

COVID-19: What we know

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Letter

SARS-CoV-2 coronavirus infection outbreak has been reported in December 2019 in Wuhan, China (1-4). COVID 19 corona disease seems to be different from children and adults. The question is why? To date, there have been only few fatal in childhood, in complete difference to adults. Till 26 of March 2020, WHO registered 2401 deaths worldwide. A series and devastating new virus spreading at an extremely rapid pace all over the world. More than 100.000 infections were found in the US until the date of this publication.

What we know, COVID 19 could be a result of a similar coronavirus in bats, spreading exponential, one human transmitter infects 3 people, 3 infected patients infect themselves to nine, and so on. Chinese researchers float their young research articles about COVID 19 to western journals. What we know, COVID-19 will kill many people, and, children. COVID 19 infects the lungs leading to severe crown pneumonia and later ARDS. What we know, that older patients with disabilities and underlying diseases like hypertension and diabetes are at greater risk for developing a fatal outcome in COVID-19. The search for drugs and research efforts in developing a vaccination is at high speed. COVID-19 binds with spike protein to the angiotensin-II receptor. Vaccination research focuses on inactivating spike protein and the binding domain. The receptor binding domain is well known. Research must concentrate intensively on blocking and inactivate the spike protein receptor domain of COVID-19. Drug theories think about blocking the angiotensin II receptor by Losartan or another angiotensin II blocker, that COVID 19 can't bind to ACE2. What we know is that in some severe cases of Losartan treatment, the patient course was more fatal. At the University of Minnesota, a randomized trial was introduced on

16/03/2020 in 200 patients to prove the advantage of Losartan in the treatment of COVID-19 patients. Attempts to give children lopinavir/retinavir sirup was introduced in China few weeks after outbreak in Wuhan, in children. What we know, all given drugs, hydrochloroquin, Losartan, lopinavir/retinavir, antibody-rich plasma from survivors show, to date, no overwhelming therapeutical effect in COVID-19 patients. What we know is, that in children, a higher level of procalcitonin, a higher level of dimere and surprisingly, a higher level of creatine kinase MB isoenzyme was found, suggesting a myocardial potential. Research efforts in general are in childhood shoes are due to the extremely rapid spreading of this novel virus a challenge for the human being.

What we know, COVID-19 will change our lives, our world.

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