

Why, Now, Just Before the Vaccine Arrives, are Experts Worried?

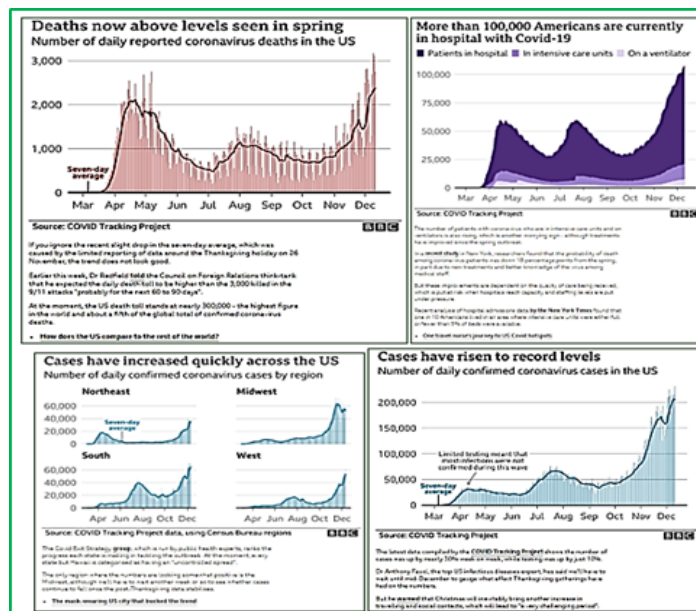
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Deaths are surging across the US

Situation of COVID 19 USA (credit ref. [7]).

Vaccines based on mRNA have been known for years to be the most effective for influenza [1]. The technology allows the use of CRISPR and quick and efficient adaptation to situations of different strains of the virus that bring about the different diseases [2].

This technology is based on vaccines from other companies, including European ones. The scientists and technicians who brought the vaccine to a state of mass production, safe and effective, should be congratulated. All cheers!!

The weak point of these vaccines is the thermal instability. The need for a cryogenic environment for C80 will delay the spread of the vaccine in developing countries in Asia and Africa. This disadvantage will not prevent the production of vaccines in more conservative technologies. Here the advantage is in the thermal

stability of the vaccine.

The coronavirus SARS-CoV-2 is present in the air microbiome [3]. The anxiety it causes is driving the awful disease COVID-19 into mental and health and economic disasters; it is a year, or some say more, that the outbreak paralyzes the world, and over 1 million have perished [4a, ab]. Now the Pfizer mRNA vaccine has been approved for emergency only. But governments use it to protect the population and gear back life to normal in the shadow of its protection. More and more symptoms are revealed as time goes by; the experience is accumulating. Here is the corona pain syndrome [5].

Corona fatigue can be a deadly symptom • No, it does not mean the physical fatigue that virus infection can bring - but the mental state that many countries' citizens are in. Rise in human life.

COVID-19 affects people in many ways. Most patients develop mild to moderate illness and recover without hospitalization. The most common symptoms observed are: Pains, diarrhea, sore throat, conjunctivitis, headache loss of taste or smell, skin rash, or discoloration in fingers or toes. Severe symptoms in sick people are: Difficulty breathing or shortness of breath Chest pain or pressure Loss of speech or movement Seek immediate medical attention if you have severe symptoms. Always call before visiting your doctor or healthcare facility. People with mild to generally healthy symptoms need to manage their symptoms at home. On average, it takes 5-6 days. Scientists are beginning to investigate whether coronary heart disease can cause post-viral problems such as myalgic encephalitis, also known as chronic fatigue syndrome. Common symptoms include fog in the brain, fatigue, pain, immune problems and postpartum constipation.

Anyone who experiences long-term symptoms after being infected with the coronary virus - known as "COVID long-haulers" - is starting to talk about the issues that lasted months, according to CNN.

Tens of thousands of people have joined online support groups on social networks, private chat channels and special interest sites, where they can talk about their symptoms and what to do when

they recover.

Some legislators are also paying attention and have created a bill called “Understanding COVID-19 subgroups and ME / CFS law”. The proposal will shed \$ 60 million in federal funding for research projects that will help scientists understand the coronary virus’s long-term effects. “COVID-19 gives us an unprecedented opportunity to advance our understanding of the post-viral disease,” Ami Mac, director of translational medicine at Stanford University’s Genome Technology Center.

Renal dysfunction allows the use of only a handful of medications to treat pain [5]

The U.S. Centers for Disease Control and Prevention recently added six new COVID-19 symptoms to their official list. Now, in addition to regular dry cough, shortness of breath, and fever, the CDC also lists chills, recurring shaking with chills, headaches, sore throat, loss of door or new taste, and muscle aches in the list of signs of coronavirus infection.

To be clear, many of these symptoms are not entirely new discoveries: in March, ear, nose, and throat experts in the UK warned that the lost sense of smell and taste might be a symptom of COVID-19; And anecdotally, people have also reported chills, headaches and sore throats.

However, the new symptom added to muscle pain maybe a little more surprising than the rest. While body aches and pains can result from almost anything, it turns out that muscle aches associated with the virus are a bit different.

According to Dr. Berzin, muscle pain associated with COVID-19 usually feels like “sensitivity to muscle contact or pain in muscle movements. “While muscle pain from training can feel similar to muscle pain caused by a virus like compium, virus pain tends to be more general, while pain related to exercise or injury tends to be more localized in a specific muscle.

Sometimes even doctors find it difficult to distinguish between muscle pain caused by a virus and muscle pain caused by exercise. “It’s tough to tell the difference,” admits Dr. Berzin, adding that most doctors need to play a detective to get to the root of the problem. Ask if the patient has recently exercised or has other infectious symptoms, such as fever, chills, or cough, to help with the diagnosis.

Viral muscle-related pain and muscle-induced muscle aches also differ in how long they take to resolve. “Viral myopathy [muscle problems] tends to resolve in weeks to months after the infection cleared,” says Dr. Berzin, B.W.

- One safe non-antibody options for the treatment of pain, in renal impairment patients, and dialysis, may include acetaminophen and certain Nonsteroidal Anti-inflammatory Drugs (NSAIDs), such as ibuprofen.

- Fentanyl, hydrocodone, and hydromorphone are the safest opioids for use in kidney and dialysis patients.
- Tramadol in lower doses may also be used safely in kidney and dialysis patients.

Is Muscle Pain a Symptom of Coronavirus?

Sometimes even doctors find it difficult to distinguish between muscle pain caused by a virus and muscle pain caused by exercise [7]. “It’s very difficult to tell the difference,” admits Dr. Berzin, adding that most doctors need to play a detective to get to the root of the problem - ask if the patient has recently exercised or have other infectious symptoms, such as fever, chills or cough, that can help with the diagnosis.

Viral muscle-related pain and muscle-induced muscle aches also differ in how long they take to resolve. “Viral myopathy [muscle problems] tend to resolve in the weeks to months after cleansing the infection,” says Dr. Berzin, noting that muscle aches from exercise tend to go away within 48-72 hours.

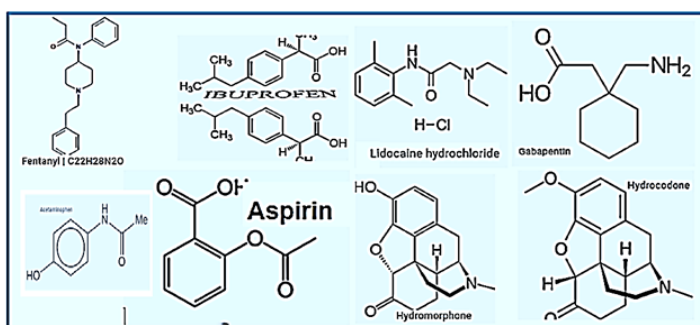
How can COVID-19 muscle pain be treated?

According to Dr. Berzin, “Muscle pain can be relieved from training by plating, rolling, light stretching, massage and light aerobic exercise before beginning your training routine.”

But when it comes to muscle aches that may result from COVID-19 or another viral infection, the treatment looks a little different. Dr. Charles Odoncor an MD from the Yale’s medical doctor and pain specialist, recommends bed rest, fluid deterioration and general symptom management with painkillers like acetaminophen or NSAIDs (nonsteroidal anti-inflammatory drugs) like aspirin and ibuprofen. Dr. Odoncour points out, however, that if you do not feel relief from the above recommendations, you should seek medical attention.

The information in this story is accurate as of press time. However, as the situation around COVID-19 continues to evolve, some data may have changed since publication. While Health tries to keep our stories as up-to-date as possible, we also encourage readers to keep up to date with news and recommendations to their communities by

- Renal dysfunction allows the use of only a handful of medications to treat pain [8]
- A safe non-antibody options for the treatment of pain in renal impairment patients and dialysis include acetaminophen and certain Nonsteroidal Anti-inflammatory Drugs (NSAIDs), such as ibuprofen. ntanyl, hydrocodone, and hydromorphone are the safest opioids for use in kidney and dialysis patients.
- Tramadol in lower doses may also be used safely in kidney and dialysis patients.
- A low-dose gabapentin, and lidocaine can be safely used as adjunctive therapy in patients with renal impairment and dialysis; TCAs can be used at lower doses in patients with kidney disease.



Pain reliever-agents that are used in renal disiaes.

The expected new COVID 10 vaccine is to be 1) nontoxic 2) kill the virus 3) be compatible with all the drugs people, in particular the elderly, use ad remedy for other diseases, common everywhere in the world. This is a heavy burthen. We just have to hope that at least one of thaw 180 institutes around the world will find the right vaccine.

We must ‘stay’ until the vaccine arrives

In recent weeks there has been a lot of positive news on the vaccine front, yet their speed is slow to stop the current wave of infections.

In a conversation with the Chatham House last week, Dr. Pausey said the Americans must “stay” until the vaccines arrive. “The cavalry are coming but don’t put down your weapons yet,” he added.

He said people should “double” key public health measures such as social distancing, wearing face masks and hand washing, but he also called for “a much more uniform approach from all countries” [9].

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