing distress syndrome, sepsis and septic surprise that may lead to dying [61]. People who most susceptible to develop severe symptoms are: older people and people with fitness issues which include excessive blood pressure, diabetes, cardiovascular ailment, chronic respiratory disorder and most cancers. diseases in kids look like rare and mild [62]. There is no posted proof but at the severity of the sickness in pregnant women after COVID-19 contamination [63]. ECDC will hold to display rising clinical literature in this question, and endorse that everyone pregnant women comply with the equal steps to prevent COVID-19, together with everyday hand washing, avoidance of unwell humans, and isolation in case of symptoms, while consulting a health care issuer over the phone for recommendation [64].

High-risk

High mortality was seen in human beings over the age of 80 by way of 14. eight percent (what this means). These results are primarily based on one in every of the largest statistics analyzes conducted in China, together with 72,314 (72 and or -314) affected person information [65]. Even as patients without pre-current sickness have a mortality charge of zero.9 percent (you mean 0.9 percent). It's far much better for people with specific underlying disorders, making those groups of humans extra prone and extra susceptible to COVID-19 [66]. Those chance agencies and agerelated mortality prices are proven in desk I. while similarly research is underway, statistics advocate that smoking is also a hazard element for COVID-19.

People who smoke (each beyond and present) are much probably to have extreme indications, be admitted in ICU, need to be ventilated or expire as equated to nonsmokers [67,68]. It's miles vital to apprehend those threat companies, educate them about infection and safety measures and to apprehend their tendency to extreme facet consequences. while treating such sufferers, a multidisciplinary approach is carefully decided on to keep away from useless polypharmacy and detrimental drug reactions [67].

Threatening signs

The cultivation span of COV-2 is 14 days (average period of one week), and excessive viremia takes place before the onset of signs and symptoms. This underscores the ability for referral of patients with asymptomatic or minor signs and symptoms [68,69]. The most common silent signs of COVID-19 are fever (70-90%), cough (70-80%) and dyspnea (20-40%). The other signs and symptoms within the introduction encompass fatigue, nasal congestion, sore throat headache, vomiting nausea and diarrhea [62-64]. In experiments, the findings of pneumonia may be restricted to three of Three percent or three cases [69].

Laboratory Outcomes

Change of laboratory considerations may additionally offer comprehension into the pre-take a look at ability for latent COVID-19 infection. Even though complete records are common in maximum sufferers, leukopenia may be present in one-1/3 but leukocytosis was uncommon. Lymphocytopenia was frequently visible in those sufferers. The everyday laboratory deviations detected via COVID-19

contamination. Procalcitonin tiers typically does not increase, and the occurrence of high levels have to growth doubt of immoderate bacterial contamination [69]. X-rays of chest are commonly unusual even in initial sicknesses and screen interstitial intermittent, surrounding and poorly described lobular or ground glass opacification and sub segmental alliance [11-14].

Complications

COVID-19 can take a hastily developing and effective route, causing an expansion of issues which could lead to existence-threatening contamination. The everyday troubles identified with COV, roughly of the uncommon issues which pronounced consist of rhabdomyolysis and diffuse Iv coagulation [67]. Early doubt and in-intensity tracking of these troubles and spark off, suitable assist measures can assist reduce facet consequences.

Categorization of disease

At some stage in an endemic, while in a patient offers to emergency branch by means of a temperature, cough or shortness of breath, a great degree of doubt of Covid contamination must expected. The doctor must look with caution to signs and symptoms to start rehabilitation and assist measures if these are observed. Most patients with COVID usually have an autoimmune disorder that mimics different respiration infections. Consequently, they're very crucial in testing and may be effectively handled in isolation from home [70].

Cautious screening of patients with COVID-19, once they first are available touch with the fitness care machine, will help arrange sufferers grounded totally on risk organization, serious condition and cruelty of disease and to be had assets. These measures will assist lessen the load on hospitals by decreasing unnecessary in-patient wards and ICUs, taking into account the distribution of health facility ventilators, beds and help offerings for seriously sick sufferers. Further, this can save you fatigue amongst fitness care workers and decrease the hazard of hospitalization.

Laboratory confirmation

sample collection of SARS-CoV-2 infections must be executed early in sufferers with assumed Covid patients who fall into minor and excessive organizations. The viral load in high blood pressure in Covid marks the nasopharyngeal gauze pattern encouraged for affirmation trying out. Sputum collection and checking out need to be taken into consideration simplest in sufferers with a productive cough, at the same time as sputum consumption is not endorsed as vaporizers formed by means of the technique can ease the conduction of disease. In inflamed patients, a lowdose aspirate pattern or a Broncho alveolar lavage trial is favored. Swabs need to be engaged in a sterile container and elated from the ice to research laboratory. Medical institution group of workers who're answerable for gathering, transporting, testing and analyzing respiratory samples ought to ensure the proper use of shielding measures. endorsed trying out for PCR in respiratory trials. Despite of the fact that early research revealed a low sensitivity of 30-60 percentage, new research displays improved consequences [70]. Based on CoV integration aspect, genetic checking out of RdRp (RNA-based RNA polymerase) with a low detection price of 3.8 copies in step with reaction at ninety-five percentage possibility is taken into consideration a demonstration for PCR [71].

In U.S., the FDA recently accredited a speedy check that might offer outcomes within 30-45 mints [96]. Cepheid's COVID assays, experiments based on cell PCR, prospered in signifying excessive precision using the organization's GeneXpert gadget [71]. Immune finding may additionally monitor uncertainty inside every week afterward the inception of the illness so it does no longer play a function in the prognosis in the first week of infection. However, it will be a much less steeply-priced diagnostic check within the 2nd week of infection. In addition, it's far anticipated to be beneficial in epidemiological homework in estimating the social occurrence of the sickness. Antigen checking out, at the same time as still within the conceptual and design segment, once evolved will

offer instant outcomes and may be accomplished as a factor-of-care take a look at.

General Treatment

Patients are labeled primarily grounded on the cruelty of the illness for in addition hospitalized and remedy alternatives. Management consists of antiviral pills or detailed remedy and compassionate management of issues, which include progressed organ guide, if important. Theoretical concerns that nonsteroidal anti-inflammatory capsules (NSAIDs) get worse the effects of COVID19 infection as these raise ranges of enzyme (ACE-2) within the lungs, receptor for this germ, could be confirmed. A small take a look at additionally exposed that NSAID introduction is self-sufficiently related to the prevalence of pleuro-pulmonary impediments in sufferers with public acquired pneumonia [72]. For the overhead purposes, paracetamol might be anticipated over NSAIDs to adjust infection.

In the pattern of lung injury formed by infection also seems because of its influence on ACE-2, although this mechanism is not known yet. This caused the view that patients with coronary heart ailment, high blood strain or diabetes dealt with angiotensin receptor blockers or ACE inhibitors are at greater chance of excessive COVID-19 contamination as they control the growth in ACE-2 receptor [73]. Consequently, there is no clean medical evidence, discontinuation or amendment of most of the people in conventional treatment with angiotensin II receptor blockers or ACE inhibitors for inflammatory bowel disease which isn't always advocated [74]. However, switching to some other form of treatment may be taken into consideration in patients who've received and obtained COVID-19 at some stage in their infection. These selections need to be made by means of the remedy team in every case after thinking about the affected person's underlying illness and measuring the risks and benefits.

Specific Treatments

With the converting demanding situations posed by means of this public fitness emergency, there's an urgent want for appropriate documentation and improvement of medications that may be used to treat COVID-19 infections. An extensive variety of medicine that have been formerly accepted in a few signs and numerous research pills are being investigated thru medical trials to gain COVID-19 [75]. Because the COVID-19 epidemic progresses, an increasing number of medical records emerge to support a variety of control and treatment strategies. The far very important for the treating physician to cautiously screen and compare the information before incorporating various drug marketers into scientific practice. Presently, the function of a particular antiviral drug is at quality adjunctive in environment. the subsequent capsules have some promise of administering COVID infection.

Chloroquine and Hydroxychloroquine

Preliminary trials conducted in China in a try and determined the effect of existing tablets towards COVID contamination and exposed that chloroquine devises has an in vitro activity against CoV-2 [75]. Consequent in vivo experiments definite that curing innovative of COV related pneumonia through chloroquine may additionally progress remedy fulfillment fees, shorten medical institution live and enhance patient consequences [76]. An anti-malarial and anti-inflammatory agent 4-aminoquinolone, has full-size anti-bacterial activity. Even though the exact mechanisms are unknown taken into consideration its antiviral consequences via phagolysosome alkalinization and viral infiltration through inhibiting receptor binding and membrane fusion [77]. With the equal activation mechanism, hydroxychloroquine (HCQ) showed a stronger in vitro blocking of CoV-2 virus as compared with chloroquine [78]. A few side consequences, pregnancy shelter and occasional price surroundings make it more appealing than chloroquine [20-23]. In a small unit of various French sufferers, HCQ changed into shown to reduce viral load on 6th day in comparison with controls [79]. Nevertheless, this study was extensively complained for its operational errors. If selected for COVID-19 treatment, the recommended HCQ dose is 400mg twice every

day (bd) for at some point observed by means of 200 mg (bd) 6-11 days. On the other hand, small random precise trials failed to reveal any widespread gain [80]. Although HCQ has been advised as an option to save you from COVID-19 patient caregivers from domestic and laboratory-certified home communication, capability blessings need to be evaluated alongside the increasing hazard of lifestyles-threatening arrhythmias [81]. QT time is essential be watched with ECG often.

Lopinavir / Ritonavir

It is a step forward protease blocker, even as frequently used to privilege the management of HIV-1 contamination, became obvious throughout the outbreak back in 2003 while it bowed to set up to have in vitro interest against the relevant COV virus. [81]. Lopinavir might be simplest mediator studied in the controlled trial. The mediator is not proven to be useful with regards to endpoints, the arm of lopinavir had a noticeably small number of expiries and respiratory days. This medicine now does not reduce the epidemiologic load as associated to the manipulate arm. The dose that was used lopinavir four hundred mg and ritonavir in hundred mg in BD every day for 2 weeks. [82].

Oseltamivir

It is a neuroaminidase inhibitor and is a critical drug in controlling the flu. Some studies have proven that Oseltamivir not has any effect on COV due to lack of neuraminidase. So it is not useful even at start of this pandemic. It was being in use in China but it cannot be encouraged by any of studies or recommendations.[83].

Remdesivir

It is an RNA polymerase blocker and adenosine analogue. Remdesivir is a singular drug designed to deal with Ebola contamination. Randomized trials of Remdesivir administration in severe sufferers with COVID-19 did no longer show great gain. There has been an inclination for abbreviated patients in patients to get hold of early treatment [84]. Even though the medicine is accessible in unique republics via numerous scientific trials. It is also furnished with the aid of manufacturers through sympathetic use. Its significant anti-virus residences, protection side view from Ebola lessons and in vitro hobby towards CoV-2, remdesivir is measured as a promising agent [85]. A fresh collection of drugs in the sympathetic application in COVID patients of hypoxemia has proven medical enhancement in two-thirds of victims[86].

Favipiravir

It is an RNA based polymerase blocker but it showed restricted efficacy in opposition to the CoV-2 virus with in cytopathy stated invero mobile lessons [86] The drug is being in use in China to treat COVID-19 and is being clinically studied. testing for SARS-CoV-2 gentle tissue and as a complementary agent in slight to extreme illnesses [87].

Interleukin-6-inhibitors

Small cohort of sufferers with COVID develops enormously potent cytokine and lymphohistiocytosis, hemophagocytic, main to speedy inception hypoxemia, jolt, and disorder of many organs [88]. Excessive neutrophil be counted and excessive C-reactive protein might also expect this small group of victims [88,89]. Interleukin-6 is the core cytokine and tocilizumab, an anti-body receptor, is projected as a beneficial agent for CoV-2 patient. Subjective reviews from China help use of tocilizumab in that putting [89]. In a small group of 20 sufferers with intense or great COVID from China, tocilizumab confirmed tremendous improvements in the hypoxia, allergies, lymphocyte counts, fever, and C protein. The mainstream of patients protected in this subject had accelerated degrees above 20-fold of IL-6 [90].

Corticosteroids

These are typically ineffective in handling extreme respiration infections including [SARS] and Middle East breathing disease of COV. Latest retroactive research have shown a discounted danger of demise among

sufferers with CoV-2 associated with acute respiration misery Syndrome (ARDS) obtained from methylprednisolone. There are different causes together with excessive bronchial asthma and septic surprise are gift. However, the clinical crew need to weigh the capacity benefits in opposition to risks inclusive of excessive viral load and long-term publicity as referred to in different diseases such as MERS-CoV [91].

Convalescent plasma from COVID-19

A randomized managed trial of the SARS epidemic confirmed that remedy with convalescent plasma reduced health center live and dying while used in severely unwell sufferers [92]. Convalescent plasma remedy turned into tested with a few benefits for MERS, Ebola and H1N1 flu pandemic. A sequence of 5 sufferers with COVID-19 who are significantly malnourished with mechanical air flow after receiving remedy inside the 0.33 week of infection is encouraging [93]. The records offered in table V is a brief indication of the mixing treatment strategy in an effort to be taken into consideration inside the use of unique antiretroviral remedy for COVID-19 sufferers depending at the medical degree and severity of the ailment.

Management of critical patient

Serious SARS-CoV-2 intense pneumonia may also require extensive care: air flow techniques to defend the lungs, careful monitoring of fluids, trendy air flow and while clinically designated extracorporeal membranous oxygen shipping was indorsed inside the administration of significantly ill sufferers. However, positive aspects of extensive care are different in phrases of disorder and threat to fitness care employees, and those particular functions are summarized under:

Treatment of lung disease in excessive COVID Patients.

The pathology of pulmonary engrossment in COV-2 severe disorder consists of dual alveolar damage and fibromyxoid exudates formation, pneumocytes formation, hyaline crust development and infiltration neutrophil [94]. The method seems to be your mixture of together straight viral damage and inflammatory reaction of the host, even though there were unexplained reviews of acute respiratory distress with extreme ARDS progression among 12–24 hours. The onset is regularly not on time and usually after the first week of signs and symptoms, raising the function of the dad or mum's immune reaction. Occupied oxygen inside the cannula for weak pneumonia is a very valuable approach in hypoxemia. Appreciation of supplementation approaches needs to be reversed inside the CoV-2 lung immersion. Dry venture masks without moisture should be used to avoid the threat of aero-solization. Normally, high nasal cannula and peculiar airway compression need to be prevented in suffers with COV-2 [95]. Proof of that is emerging and must be definite on the premise of 1 case to some other. due to the fact that the ARDS in CoV-2 virus adjustments unexpectedly, some patients may additionally fail the invasive non-invasive air flow check. Gaining knowledge from the SARS widespread, the usage of bi-stage air stress changed into related to extended chance of contamination in medical examiners whilst HFNC became now not gift [96]. Consequently, it's pleasant to suggestion of early intubation in victims of COV-2 ARDS, to avoid non-invasive airways. The trendy WHO guiding principle has sustained the loose use of unconventional ventilation approaches so long as there is a superb visual connector without air leakage [85]. Consecutive speedy intubation lacking an ambo bag with skilled intensivists can be a very small aerosol reduction. Package deal strategies advanced by means of ICU groups can use the air consumption features in COV-2 patients [96]. Early deliberation of popular ventilation in suffers with excessive ARDS may be useful.

Cardiac Disease and SARS-COV-2 syndrome

Cardiac injury acquired with high troponins or peculiar ECG verdicts are frequently related to severe SARSCoV-2 sickness. Up to one fifth of hospitalized sufferers display ACI, frequently past due onset of the disorder in phrases of predictive significance [97]. The mechanism of

coronary heart injury is unclear, but the particular viral-mediated mechanisms appear to be very small as post-mortem research have not shown comparable evidence [98]. Given the attachment of the ACE-II receptor to the CoV-2 virus and its large affiliation with acute myocardial infarction. Myocardial infarction is also considered high in extreme illnesses [97]. A widespread share of significantly ill COV-2 patients revel in shock in the course of clinic stay [98], while the common reasons of this take in cardiogenic surprise, secondary contaminations, sepsis and cytokine typhoon. In sufferers with cytokine storm, cytokine obstruction remedy which include IL-six blockers might be helpful for a pick out institution of sufferers [99]. Initial detection of secondary contamination foremost to septic jolt, followed by using preliminary stimulation through crystalloids and then non-stop centralized vasopressors, is usually recommended. Fluid overflow need to be avoided. in the event that signs and symptoms of dehydration and heart failure persist no matter intravenous fluids and targeted vasopressors detected, ionotropic dealers which includes dobutamine may be considered [85].

Infection control

The primary way of transmitting human-to-human transmission of CoV-2 contamination is through near commerce with infected folks who produce breathing droplets. The transmission is either by direct contact or droplet if one comes as close as less than 2m to infected person. The virus is able to remain energetic in non-residing regions for several hours, ensuing in fomite contamination [99]. This has some implications because of the shortage of protective system in numerous settings. Aerosol manufacturing procedures might also produce small debris which could live within the air for a long term. far flung proliferation of such bits to cause secondary contamination appears unlikely [100].

Methodology

Framework of Research

By keeping view at current situation, we have designed a different approach for the survey of this review study. The survey form depends on volunteers by online methods and telephonic interviews. We use qualitative research approach because it is more flexible and tells more than numbers alone can tell. Kindly use the shortest and concise comprehensive sentences. As there is very complicated situation of pandemic around the world, so we have chosen this Research Design to keep our self away from the infection. Other volunteers of this research as it could be the only best way to get data for our research and follow the government SOPS and social distancing for less chance for the spread of infection

It is a very historical situation and should be documented for our coming generations that there was a situation back, when our ancestors were bounded to stay away from each other likes 6 feet apart and was facing huge amount of difficulties in gathering data for this research. If we have the present situation where social media were not present. There could be more difficult situation to collect data for this research. On the other hand face to face interviews could have been more beneficial. Telephonic conversations has we cannot record the emotions thoughts and expressions of the volunteers of this research as it could be a huge direction to interpret the result.

Particularly for this study we had a very basic knowledge about covid-19, its prevention and mood of spread. There are a lot of news circulating on

media platform and the people are very scared of and interpreting their ideas to this news. That's why we gathered information and sorted out Performa so we can focus on particular questions we want to be answered.

Sampling

For this particular research which used the candidates from age group of 18 to 30 years. The reason for choosing this particular age group was that youth is more familiar with the internet and other platform of social media. So that the data we want can efficiently be achieved as this particular age group use more social media. So we expected that they would come with the great information in this particular study. Keeping in view on the points we needed to ask we designed a question of line. On the other hand interview was more than these questions as we did along are conversation and paid full attention to the feelings and emotions of the candidates of this study because everyone is facing the difficulties in this Grand situation and for the social distance everyone is going through depression face and feeling emotional.

Questionnaire

While focusing on the outline of questioner we made open and multiplechoice questions for this study. Simple wordings were used so that candidates can easily understand the meanings of question and respond efficiently to the asked questions. To avoid errors, were kept minimum in multiple choice questions candidates can choose more than one response to tackle all the emotions there are going through.

Published Reports

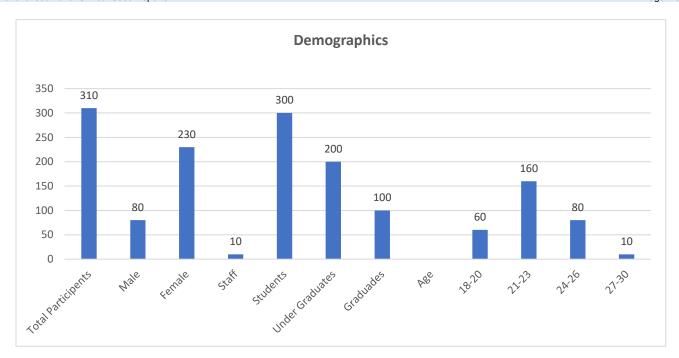
We considered the published reports from the government sectors and private sectors on this huge pandemic of covid-19. Some other more important news circulating over media channels regarding this matter, we paid close attention to various expect and outcome of these publish reports. Furthermore we have made acknowledgement for specific data we have gathered from published reports.

Data analysis

To analyze the data obtained from volunteers who attempted to fill survey form and data gathered from interviews, we have summarized all the content. We got from these two approaches in a comprehensive way by using different approaches. We have used charts and columns to represent all the reports and extensively in the form of conclusion and summary. We have analyzed all the collected data from interviews and included only research related data in this research as it also contains some personal experience is an details study including experience of Healthcare providers and other general public.

Demographics

During the time of this study on huge pandemic on cold 19, there was approximately 200 undergraduate candidates, 100 graduates and 10 members from staff of GCUF define this abbreviation for the first time. All of these participants were reminded to take part and attempt the question for this study of covid-19. The demographic bar chart for the volunteers is shown below. Most of participants were female in this study. Participants answered about 10 questions related to the covid-19, mode of transmission, prevalence and awareness about the nature of virus.



Prevalence

The prevalence of Covid -19 infection was 3.7% in the volunteers of this research. But 80% of students and 90% of staff reported that they are currently safe from this infection of covid-19 and they have not got infected. Meanwhile 60% of students and 40% of staff member they know some individuals in their relations who got infected with this deadly infection of current situation

Probability of getting infected

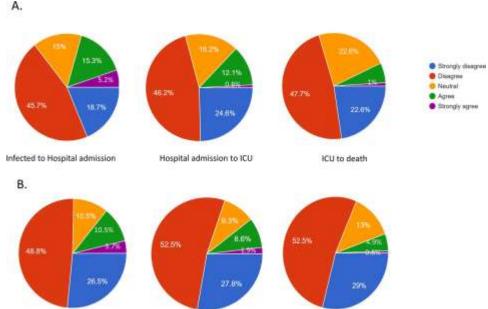
In the section of probability of getting this viral infection in coming time 4.9 % of students said it is not likely to happen and 24% said they may get infected and about to 6 % said it is very likely. As for as our staff are

concerned 10%,25% and 20% deliberated the possibility of Highly unlike, unlikely and likely correspondingly.

Awareness

The contributor's answered to questions concerning awareness of covid-

It contains the questions Covid patient that are expected to admit in hospital. And then their probability to concede in ICU and if they referred to ICU they will die in the end. Most of the volunteers disagreed or strongly disagreed with the following statements. Most of Covid patient need to be admitted in Hospital. Hospitalized patient required to be in ICU. Alter being in the ICU they will die in the end.



Suspicion of being infected

We asked the volunteers about their response if they feel the suspicion of infection. 50% of the students and 55% of the staff said they would go for a lab conformation without wasting time and they will follow the SOPS

indicated by the institutions. They will isolate themselves to safe other members of family where 30% of students and 35% of staff said they will stay in home and will follow the SOPS so they don't transmit this infection to the others. While 20% of students and 14% of staff said they would wait for the symptoms so then they will get a medical help Under

the section of treatment for this infection of Covied-19 most of the volunteers indicated that vaccine is the only preventive treatment of this infection. In the question section to rate how you can prevent the transmission of this infection. Most of the volunteer students said by very good knowledge with 34% and good knowledge with 46%. On the other hand, staff members said very good knowledge with 31% and good knowledge with 40% respectively.

Precaution measures to prevent infection

Volunteers were asked with 15 questions about prevention from the covid-19 transmission. 90% of the students recommended to wear face mask in indoor places,70% said to wear mask in outdoor. Whereas in staff wear mask in outdoors and indoor were 75% and 80% respectively. Hand wash or disinfect your hands. Social distancing avoided gatherings stay at home. Avoid hugs and kisses were more common recommendations from the volunteer by more than 90%. Nearly 60% of the people clean and disinfect the phones and avoided the outdoor dining, got enough sleep, and guided people around them to follow the preventive measures.

Discussion

In Pakistan, covid-19 pandemic started in the first trimester of 2020 due to wrong passengers arrived from different countries. The wide transmission and spreading started in March 2020 and still affecting the community of Pakistan. We received the information related to candidates of this research that 5 to 6% of volunteers are affected with this infection and a large percentage no someone in there relations who got infected from this infection which is indicating a large community of Pakistan is infected with covid-19.

Most of the volunteers of this study either staff or students believed that chances of getting infected in them are low if either they develop this infection, they will take preventive measures and adopt Sops. High degree of students and staff agreed that every person who is affected from covid needs hospitalization or ICU bed and then they will eventually die this indicates the Awareness of covid-19 among the people participated in this study. High percentage of candidates expressed that they will test themselves for 19 they will follow the SOPs they will see medical help if needed later if they are suspected are having covid 19.

Participants are following most of the recommended precautions from WHO like sanitizing hand social distancing and wearing mask is the most common precautions they can adopt to post upon the effect of covid-19. As they are more educated people and they react differently from general public to the provided guidelines. This community was only trusting the information which were being provided by the official sources are obtained from healthcare workers. They were not giving attention to the news revolving on social media and told by friends and family. This reflects the level of education and their charm to see information to official communication channels.

Most of the participant in short that they will take proper treatment and vaccination available. It is important finding that vaccination is being distributed to the local community without any cost in Pakistan by the government to prevent transmission of infection. Most of the participant indicated that following the precautions should be mandatory with the punishment in case if the general public avoid it. There is several limitations, first it was a conventional method. The second was online platforms were used due to the situation of infection in Pakistan as well as around the globe. Number of male student's perception was very much less than female, this may result in the gene ratability of the outcomes.

Conclusions

The above study estimated the awareness and management techniques in the students and staff of Health Sciences. The gathered information and data provide evidence that the awareness of this infection and betterment in the management techniques are mandatory to get rid of this pandemic as soon as possible. Incubation period and lifespan of this infection is not known yet. so Health Care providers staff and students can find it by themselves by dealing with the patients of this infection in healthcare units. University management should arrange activities to give training to health care and life sciences students to deal with this infection and devolve awareness in the general public and other peoples and recommend them the benefit of treatment and vaccination and to follow the precaution measures to avoid the circumstances of this infection otherwise, they will be going through a huge consequence of covid-19.

References

- Ksiazek TG, et al. (2003) A novel corona virus associated with sever acute respiratory syndrome. N Engl J Med., 348:1953-1966.
- 2. Tyrrell DA, (1966) Bynoe ML. Cultivation of viruses from a high proportion of patients with colds. Lancet 1: 76–77.
- 3. Zhou P, Yang XL, Wang XG et al. (2020) A pneumonia outbreak associated with a new coronavirus of probable bat origin. Nature.
- 4. Rottier PJM. (2013) The Coronaviridae. Siddell SG, editor. 115-
- Song Y, Liu P, Shi XL, et al.(2020) SARS-CoV-2 induced diarrhoea as onset symptom in patient with COVID-19.gutjnl-2020.320891
- Wölfel R, Corman VM, Guggemos W, (2020) et al. Virological assessment of hospitalized patients with COVID-2019.
- Hui DSC, Zumla A. (2019) Severe acute respiratory syndrome: historical, epidemiologic, and clinical features. Infect Dis Clin ;33:869-889.
- Temmel AF, Quint C, (2002) Schickinger, Fischer B, Klimek L, St oller E, Hummel T. Characteristics of olfactory disorders in relation to major causes of olfactory loss. Arch Otolaryngol Head Neck Surg 128:635-641.
- Mao L, Wang M, Chen S, et al. (2020) Neurological manifestations of hospitalized patients with covid-19 in Wuhan, China: a retrospective case series study. SSRN 3544840.
- Li Y, Wang M, Zhou Y, et al. Acute cerebrovascular disease following covid-19: a single center, retrospective, observational study. SSRN (Preprint).
- Bonow RO, Fonarow GC, O'Gara PT, Yancy CW.
 (2020) Association of coronavirus disease 2019 (covid-19) with myocardial injury and mortality. JAMA Cardiol
- Inciardi RM, Lupi L, Zaccone G, et al. Cardiac involvement in a patient with coronavirus disease 2019 (covid-19). JAMA Cardiol2020.
- Wang D, Hu B, Hu C, et al. (2019) Clinical characteristics of 138 hospitalized patients with novel coronavirus-infected pneumonia in Wuhan. JAMA2020;
- 14. Zhou F, Yu T, Du R, et al. (2020) Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study. Lancet; 395:1054-1062.
- 15. Dong Y, Mo X, Hu Y, et al. (2020) Epidemiology of COVID-19 among children in China. Pediatrics;e20200702.
- McMichael TM, Currie DW, Clark S, et al. Epidemiology of covid-19 in a long-term care facility in King County, Washington. N Engl J Med2020.
- Driggin E, Madhavan MV, Bikdeli B, et al. (2020) Cardiovascular considerations for patients, health care workers, and health systems during the coronavirus disease 2019 (COVID-19) pandemic J Am Coll Cardiol [pii: S0735-1097(20):34637-34644,
- Alhogbani T. (2016) Acute myocarditis associated with novel middle east respiratory syndrome coronavirus Ann Saudi Med, 36:78-80.
- 19. Chen C, Zhou Y, Wang DW. (2020) .SARS-CoV-2: a potential novel etiology of fulminant myocarditis. Herz.
- Liu K, Fang YY, Deng Y, et al. (2020), Clinical characteristics of novel coronavirus cases in tertiary hospitals in Hubei Province.
- Xu Z, Shi L, Wang Y, et al. (2020) Pathological findings of COVID-19 associated with acute respiratory distress syndrome Lancet Respir Med, 8 (4):420-422

- 22. Liu Y, Yang Y, Zhang C, et al. (2020) Clinical and biochemical indexes from 2019-nCoV infected patients linked to viral loads and lung injury Sci China Life Sci, 63:364-374
- Shi S, Qin M, Shen B, et al. Association of cardiac injury with mortality in hospitalized patients with COVID-19 in Wuhan, China. JAMA Cardiol.
- Guo T, Fan Y, Chen M, et al. (2019) Cardiovascular implications of fatal outcomes of patients with coronavirus disease (COVID-19). JAMA Cardiol.
- Corrales-Medina VF, Alvarez KN, Weissfeld LA, et al. (2015)
 Association between hospitalization for pneumonia and subsequent risk of cardiovascular diseaseJAMA, 313:264-274.
- 26. Welt FGP, Shah PB, Aronow HD, (2020) from the American College of Cardiology's (ACC) Interventional Council and the Society of Cardiovascular Angiography and Intervention (SCAI), et al.Catheterization laboratory considerations during the coronavirus (COVID-19) pandemic: from ACC's Interventional Council and SCAI JACC
- Chen T, Wu TD, Chen H, et al. (2020) Clinical characteristics of 113 deceased patients with coronavirus disease 2019: retrospective study BMJ, 368.
- 28. Huang C, Wang Y, Li X, et al. (2020) Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China Lancet, 395 pp. 497-506.
- Zhou F., Yu T, Du R, et al. (2020) Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study Lancet, 395:1054-1062.
- Wang D, Hu B, Hu C, et al. (2020) Clinical characteristics of 138 hospitalized patients with 2019 novel coronavirus-infected pneumonia in Wuhan, China JAMA. 7: 1585. 7),
- Xu Z, Shi L, Wang Y, et al. (2020) Pathological findings of COVID-19 associated with acute respiratory distress syndrome Lancet Respir Med, 8 (4): 420-422.
- 32. Liu Y, Yang Y, Zhang C, et al. (2020) Clinical and biochemical indexes from 2019-nCoV infected patients linked to viral loads and lung injury Sci China Life Sci. 63:364-374.
- Ruan Q, Yang K, Wang W, Jiang L, Song J. (2020) Clinical predictors of mortality due to COVID-19 based on an analysis of data of 150 patients from Wuhan, China Intensive Care Med. 10: 1-3.
- Wu Z, McGoogan JM. (2020) Characteristics of and important lessons from the coronavirus disease 2019 (COVID-19) outbreak in China: summary of a report of 72314 cases from the Chinese Center for Disease Control and Prevention JAMA. 24:10-26.
- 35. Huang C, Wang Y, Li X, et al. (2020) Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China Lancet, 395:497-506.
- 36. Zhou F, Yu T, Du R, et al. (2020) Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study Lancet,;28:1054-1062.
- Shi S, Qin M, Shen B, et al. Association of cardiac injury with mortality in hospitalized patients with COVID-19 in Wuhan, China. JAMA Cardiol.
- Guo T, Fan Y, Chen M, et al. (2019) Cardiovascular implications of fatal outcomes of patients with coronavirus disease (COVID-19). JAMA Cardiol.
- Kwong JC, Schwartz KL, Campitelli MA, et al. Acute myocardial infarction after laboratory-confirmed influenza infection N Engl J Med, 2018;378:345-353.
- Buzon J, Roignot O, Lemoine S, et al. (2015) Takotsubo cardiomyopathy triggered by influenza A virus Intern Med, 54:2017-2019.
- 41. Murthy S, Gomersall CD, (2020) Fowler RA. Care for critically ill patients with COVID-19 JAMA
- 42. Xie Y, Wang X, Yang P, Zhang S. (2020) COVID-19 complicated by acute pulmonary embolism Radiology: Cardiothoracic Imaging, 2 (2), Article e200067.

- 43. Danzi GP, Loffi M, Galeazzi G, Gherbesi E. (2020), Acute pulmonary embolism and COVID-19 pneumonia: a random association? Eur Heart J 10.1093.
- Tang N, Li D, Wang X, Sun Z. (2020) Abnormal coagulation parameters are associated with poor prognosis in patients with novel coronavirus pneumonia J Thromb Haemost, 18 (4):844-847
- 45. Tang N, Bai H, Chen X, et al. (2020) Anticoagulant treatment is associated with decreased mortality in severe coronavirus disease 2019 patients with coagulopathy J Thromb Haemost,
- Ellul M, Solomon T. (2018) Acute encephalitis diagnosis and management Clin Med J R Coll Physicians London, 18 (2):155-159
- 47. Rossi A. (2008) Imaging of acute disseminated encephalomyelitis Neuroimaging Clin N Am. 18 (1):149-161.
- Wong A, Simon E, Zimmerman R, Wang H, Toh C, Ng S. (2006) Acute necrotizing encephalopathy of childhood: correlation of MR findings and clinical outcome Am J Neuroradiol, 27 (9):1919-1923.
- Alsolami A, Shiley K. (2017) Successful treatment of influenzaassociated acute necrotizing encephalitis in an adult using highdose oseltamivir and methylprednisolone: case report Open Forum Infect Dis, 4 (3):145.
- Mehtar S, Shisana O, Mosala T, Dunbar R. (2007) Infection control practices in public dental care services: findings from one South African Province. J Hosp Infect; 66(1):65-70.
- Lin L, Savoia E, Agboola F, Viswanath K. (2014) What have we learned about communication inequalities during the H1N1 pandemic: A systematic review of the literature. BMC Public Health. 14: 484.
- 52. Crouse Quinn S, Jamison AM, Freimuth VS, Hancock GR (2017) Determinants of influenza vaccination among high-risk black and white adults. Vaccine. 35: 7154-7159.
- Paasche-Orlow MK, Parker RM, Gazmararian JA, (2005) Nielsen-Bohlman LT, Rudd RR, et al. The prevalence of limitedhealth literacy. J Gen Intern Med20: 175-184.
- O'Conor R, Arvanitis M, Wismer G, Opsasnick L, Sanchez Muñoz A, et al. (2019) Rationale and design of the Regimen Education and Messaging in Diabetes (REMinD) trial. ContempClin Trials. 83: 46-52.
- 55. Wolf MS, Curtis LM, Wilson EA, Revelle W, Waite KR, et al. (2012) Literacy, cognitive function, and health: results of the LitCog study. J Gen Intern Med. 27: 1300-1307.
- 56. Bailey SC, Wismer GA, Parker RM, Walton SM, Wood AJJ, et al. (2017) Development and rationale for a multifactorial, randomized controlled trial to test strategies to promote adherence to complex drug regimens among older adults. ContempClin Trials. 62: 21-26.
- Weiss BD, Mays MZ, Martz W. (2005) Quick assessment of literacy in primary care: The Newest Vital Sign. Ann Fam Med. 3:514-522.
- Wolf MS, Smith SG, Pandit AU, Condon DM, Curtis LM, et al. (2018) Development and validation of the Consumer Health Activation Index. Med Decis Making. 38: 334-343.
- Kelly B, Squiers L, Bann C, Stine A, Hansen H, et al. (2015)
 Perceptions and plans for prevention of Ebola: Results from a national survey. BMC Public Health 15: 1136.
- Guo YR, Cao QD, Hong ZS, Tan YY, Chen SD, Jin HJ, et al. (2020) The origin, transmission and clinical therapies on coronavirus disease 2019 (COVID-19) outbreak - An update on the status. Mil Med Res. 7:11.
- Guan WJ, Ni ZY, Hu Y, Liang WH, Ou CQ, He JX, et al. (2020) Clinical Characteristics of coronavirus disease 2019 in China. N Engl J Med. 382:1708–1720.
- Vardavas CI, Nikitara K. (2020) COVID-19 and smoking: A systematic review of the evidence. Tob Induc Dis. 18:20.

- Anderson RM, Heesterbeek H, Klinkenberg D, Hollingsworth TD. (2020) How will country-based mitigation measures influence the course of the COVID-19 epidemic? Lancet. 395:931–934.
- Zou L, Ruan F, Huang M, Liang L, Huang H, Hong Z, et al. (2020) SARS-CoV-2 viral load in upper respiratory specimens of infected patients. N Engl J Med. 382:1177–1179.
- 65. Rodriguez-Morales AJ, Cardona-Ospina JA, Gutiérrez-Ocampo E, Villamizar-Peña R, HolguinRivera Y, Escalera-Antezana JP, et al. (2020) Clinical, laboratory and imaging features of COVID-19: A systematic review and meta-analysis. Travel Med Infect Dis. 34:101623.
- Shi H, Han X, Jiang N, Cao Y, Alwalid O, Gu J, et al. (2020) Radiological findings from 81 patients with COVID-19 pneumonia in Wuhan, China: A descriptive study. Lancet Infect Dis. 20:425–434.
- 67. Huang C, Wang Y, Li X, Ren L, Zhao J, Hu Y, et al. (2020) Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China. Lancet. 395:497–506.
- Ai T, Yang Z, Hou H, Zhan C, Chen C, Lv W, et al. (2020) Correlation of chest CT and RT-PCR testing in coronavirus disease 2019 (COVID-19) in China: A report of 1014 cases. Radiology. 200642.
- Fang L, Karakiulakis G, Roth M. Are patients with hypertension and diabetes mellitus at increased risk for COVID-19 infection? *Lancet Respir Med.* 8:e21.
- Voiriot G, Philippot Q, Elabbadi A, Elbim C, Chalumeau M, Fartoukh M. (2020) Risks related to the use of non-steroidal antiinflammatory drugs in community-acquired pneumonia in adult and pediatric patients. *J Clin Med.* 8:786.
- Vaduganathan M, Vardeny O, Michel T, McMurray JJV, Pfeffer MA, Solomon SD. (2020) Reninangiotensin-aldosterone system inhibitors in patients with Covid-19. N Engl J Med. 382:1653– 1659.
- Wang M, Cao R, Zhang L, Yang X, Liu J, Xu M, et al. Remdesivir and chloroquine effectively inhibit the recently emerged novel coronavirus (2019-nCoV) in vitro. Cell Res. 30:269–271.
- Gao J, Tian Z, Yang X. (2020) Breakthrough: Chloroquine phosphate has shown apparent efficacy in treatment of COVID-19 associated pneumonia in clinical studies. *Biosci Trends*. 14:72– 73.
- 74. (2020) Multicenter collaboration group of Department of Science and Technology of Guangdong Province and Health Commission of Guangdong Province for chloroquine in the treatment of novel coronavirus pneumonia. Expert consensus on chloroquine phosphate for the treatment of novel coronavirus pneumonia. *Zhonghua Jie He He Hu Xi Za Zhi.* 43:E019.
- Liu J, Cao R, Xu M, Wang X, Zhang H, Hu H, et al. (2020) Hydroxychloroquine, a less toxic derivative of chloroquine, is effective in inhibiting SARS-CoV-2 infection in vitro. Cell Discov. 6:16.
- Colson P, Rolain JM, Lagier JC, Brouqui P, Raoult D. (2020) Chloroquine and hydroxychloroquine as available weapons to fight COVID-19. *Int J Antimicrob Agents*. 55. 105932.
- Gautret P, Lagier JC, Parola P, Hoang VT, Meddeb L, Mailhe M, et al. (2020) Hydroxychloroquine and azithromycin as a treatment of COVID-19: Results of an open-label non-randomized clinical trial. *Int J Antimicrob Agents*. 105949.
- Jun C, Danping L, Li L, Ping L, Qingnian X, Lu X, et al. (2020) A pilot study of hydroxychloroquine in treatment of patients with common coronavirus disease-19 (COVID-19) J Zhejiang Univ (Med Sci) 49:215–219.
- Chu CM, Cheng VC, Hung IF, Wong MM, Chan KH, Chan KS, et al. (2004) Role of lopinavir/ritonavir in the treatment of SARS: Initial virological and clinical findings. *Thorax*. 59:252–256.

- 80. Cao B, Wang Y, Wen D, Liu W, Wang J, Fan G, et al. (2020) A trial of lopinavir-ritonavir in adults hospitalized with severe Covid-19. *N Engl J Med.* 382:1787–1799.
- 81. (2020) Ministry of Health & Family Welfare. *Guidelines on Clinical Management of COVID-19*. New Delhi: MoHFW, Government of India;
- Wang Y, Zhang D, Du G, Du R, Zhao J, Jin Y, et al. (2020) Remdesivir in adults with severe COVID-19: A randomized, double-blind, placebo-controlled, multicentre trial. *Lancet*. 395:1569–1578.
- Al-Tawfiq JA, Al-Homoud AH, Memish ZA. (2020) Remdesivir as a possible therapeutic option for the COVID-19. *Travel Med Infect Dis.* 34:101615.
- 84. Chen G, Wu D, Guo W, Cao Y, Huang D, Wang H, et al. (2020) Clinical and immunological features of severe and moderate coronavirus disease 2019. *J Clin Invest*. 130:2620–2629.
- Ruan Q, Yang K, Wang W, Jiang L, Song J. (2020) Clinical predictors of mortality due to COVID-19 based on an analysis of data of 150 patients from Wuhan, China. *Intensive Care Med*. 46:846–848.
- Mehta P, McAuley DF, Brown M, Sanchez E, Tattersall RS, Manson JJ, et al. (2020) COVID-19: Consider cytokine storm syndromes and immunosuppression. *Lancet*. 395:1033–1044.
- 87. Xu X, Han M, Li T, Sun W, Wang D, Fu B, et al. (2020) Effective treatment of severe COVID-19 patients with tocilizumab. *Proc Natl Acad Sci U S A* 117:10970–10975.
- Lee N, Allen Chan KC, Hui DS, Ng EK, Wu A, Chiu RW, et al. (2004) Effects of early corticosteroid treatment on plasma SARSassociated coronavirus RNA concentrations in adult patients. *J Clin Virol*. 31:304–309.
- Arabi YM, Mandourah Y, Al-Hameed F, Sindi AA, Almekhlafi GA, Hussein MA, et al. (2018) Corticosteroid therapy for critically ill patients with Middle East respiratory syndrome. Am J Respir Crit Care Med. 197:757–767.
- 90. Lai ST. (2005) Treatment of severe acute respiratory syndrome. Eur J Clin Microbiol Infect Dis. 24:583–591.
- van Griensven J, Edwards T, de Lamballerie X, Semple MG, Gallian P, Baize S, et al. (2016) Evaluation of convalescent plasma for Ebola virus disease in guinea. N Engl J Med. 374:33– 42.
- Zumla A, Chan JF, Azhar EI, Hui DS, Yuen KY. (2016) Coronaviruses - drug discovery and therapeutic options. *Nat Rev Drug Discov.* 15:327–347.
- 93. Mair-Jenkins J, Saavedra-Campos M, Baillie JK, Cleary P, Khaw FM, Lim WS, et al. (2015) The effectiveness of convalescent plasma and hyperimmune immunoglobulin for the treatment of severe acute respiratory infections of viral etiology: A systematic review and exploratory meta-analysis. *J Infect Dis.* 211:80–90.
- 94. Shen C, Wang Z, Zhao F, Yang Y, Li J, Yuan J, et al. (2020) Treatment of 5 critically ill patients with COVID-19 with convalescent plasma. *JAMA*. 323:1582–1589.
- 95. Xu Z, Shi L, Wang Y, Zhang J, Huang L, Zhang C, et al. (2020) Pathological findings of COVID-19 associated with acute respiratory distress syndrome. *Lancet Respir Med.* 8:420–422.
- 96. Alhazzani W, Møller MH, Arabi YM, Loeb M, Gong MN, Fan E, et al. (2020) Surviving sepsis campaign: Guidelines on the management of critically ill adults with coronavirus disease 2019 (COVID-19) *Intensive Care Med.* 46:854–887.
- Tran K, Cimon K, Severn M, Pessoa-Silva CL, Conly J. (2012)
 Aerosol generating procedures and risk of transmission of acute
 respiratory infections to healthcare workers: A systematic review.
 PLoS One. 7:e35797.
- 98. Yang X, Yu Y, Xu J, Shu H, Xia J, Liu H, et al. (2020) Clinical course and outcomes of critically ill patients with SARS-CoV-2 pneumonia in Wuhan, China: A single-centered, retrospective, observational study. *Lancet Respir Med.* 8475–8481.

 van Doremalen N, Bushmaker T, Morris DH, Holbrook MG, Gamble A, Williamson BN, et al. (2020) Aerosol and surface stability of SARS-CoV-2 as compared with SARS-CoV-1. *N Engl J Med.* 382:1564–1567.

Ready to submit your research? Choose ClinicSearch and benefit from:

- > fast, convenient online submission
- > rigorous peer review by experienced research in your field
- > rapid publication on acceptance
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

At ClinicSearch, research is always in progress.

 $Learn\ more\ http://clinicsearchonline.org/journals/international-journal-of-clinical-case-reports-$



© The Author(s) 2022. **Open Access** This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit http://creativecommons.org/licenses/by/4.0/. The Creative Commons Public Domain Dedication waiver (http://creativecommons.org/publicdomain/zero/1.0/) applies to the data made available in this article, unless otherwise stated in a credit line to the data.