Covid-19 Treatment from a New Perspective for the First Time

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Received: November 24, 2020; Accepted: November 30, 2020; Published: December 05, 2020

By creating panic and pandemics, the covid-19 imposed high costs on governments and health systems in numerous countries. Unfortunately, due to the unknown nature of the disease, the costs were not useful. Doctors and scientists to solve the biggest challenge off modern medicine were unified.

I started my research on pathology and its treatment from the beginning of the disease and made good progress, but due to the immigration of my family and I to Canada, there was an interruption in the completion of the research. Now I’ll sum up and publish the results of the research.

Introduction
The name coronaviruses are divided from the Latin word cronar to the crown or wreath add mostly refers to subfamily orthocoronavirinea and it’s connected to RNA viruses. Genome size of viruses is approximately 26 to 32 kilobases and they are one of biggest RNA viruses.

Covid-19 protects two-layer lipids and a number of protein properties of the virus outside the host cell. The structure of membrane proteins includes: Envelope (E), Spike (S) and Membrane. Ratio E:S:M is approximately 1:20:300. Protein S is required for interaction with host cells. On average, there are 74 S protein. The length of the S protein is about 27 nm and is divided into two subunits: S1 subunit that is Receptor Binding domain (RBD), S2 subunit anchors the spike in the viral envelope and on protease activation enable fusion. A shorter spike that like surface protein called Hemagglutinin (HE) appear as tiny projection of 5-7 nm long. HE help in attachment to and detachment from the host cell.

Virus Duplication Cycle
1. The disease stats by binding the virus S protein to the cell receptors and releasing the host protease and activating the receptor-protein binding and entering the virus into the host cell by endocytosis or viral envelop direct binding.
2. Virus coating is removed and the genome is inserted into the host cell cytoplasm and direct translation by host cell ribosomes. RNA-dependent RNA polymerase (RdRp) has the main role that begins directly replication and transcription of RNA that involve from RNA strand and directly mediates the synthesis of negative-sense genomic RNA from the positive-sense genomic RNA.
3. After RNA translation, the protein N binds genomic RNA and the the protein M is integrated into the membrane of the endoplasmatic reticulum (ER) like the envelope proteins S and HE. Then assembled nucleocapsids with RNA into lumen and encased with the membrane. Finally transported by golgi vesicles to the cell membrane are exocytosed into the extra cellular space.

Main Discussion
According to my research, coid-19 is not naturally available in nature and is the result of a combination of several viral genomes. The replicase-transcriptase complex capable of genetic recombination when at least two or more viral genomes are present in the same infected cell RNA recombination appears to be a major driving force in determining genetic variability to jump frame one host to another. The exact mechanism of recombination in coronaviruses in unclear, but likely involves template switching during genome replication.

Human coronaviruses infect the epithelial cells of the respiratory tract while animal coronaviruses generally infect the epithelial cells of the digestive tract.

The human epithelial cells of the lung by binding to angiotensin-converting enzyme2 (ACE2) receptor. The fundamental problem of chain defense reactions has been aggravation, not the virus itself. Rise of neutrophils and reduction of lymphocytes indicates critical situation.

Cytokines are released from WBC and cause more immune response and inflammation, here is IL-6. The increase in IL-6 plays a role in the increase of IL-4 by CD4 cells. Cytokine storms cause WBC to attack healthy lung tissues and may cause blood clots, fluid leakage from the veins, fluid accumulation in the lung and hypotension. Proteins and dead membrane cells accumulate around lung bubbles and inhibit oxygen uptake (ARDS). Most deaths are caused by respiratory failure, but mainly insufficient of multiple vital organs due to immune responses such as damage to the lungs, heart, kidneys, intestine and liver. There is a significant relationship between the ratio CD4 and CD8 and the reduction of blood oxygen. Bacterial infection has a very small share. IL-4 plays two roles: 1- increase inflammation due to ability to differentiate TH0 to TH2. TH2 increases IL-4, IL-5, IL-13 and IL-9. In other words, IL-4 increases the expression of eotaxin and other cytokines, which may contribute to lung inflammation.
and airway deformity. Also through VCAM-1 interaction, it can guide the migration of lymphocytes, monocytes, basophils and eosinophils to inflammatory position. Therefore, stimulating the proliferation of lymphocytes B, replacing immunoglobulin isotype from IgM to IgE and differentiation of TH2 phenotype on lymphocytes T plays an important role in allergy induction and maintenance. IgE is a key mediator in allergic disease such as asthma and allergy and plays a central role in the main propagation of inflammatory cascades, resulting in an allergic reaction. A very important point that has not been studied so far is the proliferation and concentration of virus in the gallbladder and re-absorption through the intestinal wall mucosa. This important point can justify the sudden and exponential exacerbation of patients and gastrointestinal symptoms. On the other hand, the animal type of coronaviruses have such characteristics.

**Treatment**

According to my research, the best way to treat is to prevent viral particles from binding to the host cell wall. In that way, by not proliferating the virus, the immune system easily destroys them without the pathology of the disease. As soon as the initial clinical symptoms occur, even in the absence of positive covid-19 test, even in high-risk individuals such as heart disease, respiratory disease, diabetes mellitus and older people with control of the doctor and without the need for hospitalization is successful. Unfortunately, with the available facilities, I was unable to conduct research for pregnancy and children under the age of 12, but I will start at the earliest opportunity.

1. Captopril tablets are ACE inhibitors and prevent the conversion of Angiotensin 1 to 2, which is a potent vasodilator, thus reducing peripheral resistance and reducing the secretion of Aldosterone, reducing water and salt retention and decreasing blood pressure. The dose for decrease blood pressure in adults is 50 mg every 8 hours maximum 450 mg/day, in adolescents 12.5-25 mg/dose every 8-12 hours, in older children is 6.25-12.5 mg/dose every 12-24 hours. For the treatment of COVID-19 captopril used at low doses and more frequently. In adult 18.5 mg/day in divided 6 times (in fact 3.125 mg every 4 hour), in adolescents 9.37 mg/day in divided 6 times (in fact 1.56 mg every 4 hour), in older children 0.4 mg/kg/dose in divided 6 times (calculated dose divided every 4 hour). Captopril dosage is low, so the probability of lowering blood pressure is very low and due to the metabolization of 50% of the drug in the liver, it also affects bile proliferation of the virus, due to the half-life of 2-3 hours and the binding of 25-30% of drug to plasma proteins, with slow absorption of drug, effect of drug appears after 24 hours. In G6PD deficiency and angioedema history, Lithium, Amlodipine, Triamterene-H, Valsartan recent consumption be consumed with caution. Patient rehydration, avoiding from foods with high level potassium such as bananas and the possibility of orthostatic hypotension with sudden change status should be considered. Drug absorption decreases with food, so an hour away from food consumption is required.

2. Vit C has the properties of reducing the process of cell damage, strengthening the immune system, neutralizing free radicals and strengthening the activity of phagocytes. It’s effect on the treatment of covid-19 is synergistic effect with captopril. In adult, slow released capsule is 1000 mg, in adolescent the slow released capsule is 500 mg and in old children is 250 mg perday.

3. Condor resin. Tree of named Boswellia Thurifera (another names: B. Sacra, B. Carterii) is native to India, Pakistan, Somalia, Oman and Yemen. The tree has small fruits that are used both in raw form and for food preparation. It’s gum (resin) is pale yellow, orange and brown that called Indian frankincense or Olibanum in English. Condor is a rich source of antioxidants, Boswellic acid and terpenes. It increases circulation in the body and helps treat wounds faster and reduces the risk of infection. Coqueranin has anti-inflammatory properties and reduces symptoms of dyspnea by affecting bronchials. The anti-inflammatory and anti-bacterial properties of Condor reduce infection, inflammation, and blood obstruction and increase the blood flow of bronchials. The dosage of 3 grams with 5 grams of banged igella savita (black caraway) soaked in cold water for half an hour and drank fasting in the morning. The bitterness of this compound with a little honey. With a distance of 12 hour, one gram Condor and 3 grams of nigella savita are repeated in the same way. This compound must be repeated every day until full recovery.

**Conclusion**

Contrary to popular notion, covid-19 is easily manageable away from panic. We need to be in agreement with nature and reconcile with it. Successful treatment methods are a combination of modern science of medicine and traditional medicine that has been a supporter of human being for many days. This virus will exist like other viruses, but not with the current urgency. I have carefully examined all available treatments such as antivirals, rheumatic and anti-inflammatory drugs, plasma replacement, interleukin blockers, antibiotics and... But based my experience, it’s not considerable useful. In my opinion, in the long run, the covid-19 vaccine will not provide the result that is expected. My advice is to go back to normal life and away from fear. Hoping for a happy and healthy society.
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