

Systematic Evaluation of Wound Healing and Easy Intubation Rate in Children with Covid-19 and Hospitalization in Intensive care Units:A Systematic Study

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Abstract

This study examines the condition of the Systematic Evaluation of Wound Healing and Easy Intubation Rate in Children with Covid-19 and Hospitalization in Intensive care Units. Coronaviruses are a large family of viruses that can infect animals and humans.Many of the known coronaviruses can cause a range of respiratory infections in humans.Which range from the common cold to more severe illnesses such as MERS Middle East Respiratory Syndrome (MERS) and acute respiratory syndrome (SARS).Wound healing is the result of traumatic cellular, biochemical, and systemic events to restore normal continuity by forming new tissue. The basic principle in wound healing is to minimize tissue damage and ensure adequate perfusion and oxygenation to the tissue, as well as proper tissue nutrition and hydration. Growth factors, radiotherapy, chemotherapy, blood supply, genetic and immune disorders, diabetes, nutritional factors and steroid use all affect wound healing.The disease is mainly manifested by chills, body aches, sore throats and dry cough with or without fever.Some patients also have symptoms such as diarrhea, abdominal pain, headache, sweating, nasal congestion and runny nose.Faster diagnosis of the disease will make the infected person less likely to transmit it to the community, as well as more attention to warning signs and faster treatment will increase the chances of recovery.It should be noted that in the event of an epidemic of a virus, the first suspicion of infection.

Keywords: Corona, Respiratory problems, Patient, Community, Sore Throat, MERS.

Introduction

When any kind of respiratory symptoms occur, even symptoms similar to seasonal allergies and simple colds such as runny nose, sore throat, sneezing, coughing, etc., until the end of the epidemic, the first suspicion should be Covid-19 [1-3].Fever is one of the main symptoms of Covid-19, but as researchers have repeatedly warned, it is possible to get the disease asymptotically, so people cannot have a fever but get coronavirus [4-6]. The most important coronary symptoms on the skin are lesions such as urticarial, viral diseases and chicken pox. Fever is important in people; This means that if a person goes to a health center and has a fever and skin symptoms, he should think about Corona [7].If a person does not have a fever but has skin symptoms, it may not be very important and may be related to coronary heart disease. Due to the existence of a 2 to 11-day incubation period and the ability to transmit the virus during this period and even after it, social interactions should be reduced and the use of masks and other precautionary and health recommendations should be considered for all people.Depending on the different physical conditions of different people, it can range from the symptoms of a simple cold to severe symptoms and the risk of death for all people and all age groups [8-10]. These symptoms are usually mild and start gradually. Also, the initial entry of the virus into the body has a significant effect on the severity of symptoms.This makes it important to wear a mask and follow preventive principles to reduce mortality. Some sufferers may not experience any of the

symptoms of the disease and may not feel unwell. However, in the elderly, people who have underlying diseases such as high blood pressure, diabetes, heart disease, immunodeficiency, a history of malignancy, high BMI, etc., are more likely to have the disease worse. It is not safe. Contrary to popular belief, children are more likely to get the disease, but in most cases the symptoms are mild in children [11-13]. Serious complications of this disease can occur mainly in the elderly or people with a history of underlying diseases. The disease can be spread to others through cough drops or inhalation from the mouth and nose of a person with Covid-19. These droplets are spread on the equipment and surfaces around the patient, then other people become infected with Covid-19 by touching the infected equipment or surfaces and touching the eyes, mouth and nose [14]. For this reason, it is important that everyone keeps a distance of one to one and a half meters from others.

Covid-19 and the effect of it on wound healing

Of course, many people with Covid-19 have mild symptoms, especially in the early stages of the disease [15-17]. However, it is advisable to follow the health tips in dealing with all members of the community. It seems that the possibility of transmission of Covid-19 through the feces of infected people is low. Although initial research suggests that in some cases the virus may be present in the feces, the spread of the virus through the feces is not the main feature of the outbreak. However, the risk of passing stool is a double reason to wash your hands regularly after using the toilet and before eating (Table 1). This is especially important for certain categories such as kitchens and restaurants. Antibiotics have no effect on preventing viral diseases and are only effective in treating bacterial infections [18].

Table 1. Selected studies to study objectives

No.	Study. Years	Study design
1	Rosa et al., 2020	Prospective
2	Naftili et al., 2020	
3	Hassan et al., 2021	
4	Frank et al., 2022	
5	Chew et al., 2022	
6	Liut et al., 2021	
7	Samin et al., 2021	
8	Wramp et al., 2019	
9	Ciok et al., 2020	
10	Eray et al., 2022	
11	Qingchun et al., 2022	
12	LIHA et al., 2021	
13	Sami et al., 2021	
14	Ku et al., 2021	

A wound is the disruption or destruction of normal tissue functions. Wounds can be classified as partial and full-thickness wounds, acute and chronic wounds, open and closed wounds. There is a lack of skin in open wounds. This causes the tissues under the skin to be exposed, in contact with the atmosphere, and the tissues and cells to be negatively affected. In open wounds, infection, tissue dryness, unprotected tissues, heat loss, red blood cells, leukocytes, and protein loss negatively affect healing. Acute wound (surgical incision, trauma and severe burn); The ability of tissue to return to anatomical integrity and normal function after undergoing a specific period over a specified period of time. Chronic ulcers; Unlike acute wounds, they are wounds that do not go through specific periods and stages and therefore cannot achieve anatomical and functional integrity.

Wound healing steps

Stage of homeostasis and inflammation; It begins with short-term homeostasis with contraction of the arteries. The healing process does not continue without homeostasis. With homeostasis provided, the inflammatory cells move to the wound area and begin to kill the bacteria in the damaged area. Local swelling, pain, redness, and fever, which are clinical signs of inflammation, occur in the wound area. In the absence of a factor that prolongs the inflammation, this stage ends in 3-5 days. Reproduction stage; It starts from day 3 after the injury and continues for 3 weeks. The main events of this stage are: creating a permeable barrier, supporting blood supply and strengthening

the damaged tissue. Maturity stage; It is the stage when the number of fibroblasts in the wound area decreases, collagen production reaches equilibrium, epithelialization ends, the wound area becomes pale, wound elasticity increases, resulting in improved scar tissue (Figure 1).

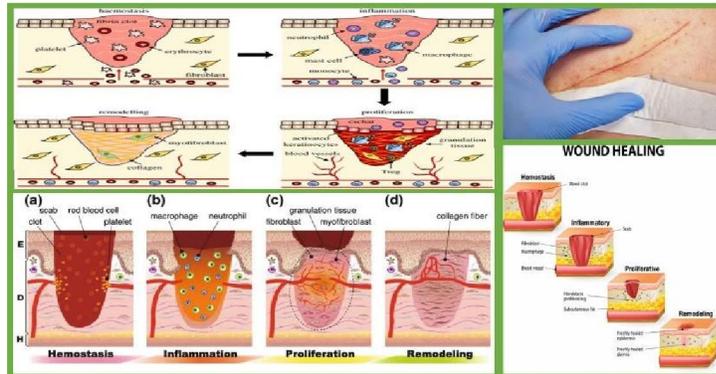
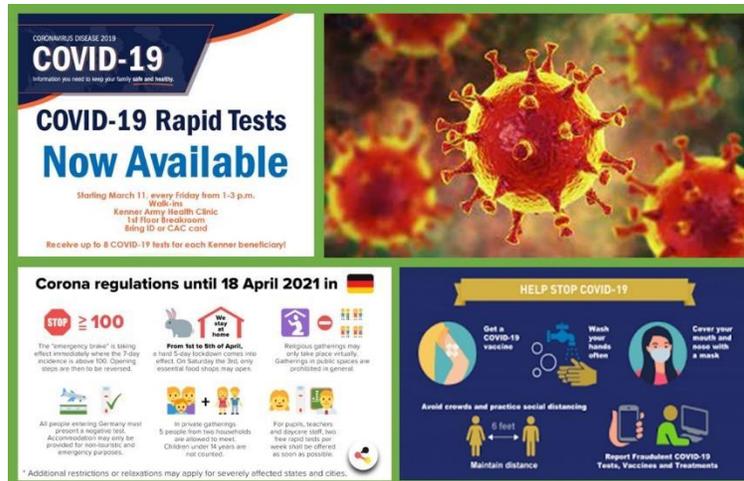


Figure 1. How Wounds Heal: The 4 Main Phases of Wound Healing

Covid-19 disease also has a viral cause, so antibiotics have no effect on it. Antibiotics should only be used with a doctor's prescription to treat bacterial infections. The severity of the disease varies from person to person [19]. It usually presents as a simple cold to an acute and fatal respiratory illness. However, a number of sufferers have recovered and overcome the disease. There is still insufficient evidence that the virus is transmitted from mother to fetus during pregnancy or that the disease has a potential effect on the baby. This issue is currently under investigation. Pregnant women should take precautions to protect themselves against the virus and see a doctor immediately if they experience symptoms such as fever, cough or shortness of breath [20]. Due to the benefits of breastfeeding, as well as the insignificant role of breast milk in the transmission of respiratory viruses, they can continue breastfeeding, provided they hold a mask while holding and close to the baby (including while breastfeeding). Wash them before and after contact with the child and clean and disinfect contaminated surfaces. If the mother is very ill, she should be encouraged to breastfeed, which in all these stages should follow the same methods to prevent the above infection (Figure 2). In most patients, sampling may not be necessary, but for some patients, a sample of a suspect's throat and nose is removed and sent to a laboratory.

Figure 2. COVID-19 Treatment Guidelines



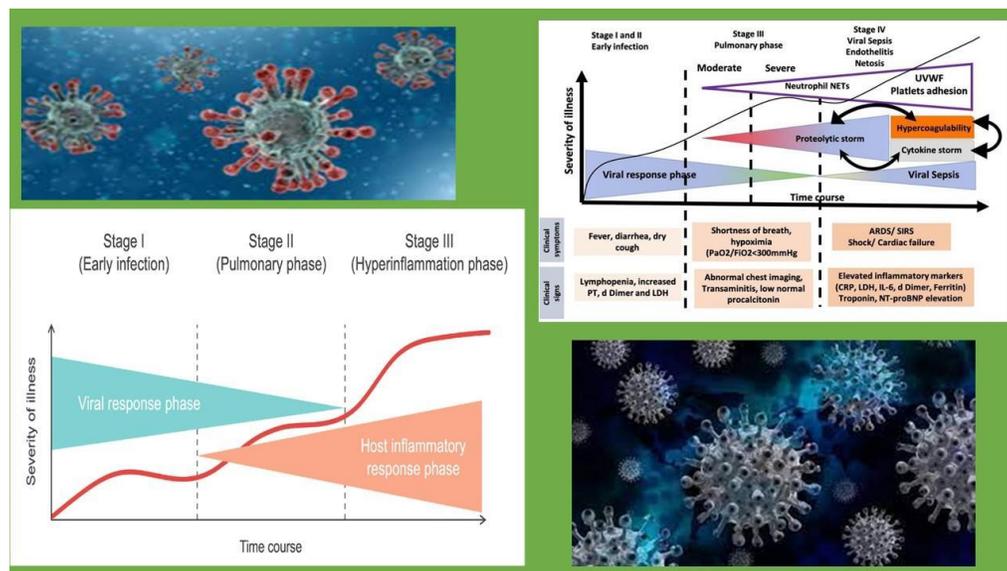
The sample is usually taken from people who, according to their doctor, have symptoms of Covid-19. PCR tests, blood cell tests, and CT scans of the lungs can also help diagnose the disease. Any illness with symptoms of colds (runny nose, cough, sneezing, sore throat, mild fever, lethargy and weakness) or flu symptoms (high fever and severe and sudden lethargy) or symptoms of nausea, dizziness and prolonged headache, chest pain, Shortness of breath, loss of smell and taste refers to suspected coronary heart disease. In the first step, such people should quarantine themselves and see a doctor, and if necessary, be assigned to perform diagnostic tests so that they are informed of their illness earlier and with rest, be treated sooner, and prevent other people from getting infected [21-23].

So early referral and faster diagnosis are very important. In many people, the second and even third cases have been reported with higher symptoms and worsening. For this reason, it is necessary to observe preventive precautions until the outbreak of this virus. For the general public, except for the medical staff and those involved in the crisis, it is recommended to use a disposable medical mask. For the general public in all conditions, especially in crowded places such as hospitals, airports, train stations, subways, public buses, planes, trains, supermarkets, restaurants, etc., as well as members of organs such as the police, security forces, couriers as well as people who have quarantined patients at home, it is recommended to use medical surgical masks or particle protection masks in accordance with N99 standards [24].

Also, in patients whose corona test is positive, the use of filtered masks should not be used and masks without filtration or surgery are recommended. Generally, surgical masks should be replaced after 2 hours or in case of wetting and N99 mask after 8 hours [25]. Be sure to pay attention to the personal use of the mask and before masking, wash your hands according to the rules and avoid using the inner surface of the mask during use [26]. Also, while using the mask, avoid repeated removal and hand contact with the external surface of the mask should not be done in any way. Also, whenever the mask is contaminated by cough drops or sneezes or other objects, or when the mask is deformed, damaged or has a specific odor, the mask must be replaced immediately. After the recommended time has elapsed, we must dispose of it properly (Figure 3).

After use, put it in a plastic bag, close the lid of the bag and throw it away separately according to the instructions of your city [27]. Masks used by people suspected of having the disease and their care and nursing staff collect them, such as infectious hospital waste. The important thing after removing the mask is that the hands should be washed in the standard way [28]. Therefore, it is best to avoid the presence of children in crowded places and at the same time avoid contact of this age group with infected people [29]. Touching objects infected with the Covid-19 virus may spread the disease into the body.

Figure 3. Corona virus in China Covid-19 With inworld the picture shows the beginning of the spread it



Also, if there is contact between the hands and the eyes, mouth and nose, it may cause indirect transmission of the virus. So, there is no need to worry too much about personal hygiene. Note that washable products such as canned food, etc. should be washed with hot water and dishwashing liquid, and the rest of the items should be removed from the package and put in the bin with a lid. Wash your hands immediately and disinfect contact surfaces. Thermal scanners can be useful in diagnosing people who have a fever caused by an infection caused by a new coronavirus [30].

However, they cannot be trusted 100% because these scanners cannot detect people infected with the new corona virus who have not yet had a fever because it takes between 2 and 17 days for the symptoms of a fever to appear in a person with a new corona virus. People of any age can be infected with the new virus -2719. The elderly and people with certain diseases such as (asthma, diabetes and heart disease) appear to be highly susceptible to the virus (Table 2). The World Health Organization advises people of all ages to take steps to protect themselves against the virus [31].

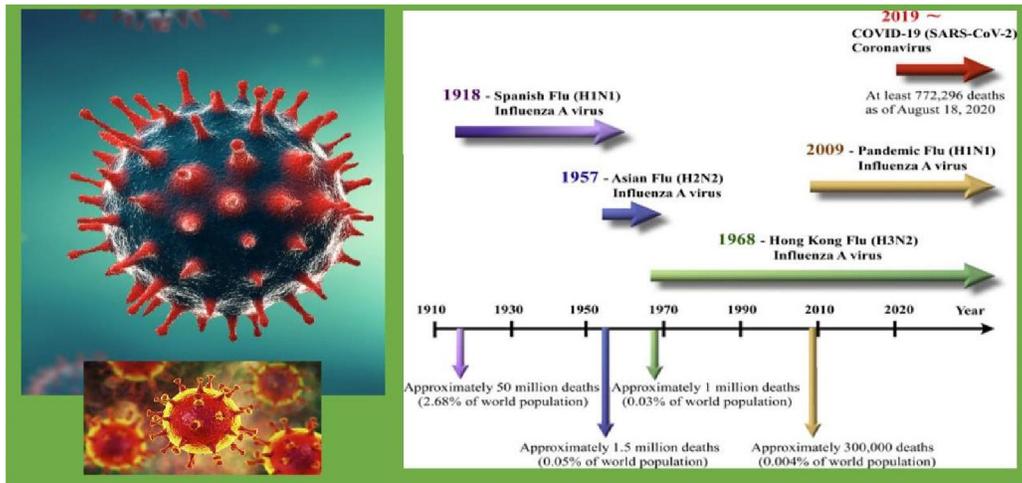
Table 2. Study about Wound healing

Maximum	Minimum	Number
10	8	14
66	65	16
40	18.2	12
23.05	15.85	14
29	18	14
26	23	12
99	86	12
99	64	14
25	24.12	14
48	46.96	12
31	46	14
35	34	14

Discussion

As a global problem, it is one of the most dangerous viruses of the coronavirus family, causing severe acute coronavirus syndrome. Despite the efforts of researchers around the world, there are still many ambiguities in various areas of the disease. The disease ranges from asymptomatic/pre-symptomatic to very severe. It should be noted that the symptoms are not fixed and the patient may enter the next stage at any time. The disease can range from asymptomatic to severe pneumonia, acute respiratory distress syndrome, and death (figure 4). About 80% of patients with Covid-19 have asymptomatic, mild to moderate symptoms, and about 15% present with severe symptoms and need for hospitalization. In 5% of cases, the patient's condition becomes critical and may require ICU admission and intensive care [32-34]. Loss of sense of smell as well as sense of taste are some of the symptoms that have been reported in many patients. Other symptoms include gastrointestinal symptoms such as anorexia, weakness, lethargy, premature fatigue, heartburn, nausea, vomiting and diarrhea. The global epidemic of Covid-19 disease has put significant pressure on medical centers around the world. The lack or lack of facilities in medical centers has made the care of patients with coronary heart more and more difficult.

Figure 4. The Trends in urology & people health



Supportive therapies include fluid replacement, followed by the use of vasopressor drugs to lower blood pressure, respiratory support (supplemental oxygen) and mechanical ventilation (ventilator) in severe respiratory problems, and the use of blood products (plasma therapy) for improved coronary heart disease. Production of human plasma-derived drugs and production of IgG Global studies on the treatment of patients with coronary artery disease show that many coronary artery disease survivors died of certain diseases [35]. The study of patient records showed that these three methods of supportive care were used in the intensive care unit to improve the condition of patients. Although most patients with COVID virus 19 do not need to be hospitalized, in patients with severe symptoms, acute respiratory distress syndrome is usually seen, which requires aggressive mechanical ventilation. Unfortunately, the lack of ventilators has become a major problem in treating patients with severe clinical conditions. About 5 to 15% of patients with Covid-19 require mechanical ventilation during treatment. The rate of death due to mechanical ventilation is high in patients, but protective lung ventilation is mandatory in these patients. Blood coagulation disorders have also been reported in 50% of patients with severe manifestations of Covid-19 [36].

Limited information indicates a high incidence of deep vein thrombosis and pulmonary embolism in 40% of Covid-19 patients despite the use of standard low-molecular-weight heparin. Anemia is common in the intensive care unit (ICU) and increases morbidity and mortality, the etiology of which is related to many factors, but anemia due to inflammatory causes is the most important cause and just like iron deficiency anemia, many of these patients at the beginning of hospitalization. They have anemia and most of them get anemia during the long hospital stay. Thus, as the length of hospital stay in the intensive care unit increases, the rate of anemia also increases. Reports of rare cases of pneumonia that were hospitalized and treated in China and Iran from November to December 2019 showed a pattern of radiological involvement in three patients that was completely consistent with COVID-19. Patients died of acute progressive respiratory failure despite respiratory supportive therapy and the use of systemic corticosteroids, and only one patient recovered, unlike the other two [37]. The study of these three cases pointed out the principle that in the case of dealing with infectious patients with unusual symptoms, the occurrence of emerging and re-emerging diseases should be considered (Figure 5).

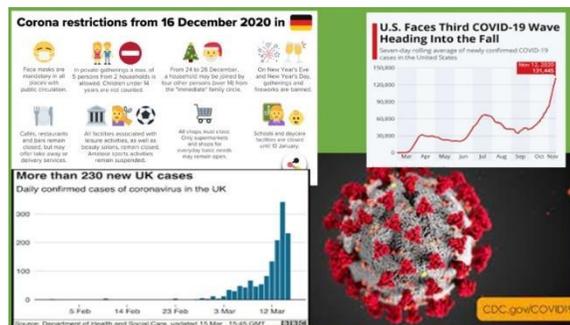


Figure 5. The trend of corona and some restriction conditions in all of the world

Previous studies have shown that none of the children with Covid-19 had a history of underlying disease or taking specific medications. The severity of the disease was mild in all children. None of the patients required mechanical ventilation and hospitalization in the intensive care unit. No deaths were reported. Regarding the emergence of viral infectious diseases and the uncertainty of the role of people with different age groups in the transmission cycle, in order to better understand the disease, the patient's clinical manifestations should be considered and clinical manifestations are defined after gathering more information about cases. Therefore, broader studies on clinical and laboratory findings in understanding the disease and its impact on society seem necessary [38-40]. In view of the above, in this article, by examining the need of patients with coronary artery for supportive therapies, an attempt has been made to examine the importance of each of these therapies in order to provide useful solutions for targeted recovery for patients with coronary heart disease. Considering that a study comparing the need for supportive therapies in patients with Covid-19 had not been performed in Iran, we decided to take a step towards better understanding of this unknown disease by conducting this research. Or have mild symptoms such as headache, body aches, and fever that go away, but a limited number of patients, about 15 to 20 percent, may have lung problems. It is not at all predictable which people will have lung disease and which will not. However, early in the outbreak of the new corona virus, epidemiological studies identified a number of factors and emphasized that some people are more likely to have lung disease; For example, people with chronic lung disease, asthma, diabetes, autoimmune and underlying diseases, and obesity may be more likely to have lung disease [41].

A few months after the outbreak of Covid-19 disease, it became clear that one could not be content with the fact that some groups are more vulnerable and that anyone could have a severe illness, especially in the second wave of the disease. They do not have any risk factors. They may have lung involvement, and even the lung involvement is so severe that it causes the patient to die, so it is not at all predictable who will remain asymptomatic and who will have lung involvement in Covid-19 disease. On the other hand, we cannot define a specific age group for this disease, although it has been observed that the prevalence of the disease is lower in the age group of children, although this does not mean that the disease was not seen in this age group, but it was lower than other ages. In the early days of coronary heart disease, most people were involved, as well as people with underlying diseases, but over time, these people became aware of the danger of coronary heart disease and took more care of themselves at home, so in the second peak, we saw middle-aged people. And young people became more involved, among young men, men became more involved due to less adherence to health protocols, and even athletes, despite having a healthy body, became involved due to non-compliance with health protocols and not taking the disease seriously. Covid-19 is a disease that is not joked with anyone, and even someone who is young, healthy and athletic can get it without following health protocols, and may even get a severe form of the disease [42].

So far, it has been shown that people who do not wear masks at all have a more severe and worse form of the disease, because more viruses enter the body, so all our focus should be on preventing and preventing the disease in people. The whole world now agrees that the main factor that causes the transfer to the ICU and the death of Covid-19 patients is late referral. Especially when the patient has been ill for a long time, stays at home for 2 to 3 weeks, has shortness of breath, fever and general malaise and low blood oxygen, but has not sought treatment or outpatient and has not received proper treatment, and finally when he came, he was in a very bad condition.

Most people who are transferred to the ICU are those who present in the final stages of the disease, which are the inflammatory phases and a few weeks after the onset of the disease. In fact, they arrive at the hospital late and therefore do not receive a proper response from the initial treatment. It should be noted that Covid-19 disease has a total of 4 phases; Viral phase, viral-inflammatory phase, inflammatory phase and failure phase of other organs. It is very difficult to treat the disease in the final stages and the phase in which the disease damages other organs of the body, while we want to diagnose and treat in the same viral and finally viral-inflammatory phase, and after these stages the treatment becomes very difficult. Most of the people who are drawn to the ICU are those who come late and are hospitalized with low oxygen, in fact, these people have lost the golden time to get anti-viruses, and unfortunately, deaths in this category. The situation is completely different for patients who are admitted, and depending on the condition of each patient, we have to decide what treatment to use for him, but the basic treatment is antiviral, anticoagulant and anti-inflammatory treatment, which is given to patients by injection [43]. Patients are prioritized and patients with low blood oxygen are admitted to the ICU and oxygenated non-invasively and with a mask are provided to the patient through respiratory support devices, or for patients with very low oxygen levels. This oxygenation takes place through the respiratory tract [44].

All our efforts are to ensure that the patient does not go to the ICU and receive appropriate treatment in the ward so that blood oxygen does not drop and there is no need to transfer to the ICU. If the patient goes to the ICU, it means

that he has already taken the treatments but they have not been effective, so most of our focus is on delivering oxygen to the patient along with medication.

How likely are patients admitted to the ICU to recover?

There have been many patients who have recovered after being admitted to the ICU and have been discharged from the ICU after about 20 days, but we must keep in mind that the ICU is the final ward and the maximum service is provided. But the fate of patients in the ICU, especially in Covid-19, depends on the severity of the disease. Therefore, the focus is still on patients to be referred as soon as they see respiratory symptoms so that they can be treated sooner and their work is not transferred to the ICU. It is perfectly normal for symptoms to continue after the patient recovers. This occurs in most respiratory patients admitted to the hospital, but is more common in Covid-19 patients and may persist for up to 3 months after the onset of chills, body aches, coughs, and shortness of breath.

In the severe form of the disease, they may need oxygen for months, and medications for dilation of the cough and shortness of breath are prescribed, as well as medications and supplements that increase the body's energy to strengthen muscle weakness. But the important issue is respiratory rehabilitation and physiotherapy of the limbs. After recovery, the patient should be active, not doing strenuous exercise, but doing activities such as walking and not being constantly in bed after recovery.

Because in this case the blood clots in the limbs, the respiratory capacity decreases and parts of the lungs overlap and the oxygen in the blood decreases, so the recovered patient should gradually resume his activities and respiratory physiotherapy and be an organ. In addition, use inhalers and cough medicines if needed, in which case even a patient who has been under the ventilator in the ICU for a month, his respiratory muscles will be strengthened, the need for oxygen will be reduced and he can get rid of oxygen. The important thing about these patients is that their underlying disease must be controlled.

This means that blood pressure, heart failure, diabetes and asthma, and bronchitis and allergies must be controlled, which, if controlled, greatly reduces the risk of developing a severe form of the disease. During this period, due to increased consumption of alcohol and detergents for disinfection, people became allergic or their asthma and allergies recurred. These people should avoid alkaline or acidic detergents as much as possible or dilute these detergents, if they use these materials, be sure to use a mask and outdoors with proper ventilation.

It is better not to use too much alcohol and to disinfect the hands with water and washing liquid, and also to use strong detergents such as Vitex, which is very harmful to the lungs, as much as possible, because excessive use of detergents during this period has a bad effect on people's lungs [43].

Are there any ways to help with lung health and prevent lung disease?

People who smoke and smoke are several times more likely to develop lung infections; From tuberculosis to the flu and colds, and all kinds of bacterial and viral lung infections in smokers are many times more common than others, because tobacco disrupts the immune system inside the lungs and the shape of the lining cells inside the lungs in the ducts. Therefore, smokers are very vulnerable to lung infections, so to maintain lung health and prevent lung infections, it is best to avoid smoking. It is also a good idea to include antioxidants in your diet, such as vitamin C, which helps prevent severe lung disease, and vitamin D, which boosts the immune system. Exercise can reduce the risk of coronary heart disease and lung involvement.

But it has several other effects, including preventing smoking and strengthening the respiratory muscles such as the diaphragm and intercostal muscles, as well as the respiratory sub-muscles in the neck and upper chest, so it improves sooner if you have a lung problem [44].

These breathing exercises, which recommend holding your breath for ten seconds, have no effect; It is of no use in identifying or preventing Covid, even to strengthen the lungs, but for patients who have developed and recovered from Covid and now have shortness of breath, cough, and respiratory distress. We have special breathing exercises called lung rehabilitation and they are given the type of breathing and breathing exercises that have a therapeutic aspect.

Obesity and coronary examination

Obesity is usually measured by the "body mass index". Body mass index is calculated by dividing weight (kg) by height squared (m). According to the US Centers for Disease Control and Prevention, 48% of people with Covid-19 disease are in the obese group (with a body mass index of 30 or higher). The center's information base lists severe obesity (body mass index 40 and above) as one of the special medical conditions and emphasizes the need to pay attention to very obese people as a higher risk group for Covid-19 disease. Findings from a study in France also

showed that people with a body mass index of 35 or higher were at higher risk for severe cases of Covid-19 disease (requiring hospitalization in special wards).

However, data on Covid-19 disease in China showed that high body mass index alone was not associated with the disease or having one of the dangerous complications of Covid-19 disease [45].

However, due to the urgency of conducting studies, it should be noted that the impact of contextual variables (such as race, type of care, socioeconomic status or history of underlying diseases) in the evidence have not been carefully studied and controlled. On the other hand, severe obesity exacerbates acute respiratory syndrome, which is one of the main complications of coronary heart disease.

And in addition to creating vital problems for the patient, it undermines the effectiveness of the treatment team in providing respiratory support to these patients. Obesity is also a cause of other chronic diseases and may place people in sensitive groups and increase the chances of developing and exacerbating Covid-19 disease.

Also, chronic inflammation of body tissues, which is commonly found in overweight people, can weaken the immune system and disrupt and prolong the healing process. The results of a study showed that people under the age of 60 and with a body mass index of 30 and above, more than others need to be hospitalized and receive intensive respiratory care.

Because obesity is the cause of many diseases, it increases the risk of hospitalization of a person with the disease. Therefore, it is recommended that obese people be considered at risk and take more care of their health. It is also recommended to maintain an ideal weight, especially during home quarantine and exercise at home to avoid overweight. Chronic underlying breathing and, ultimately, chronic renal failure made coronary heart disease more difficult. Mortality rates in the intensive care unit varied depending on the underlying disease. If necessary, according to the physician's discretion and the patient's specific condition, special supportive therapies were used.

Conclusion

Maintaining the integrity of the skin in humans and animals is critical to protecting against water loss, bleeding, and the entry of microorganisms; To this end, wound healing in humans and evolved animals is accomplished through a highly sophisticated and advanced mechanism. First, the incision made at the wound site closes quickly; The epithelium regenerates at the wound surface and the new matrix quickly replaces the lost skin. Obviously, the speed of wound healing depends on many factors, including the size of the wound, the local blood supply, the presence of foreign bodies and microorganisms, age, health status, and nutritional status of the patient. The care of chronic and acute wounds has changed significantly in recent years. Nowadays, there are traditional medicines (such as honey and other herbal ingredients) and new methods that can be used to accelerate the healing of skin wounds. In the current situation all over the world, the focus is on prevention and vaccination, and we, like the rest of the world, are waiting for the vaccine. Because treatment in Covid-19 is expensive and difficult, and while the pain and suffering of the disease is high, it affects the whole family and its side effects remain for a long time after recovery. Therefore, focusing on prevention by following health protocols such as using a mask, washing hands and maintaining social distance is a higher priority than treatment. Our goal is to reduce the number of patients because, despite all the research, there is still no definitive cure for the severe form of the disease, and it is better for people to pay special attention to prevention.

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