# **COVID-19: A Real Killer Disease**

# Ramendra Pati Pandey<sup>1</sup>, Anjali Priyadarshini<sup>2</sup>, Archana Gupta<sup>3</sup>, Nehha Kasturiaa<sup>4</sup>, Manoj Kumar Yadav<sup>5</sup>, Arpana Vibhuti<sup>6</sup>, V Samuel Raj<sup>7</sup>

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# Abstract

Knowledge of COVID-19 is changing almost daily through numerous scientific reports. We have been hearing new information regularly, sometimes contradictory due to constantly changing the scientific findings and results. At the commencement of the COVID-19 we were learnt that cough and fever were the unambiguous signs of COVID-19. Now we know that the disease can cause a wide variety of symptoms and even no symptoms at all. Many accurate facts about the disease remain unknown. Scientists do not have enough time to analyze the data and symptoms as they are busy in saving lives. Scientists are going too fast to understand the pandemic, causing more confusion to say whether Covid-19 is a killer disease.

Keywords: COVID-19; Killer Disease.

#### Authors Affiliation:

<sup>1-5</sup>Assistant Professor, <sup>6</sup>Associate Professor, <sup>7</sup>Director (C4D) and Dean Academics, Department of Biotechnology and Biomedical Engineering, SRM University, Delhi-NCR, Sonepat, Haryana 131029, India.

**Corresponding Author: Ramendra Pati Pandey**, Assistant Professor Department of Biotechnology and Biomedical Engineering, SRM University, Delhi-NCR, Sonepat, Haryana 131029, India.

E-mail: ramendra.pandey@gmail.com

# Introduction

COVIDd-19 is a very complicated disease as half of those infected don't develop symptoms, and most patients have only mild symptoms. It has been reported that several patients died due to uncontrolled reaction of the immune system, called cytokine storm that can damage most vital organs (Li et al., 2020). The new coronavirus can attack the nervous system (Wu et al., 2020). In some cases, respiratory failure is related to neurological failure, not pneumonia. It's not certain when recovered patients stop being contagious. There are doubts about how long immunity lasts after the disease (Li et al., 2020).

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Coronavirus infected cells generate an uncontrolled inflammatory response, not only in lungs but can be widespread in the body (Chen et al., 2020). Indeed, there have been reports of kidney, intestinal, or coronary damage (Madjid et al., 2020). It is not known which factors influence patients to



Fig. 1: COVID-19, Seasonal flu, SARS, and MERS fetal cases total to date (Source: CDC and WHO)

develop the syndrome. Regarding COVID-19, age is very significant. The key is to understand who are the most susceptible, it will take long time to understand.

The latest statistics indicate a fatality rate of new coronavirus is about 3.4 % (WHO, 2020). The SARS virus killed about 10% of all infected individuals (del Rey Calero J, 2004), while the MERS outbreak had a fatality rate of around 35% (Lin et al., 2018). There are 19, 345,57 confirmed cased of Covid-19 and has caused 1,20,438 deaths across the world of April 14, 2020 (Worldometer). The mortality rate of the virus has fluctuated. In the past few decades, we have seen a session of other pandemics: SARS, H1N1 and MERS, to name a few (fig.1 and 2).

SARS (severe acute respiratory disease) was flung in 2002. SARS came out in a way somewhat close to Contemporary Covid-19. It has been infiltrated in 29 countries. There were just over 8,000 confirmed incidents of the virus and Almost 800 persons were killed, putting the death rate close to 10%. Not to be alarming, but COVID-19 already has more confirmed cases and has claimed more lives April 14,2020. More lives. In 2009, H1N1, deemed the swine flu, broke out and hit more than 210 countries and approx. 3 lakhs people were died according to the CDC. Three years later, in 2012, MERS (Middle East respiratory syndrome) spread to a total of 27 countries. According to the World Health Organization, MERS killed 34% of people who had it.



**Fig. 2:** COVID-19 cumulative deaths as of 8th April, 2020 (Source: Johns Hopkins University, USA).

At least so far, Covid-19 does seem to be more lethal than the seasonal flu or SARS or MERS (Wang et al.,2020). In the last four months, the virus has taken the world by storm and already claimed around 1,20,438 lives. The latest data suggests that it's less deadly than either SARS or MERS. Only time will tell how covid-19 will ultimately compare to other worldwide pandemics. It will take several weeks to be confident about how the virus behaves, including its mortality rate.

# Conclusion

It is a very hard task to identify the reason or the reasons for infection containment, but nevertheless each and every variable and the confounding factors need to be addressed and analyzed. Tropical countries encounter a lot of pathogens resulting in infectious diseases. These infectious diseases may mask the milder symptoms of COVID-19 which may go undetected and thus unscreened and unreported. Lack of infrastructure and resources is a limiting factor for disease control and hence may create hot spots from where the virus can continually spread. This is a dynamically unfolding pandemic that will require the concerted efforts of counties around the world to control.

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