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A Brief Overview on Coronavirus Disease Outbreak

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Description

Coronavirus disease 2019 (COVID-19) is the third reported spillover of an animal coronavirus to humans since the early twenty-first century. Coronaviruses are significant diseases in both humans and animals. The 2019 novel coronavirus (2019-nCoV) spreads quickly, causing an epidemic in China and a rising number of cases in other nations throughout the world. A wide spectrum of inhibitors have recently been released for the treatment of COVID-19, and potential vaccines are in the last stages of research.

The 2019 coronavirus disease outbreak (COVID-19) is the third recorded spillover of an animal coronavirus to humans since the early twenty-first century. Coronaviruses were thought to be somewhat harmful to humans before to the 2002-2003 outbreak of SARS-CoV (Severe Acute Respiratory Syndrome Coronavirus) infection in Guangdong province, China. MERS-CoV (Middle East respiratory syndrome coronavirus) is another extremely pathogenic coronavirus that emerged ten years after the SARS-CoV pandemic. In December 2019, a new coronavirus from three pneumonia patients was found and named 2019 novel coronavirus (2019-nCoV). All three patients had some connection to the Wuhan wet animal and seafood wholesale industry in Hubei Province, China. SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) was later given to the virus. SARS-CoV-2 is an encapsulated virus with positive single-stranded RNA that belongs to the Betacoronavirus family and may infect both people and animals. SARS-CoV-2 has a similar biological profile as SARS-CoV and MERS-CoV. SARS-CoV-2 enters host cells by using the same structural protein as SARS-CoV and MERS-CoV.

Patients infected with SARS-CoV-2 often experience lethargy, fever, a dry cough, and dyspnea. Clinical and laboratory assessment, as well as a chest CT scan and real-time RT-PCR (real-time reverse transcription-polymerase chain reaction) assay, can aid in the diagnosis. Because there is no specific vaccination or treatment for SARS-CoV-2, patients should be hospitalised as soon as possible following diagnosis to get adequate health care. However, a wide spectrum of inhibitors have recently been released for the treatment of COVID-19. Furthermore, potential vaccinations are approaching the end of their development cycle. This produced a succinct epidemiological comparison between COVID-19 and other well-known respiratory viral illnesses using multiple sources, including the CDC, WHO, and some publications.

COVID-19's clinical qualities have been proven in a number of patient trials. The most prevalent symptoms include fever, weariness, dry cough, dyspnea, myalgia, and shortness of breath, according to epidemiological, demographic, clinical, laboratory, and radiological data, which comprises a wide variety of clinical presentations. Headache, disorientation, chest pain, expectoration, pharyngalgia, diarrhoea, nausea, and vomiting are less common symptoms that primarily occur in critically sick individuals. The majority of patients displayed more than one symptom. Organ dysfunction, such as ARDS (acute respiratory distress syndrome), acute renal damage, and acute respiratory injury, was observed in some individuals. Among the documented instances, there were underlying problems such as hypertension, diabetes, cardiovascular disease, cancer, chronic liver disease, cerebrovascular illness, chronic renal disease, and HIV infection.