

## **New Considerations and Developments have Occurred in COVID-19 Infections which must now be Addressed**

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Quotation: "The evolution of the current Coronavirus COVID-19 Viral Pandemic has developed very rapidly during the past year".

Masson had cited in an article in "Becker's Hospital Review" that 59% of the cases of COVID-19 had arisen from asymptomatic spreaders [1]. This finding is quite alarming because it represents an increase of nearly 20% (40% infections spread by asymptomatic spreaders) in the percentage of infection spread by asymptomatic cited in earlier reports back in late 2020 [2-4]. Ollar noted the need for universal testing of all members of a

population in order to effectively control increases in the number of cases of COVID-19 Infection [4].

A new development has now occurred with the appearance of mutant strains of COVID-19 which have come from the UK, South Africa and elsewhere in the world [5]. Authorities in the UK had stated that this new strain is 70% more infectious [5].

The appearance of these new mutant strains have now added some new variables as to the factors of protection and duration of protection that the new vaccines against COVID-19 will provide patients in light of the appearance of these variant strains [6].

The appearance of these new variants of COVID-19, necessitates the need to not only detect the presence of viral carriage in a patient but, also the need to perform genomic sequencing of the viral isolate itself [7]. Genomic Sequencing will provide information as relates to epidemiological concerns, and also the need for monitoring the efficacy of a COVID-19 Vaccine preparation [7].

During the course of the last few months the media has been filled with information about COVID-19 Vaccine preparations being developed and submitted to patient trials and emergency approvals by health agencies in many countries all over the globe [8].

An area that has been sadly overlooked has been the development and application of effective monoclonal antibody therapy. This therapy that has been seen to be most effective for those patients who have tested positive for COVID-19 and manifest "mild to moderate symptoms [9]. At the present time, the Food and Drug Administration (FDA) has sanctioned the emergency use of the monoclonal antibodies casirivimab and imdevimab given as an ensemble. The monoclonal antibody Bamlanivimab, is still under investigation [9]. The FDA has specifically authorized the use of these monoclonal antibodies manufactured by Eli Lilly and Regeneron in non-hospitalized patients.

These monoclonals have been developed to target the "spike protein" of the COVID-19 [9]. Thus, the action of these monoclonals is to facilitate a blocking of entry of the virus into human cells [9].

The net result of early clinical trials of monoclonal therapy is to bring about a reduction in Coronavirus COVID-19 related hospitalization/emergency room visits especially vis a vis high risk patients who would otherwise be at a greater risk of this disease progressing to a more serious and deadly scenario [10].

The evolution of the current Coronavirus COVID-19 Viral Pandemic has developed very rapidly during the past year. With these new developments come new considerations which must be addressed!!

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