

Adverse Effects of COVID-19

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Commentary

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Description

The contribution of platelets to increase lung inflammation and thrombus in patients with COVID-19 can cause heart attack, stroke and other respiratory syndromes. In addition to the increasing infection in the lungs, inflammation in the lungs that occurs in coronavirus disease, thrombosis, and hyper coagulation contributes to the life-threatening disease. Platelets are chiefly implicated in thrombosis. Moreover, they can interact with viruses and are an important source of inflammatory mediators. While a lower platelet count is associated with severity and mortality, little is known about platelet function during COVID-19 [1]. All hemoglobin, RBC, hematocrit, WBC and, platelet count, may possibly affect whole blood viscosity. In contrast, none of the participants could affect plasma viscosity. All the blood cell components, but not the plasma proteins could affect whole blood viscosity. To reduce the whole blood viscosity a regular dose of hydroxychloroquine with Doxycycline can be given to increase the flow of blood in blood vessels by building the blood slighter viscosity than earlier and to reduce inflammation and infection of virus in the respiratory system. The blood flow of patients with greater viscosity can be reduced by reducing the viscosity of plasma. Hydroxychloroquine, an anti-malarial drug, can cause glucose-lowering as well as its works on lowering the blood viscosity, whereas doxycycline is used to treat respiratory infections and inflammation of the lungs. In this study, efforts have been made to explore some results for the behavior of blood flow in blood vessels and the significance of hydroxychloroquine with doxycycline for COVID-19 patients. The numerical results have been

shown to convey the results for the blood flow, pressure, and viscosity. The findings of this research work may possibly assist in the treatment and diagnosis of inflammation, lung infection, cardiovascular disorders as well as COVID-19 [2] patient. The explosions of the respiratory syndrome coronavirus and the subsequent global spread of coronavirus disease (COVID-19), extraordinary tasks have been imposed on the health systems of the whole world. This reaction has shown a chief disturbance to the medical management across the world, including Asia Europe and the United Kingdom. The level of this trouble has not been fully computed. In the United Kingdom, Scotland the first positive case was announced on 1 March 2020. The very next day, the number of confirmed cases started increasing and rushed to 210. Then, there was one announced on 11 March.2020 done by World Health Organization (WHO) about COVID-19 that it is a pandemic. To see the effects of COVID-19 [3] on the patients and to evaluate whether assemblies were influenced inversely, several investigations and analyses by patient geography, clinical specialties, and demographics have been done. Many Scientists and mathematicians have done several investigations to prevent coronavirus diseases. Mathematical models have been developed to investigate the effects of virus that causes COVID-19 [4] on blood flow. Blood is developed by the white blood cells, red blood cells, platelets and suspended in liquid called plasma. The quantity of red blood cells demonstrated the measures of hematocrit. Several people those who suffered with COVID-19 can also develop a risk of blood clotting or bacterial infection as a complication.

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