Research Article

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Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients

Ahsan Siddiqui, M.D, M.S.P.H (UK)*

Department of Quality Management & Patient Safety, General Directorate of Health, Saudi Arabia

***Corresponding author:** Ahsan Ali Siddiqui, Consultant Preventive Medicine and Epidemiologist, Department of Quality Management & Patient Safety, General Directorate of Health, Riyadh Saudi Arabia

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ABSTRACT

Background and Objective: The Aim of the article is to explore and present the COVID-19 successful prevention and treatment in current Pandemic. Also, to compare the previous treatment and prevention 0f other medical and surgical diseases with the failure in current COVID-19 management, Vaccine, and treatment availability.

Methods: The Author of this Article has done Literature Review, Comparison and Critical analysis of more than 25 Published Articles and other reviews. Author has chosen the Comparative Literature review as methodology for this research article. The purpose is to show that Randomly chosen articles are in favor of "Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients". SPSS 19 software is used to show Diagrammatic presentation for the results and analysis. Initial part of the Article discusses and referenced the epidemiology and prevention of COVID-19 Pandemic. In the last part of the article the author discusses the other Medical/ surgical diseases and treatment and preventions.

Results: Author of this Article has used SPSS 19 Software to present the results. First SPSS Diagram shows that All selected 15 Articles favors "Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients". The Second SPSS Diagram shows that 15 Articles agreed 100% for "Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients".

Conclusion: Although the Incidence, Distribution, Illness, and mortality due to COVID-19 Pandemic is reducing day by day as compare to peak in March 2020 in the EU, the UK and the USA. But the Head of CDC USA warn the WHO and US Government that COVID-19 Pandemic has the tendency to become deadly as same as Spanish flu Pandemic in 1918 where approximately 60 to 100 million people died. The governments of the 200 affected countries due to COVID-19 should understand the seriousness of the warnings and do the recommended preventions such as wearing Masks, washing hands with soap or sanitize it with Alcohol, social distancing and staying home as much as possible. In case of fever and shortness of breath take oxygen therapy, and paracetamol and ask the doctor for Antiviral, Plasma therapy and dexamethasone others as soon as possible.

Introduction

From the research objectives for SARS-CoV Carlyn Harris, et al. [1] and MERS-CoV ten themes in the literature were identified Clinical characterization prognosis diagnosis, clinical management, viral pathogenesis, epidemiological characterization, infection prevention and control/transmission, susceptibility, psychosocial, and etiology. For COVID19, some information on clinical presentation, diagnostic testing, and etiology is available but many clinical

research gaps have yet to be filled. Based on a systematic review of other severe coronaviruses we summarize the state of clinical research for COVID-19 highlight the research gaps and provide recommendations for the implementation of standardized protocols. Data based on Carlyn Harris, et al. [1] internationally standardized protocols will inform clinical practice real-time. Latest Inventions in Science and Ahsan Ali Siddiqui, [2] Medical Technology are Blessing for all the Living being on this Planet Earth. From Human beings to Animals all are getting benefits to enjoy better health in twenty first century by modern treatment and surgical procedures for humans and Animals. The Human Doctor and Veterinary Doctor are getting modern medicines and technology to save the lives of their patients.

Latest Medical Inventions for example Nuclear Medicine/ Nuclear scan, CT Scan, MRI Scan, Laparoscope Machine, Imaging Machine, Ultrasound, X Rays, ICU Facility with Ventilators, Endoscopy Instruments, Others are helping the Doctors and Patients to provide and receive latest Treatment for the ill and sick. Although the Advancement in Medical Technology and Sciences still a lot of Research and hard work needed as still scientists Ahsan Ali Siddiqui, [2] could not find the appropriate and proven treatment and Vaccine of COVID-19. (Table 1) A total of 34 retrospective studies involving a total of 4121 patients with COVID-19 were included. The results of the meta-analysis showed that most patients presented bilateral lung involvement (73.8%, 95% confidence interval [CI]: 65.9%-81.1%) or multi lobar involvement (67.3%, 95% CI: 54.8%-78.7%) and just little patients showed normal CT findings (8.4%). Jieyun Zhu, et al. [3] As we all know that current Ahsan Ali Siddiqui, [4] Pandemic of COVID-19 novel corona virus is deadly and without vaccine and proven Treatment. More than quarter million people recently has died and more than four million people suffering from COVID-19 all over the world till May 2020. World health organization has issued the warning in December 2019 for the Novel corona virus in Wuhan China. Governments of the countries including most developed countries such as the USA, the UK and EU Countries act slowly with ignoring the facts about COVID-19 severity. The lesson learned from the Pandemic COVID-19 is that our health systems and health agencies do not have abilities to save their Ahsan Ali Siddiqui, [4] citizens and they have to work hard to improve their abilities to save their citizens. (Table 2) Jieyun Zhu, et al. [3].

Table 1: Basic characteristics of included studies.

Study	Publication Date	Region (China)	Sample Size (n)	Study Population	Age, $\frac{a}{y}$	Male (n)	Outcomes	Quality Score
Guan et al. 9	Feb 28	31 Provinces	1099	COVID-19 patients in 552 hospitals in 31 province/province-level municipalities	47.0	640	①②③	6
Cheng et al. 10	Mar 12	Hubei	463	COVID-19 patients in wuhan Jinyintan Hospital	15-90	244	①②③④	6
Gong et al. 11	Mar 9	Chongqing	225	COVID-19 patients in Chongqing University Three Gorges Hospital	46.35 ±16.1	125	①②③	6
Yuan et al. 12	Mar 6	Chongqing	223	COVID-19 patients in Chongqing Public Health Medical Center	46.5 ±16.1	105	①③	6
Zhou et al. 13	Mar 9	Wuhan	191	COVID-19 patients in Jinyintan Hospital and Wuhan Pulmonary Hospital	18-87	119	①②③	7
Yang et al. 14	Feb 26	Wenzhou	149	COVID-19 patients in three tertiary hospitals of Wenzhou	45.1 ±13.4	81	①②③④	7
Wu et al. 15	Mar 3	Provinces	130	COVID-19 patients in seven hospitals of China	25-80	78	①②③④	7
Bernheim et al. 16	Feb 20	4 Provinces	121	COVID-19 patients in four centers in China	45(18-80)	61	①③④	8
Zhao et al. 17	Feb 19	Hubei	101	COVID-19 patients in four cities in Hunan, China	17-75	56	①②③④	6
Chen et al. 18	Feb 15	Wuhan	99	COVID-19 patients in Wuhan Jinyintan Hospital	55.5 ±	67	①③	6
Xu et al. 19	Feb 28	Guangzhou	90	COVID-19 patients in Guangzhou Eighth People's Hospital	18-86	39	①③④	6
Li et al. 20	Feb 29	Chongqing/Jinan	83	COVID-19 patients in Chongqing/Jinan provinces	45.5	44	①②③④	8
Shi et al. 21	Feb 24	Wuhan	81	COVID-19 patients in Wuhan Jinyintan hospital or Union Hospital of Tongi Medical College	49.5	42	①②③④	7
Wu et al. 22	Feb 21	Chongqing	80	COVID-19 patients in Chongqing province	44 ± 11	42	①②③④	7

Wu et al. 23	Feb 29	Jiangsu	80	COVID-19 patients in the First- and Second-People's Hospital of Yancheng City, the Fifth People's Hospital of Wuxi	46.1	39	①	8
Fang et al. 24	Feb 25	Anhui	79	COVID-19 patients in Infection Hospital of Anhui Provincial Hospital	45.1 ±16.1	45	①	5
Chen et al. 25	Mar 10	Wuhan	76	COVID-19 patients in Wuhan Puren Hospital	28-86	40	①③④	6
Ma et al. 26	Mar 10	Anhui	75	COVID-19 patients in 4 hospitals in Fuyang city, Anhui province	43.9 ±15.1	46	①③④	7
Pan et al. 27	Feb 6	Wuhan	63	COVID-19 patients in Tongji hospital	44.9 ±15.2	33	①②③	6
Zhou et al. 28	Feb 19	Wuhan	62	COVID-19 patients in Tongji hospital	52.8 ±12.2	39	①②③④	6
Wang et al. 29	Feb 25	Zhejiang	52	COVID-19 patients in the First Affiliated Hospital, Zhejiang University School of Medicine	13-73	29	①②③④	6
Xu et al. 30	Feb 25	Beijing/ Hebei	50	COVID-19 patients in 4 hospitals in Beijing/Hebei provinces	43.9 ±	29	①③④	6

Note: ① Lesion Distribution; ② Lesion Shapes; ③ Lesion Density; ④ Accompanying Signs

Abbreviations: COVID-19: Coronavirus Disease 2019; SD: Standard Deviation

Table 2: Meta-analysis of different CT imaging features in COVID-19 patients.

Outcomes		No. Studies	No. Patients	Heterogeneity		Model	Meta-Analysis	
			P	I^2		*R* (95% CI)	*P*	
Lesion Distribution	Single Lung Lesions	22	1977	<001	81.6%	Random	.187 (0.147, 0.231)	<001
	Bilateral Lung Lesions	28	2628	<001	94.9%	Random	.738 (0.659, 0.811)	<001
	Multilobar Lesions	10	846	<001	92.7%	Random	.673 (0.548, 0.787)	<001
	Single Lobe Lesions	9	629	<001	79.6%	Random	.149 (0.092, 0.217)	<001
	Normal CT Manifestation	13	2195	<001	93.3%	Random	.084 (0.042, 0.139)	<001
Lesion Shapes	Nodular	8	739	<001	96.3%	Random	.205 (0.068, 0.391)	<001
	Patchy	8	2009	<001	94.1%	Random	.403 (0.298, 0.514)	<001
	Cord-Like	6	267	<001	87.3%	Random	.368 (0.217, 0.534)	<001
	Spider Web-Sign	11	806	<001	92.9%	Random	.395 (0.272, 0.526)	<001
Lesion Density	Ground-Glass Opacities	26	3574	<001	97.7%	Random	.681 (0.569, 0.782)	<001
	Consolidation	14	1637	<001	95.4%	Random	.320 (0.215, 0.434)	<001
	Air Bronchogram Sign	15	1075	<001	93.9%	Random	.447 (0.329, 0.568)	<001
	Crazy-Paving Pattern	4	264	<001	95.8%	Random	.356 (0.113, 0.648)	<001
Accompanying Sign	Pleural Effusion	17	1627	024	44.8%	Random	.053 (0.037, 0.073)	<001
	Pleural Thickening	9	1077	<001	95.6%	Random	.271 (0.156, 0.405)	<001
	Lymphadenopathy	8	622	<001	82.0%	Random	.054 (0.022, 0.098)	<001

Abbreviations: CI: Confidence Interval; COVID-19: Coronavirus Disease 2019; CT: Computed Tomography

Due to the Advancement in Medical Ahsan Ali Siddiqui, [5] Sciences and Medical Treatment, Inventions people are living longer and healthier than ever before. Nuclear Radiotherapy, Nuclear radiology, MRI Scan, CT Scan, X Rays, Ultrasound, Angioplasty and Angiography others made the diagnosing and treatment easier for the patients. Current COVID-19 Pandemic, MERS, SARS, EBOLA and other epidemics teaches us the lesson than as the world population grows, we need more research and technology to handle Pandemic such as COVID-19. More resources and advance technology are needed Ahsan Ali Siddiqui, [5,6] to battle diseases and training for medical staff is needed (Figure 1). Global Health and other organizations Ahsan Ali Siddiqui, [7] such as WHO, UNHCR, UN, UNESCO, UNICEF did not act fast to Prevent and Control the COVID-19 Pandemic. Other Governments of the countries in the world act very slowly for the warnings given by WHO and other scientists. Later since November 2019 till now approximately 350,000 people have lost their lives due to COVID-19 and approximately 5 Million people are infected by this COVID-19 disease. Lessons should learn from COVID-19 Pandemic and it is not over yet as scientists predicts that COVID-19 is with us for next couple of years.

The vaccine of COVID-19 is under development and there is not exact Ahsan Ali Siddiqui, [7] treatment for COVID-19 by medical sciences till now (Figure 2). Approximately 10 Million Ahsan Ali Sid-

diqui, [8] People are Infected with COVID-19 Corona virus and More than Half Million are Dead with current COVID-19 Pandemic till July 2020. Scientists are trying to manufacture COVID-19 Vaccine and Treatment as soon as possible to help the Mankind. In the current 21st century still people are dying with diseases without the treatment available as still we lack knowledge and research facilities to tackle the diseases. International health organizations for example WHO, UNICEF and UN should invest more on Medical research and pharmaceuticals to find the upcoming Epidemics or Pandemics and prepare their available Vaccines and Treatment. Without taking serious steps and proper design and management the Task for Medical research Ahsan Ali Siddiqui, [8,9] for disease Preventions could not be completed (Figure 3). Current Pandemic of COVID-19 novel corona virus Ahsan Ali Siddiqui, [10] has taught us a lesson that Global Health Agencies and Governments of the countries are not prepare for such Pandemic. The Governments has acted slowly or irresponsibly for the fight against COVID-19 Pandemic.

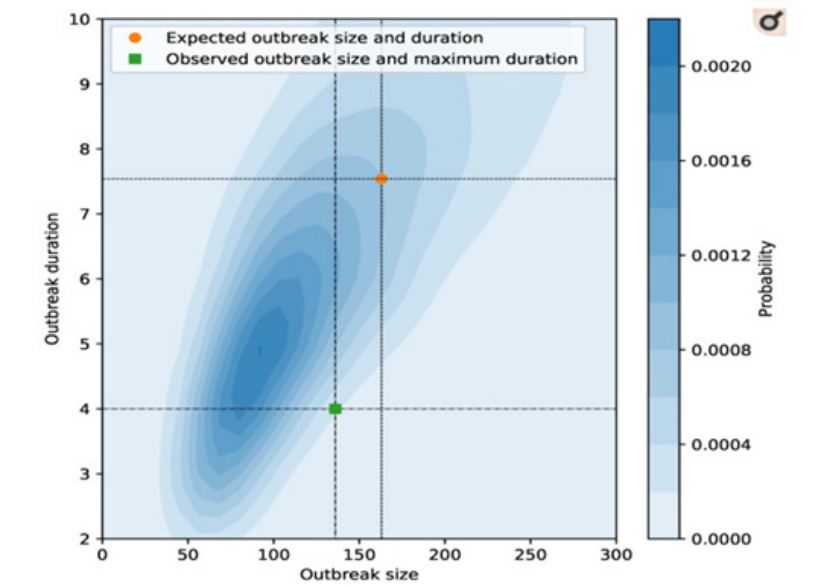

Figure 1: Simulated outbreak size and duration by assuming no control measures. Each simulation was started with 43 infections and based on reproductive number R=0.74 and dispersion parameter k=0.14, which were estimated from the data collected by 1 February 2020. The density and mean of duration and outbreak size were estimated based on 5000 Monte Carlo simulations. Yunjun Zhang, et al. [6].

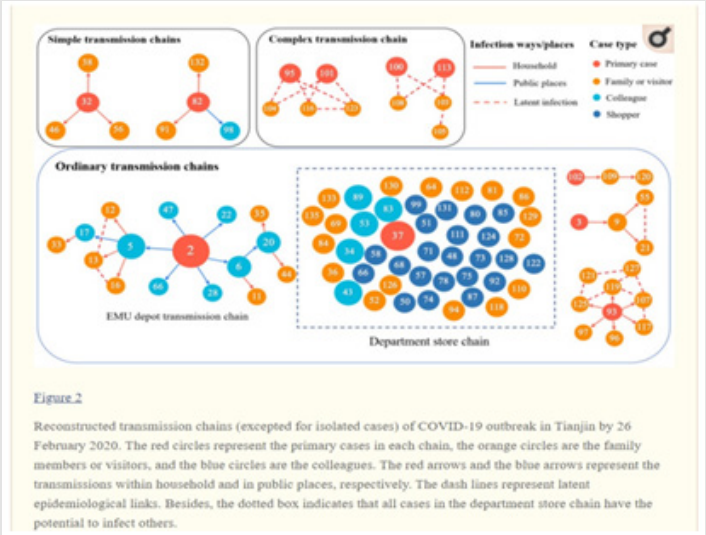

Figure 2: Yunjun Zhang, et al. [6].

Due to slow action to implement Preventive actions against COVID-19 approximately 300,000 people have lost their lives and more than four million people are Infected across the world. Better preparations are needed in the future to fight Ahsan Ali Siddiqui, [10] against such a cruel Pandemic disease (Figure 4). According to the study while there is no vaccine Ahsan Ali Siddiqui, [11] current-

ly available for COVID-19 patients the treatment with Convalescent Plasma with other western medicines saves lives of hundreds of thousands of patients in COVID-19 Pandemic. There is need of more advance research and action to find out the Treatment of COVID-19 Pandemic. Global health including public health preventive medicine has failed the world in this current COVID-19 Pandemic when more than Quarter million people Ahsan Ali Siddiqui, [11] died all around the world and approximately 4.2 Million people suffered from this deadly COVID-19 Pandemic (Figure 5). After seeing the Disaster resulting from COVID-19 Pandemic Ahsan Ali Siddiqui, [12] in last five months all over the world, where almost 370,000 people died and approximately 6 Million people are sick due to COVID-19. There is urgent need of VACCINE of COVID-19 Pandemic and there is news that may be Vaccine could be available in December 2020 or later. The lesson learned is that we in Twenty first century do not have capability to develop immediate Medicines or Vaccines for new disease. Medical Ahsan Ali Siddiqui, [12] Scientists need to study more and Medical Science need more hard work to learn the diseases and their urgent treatment.

Comparison of basic characteristics of COVID-19, SARS, 2009 H1N1 pandemic influenza, and seasonal influenza

	Case-fatality ratio	Infectious period	R_0	Serial interval	If containment is applicable or not
COVID-19	0·98–5·9%[6,7]	Highly infective at initial onset period, infectious before illness onset	2·2–4·7[8,9]	4·6–7·5 days[8,10]	Successful in some countries at early epidemic stage
SARS	10%[11,12]	Highly infectious around 10 days from illness onset	2·2–3·6[13]	8–12 days[13]	Successful worldwide
2009 H1N1 pandemic influenza	0·02–0·4%[14]	Highly infectious from the end of incubation to initial onset	1·3–1·7[15]	2·8 days[16]	Containment not implemented*; has become a seasonal epidemic after the pandemic
Seasonal influenza	0·1%[17]	Highly infectious from the end of incubation to initial onset	1·2–1·4[15]	3 days[18,19]	Containment strategy is not applicable; continuous seasonal epidemics

R_0=basic reproduction number. SARS=severe acute respiratory syndrome.

*Based on the characteristics of the disease, national authorities adjusted the control and prevention strategy to mitigation.

Figure 3: Data show that COVID-19 is more severe an illness than is seasonal influenza and SARS-CoV-2 is more contagious than are seasonal influenza viruses having a basic reproduction number (R 0) nearly twice as high. Zhongjie Li, et al. [9].

Comparison between strategies

	Containment	Suppression	Mitigation
Aim	Stop virus transmission and spread	Decrease or stop community transmission	Lower and delay the epidemic surge to reduce health-care demand
Scenario	Early stage of epidemic in well defined areas	Ongoing community transmission in which containment is not feasible	Extensive community transmission, impossible to suppress
Case detection and management	Active case detection; managed isolation and care; quarantine of close contacts	Case detection; managed isolation and care; testing of close contacts	Detection of severe cases; managed isolation and care; limited contact tracing
Lockdown and intercity travel prohibition	Lockdown of endemic areas; restrict travel from those areas to other low epidemic areas	Few, based on risk	None
Other physical distancing*	Strict stay-at-home orders; school closure; cancellation of mass gatherings	Stay-at-home orders; school closure; cancellation of mass gatherings; adjustable to conditions	Cancellation of mass gatherings; school closure when and where necessary; ask vulnerable population to stay at home
Personal protection	Hand hygiene; respiratory etiquette; face mask use	Hand hygiene; respiratory etiquette; face mask use	Hand hygiene; respiratory etiquette; face mask use
Duration	Short term, followed by maintenance of elimination of transmission	Long term, adjusting suppression measures based on epidemic situation (relax or strengthen periodically)	Long term
Endpoint	Vaccine response to immunise the population to achieve community protection	Vaccine response to protect the vulnerable, stop community transmission, and achieve community protection	Vaccine response to protect the vulnerable, stop endemic transmission, and immunise the population to achieve community protection
Pros	Early, proactive, and strict implementation can be effective, largely preventing infection and death	Early, proactive, and strict implementation can be effective, largely preventing infection and death	Less short-term socioeconomic effect; necessary medical care able to be provided
Cons	Major short-term effect on daily life and social and economic costs; continued moderate socioeconomic effects during elimination period	Major short-term effect on daily life and social and economic costs; premature relaxing of interventions can lead to rebound of the epidemic	Medical system capacity can still be exceeded; substantial risk of high morbidity, mortality, and economic damage

Figure 4: Zhongjie Li, et al. [9]..

Methods

The Author of this Article has done Literature Review, Comparison and Critical analysis of more than 25 Published Articles and other reviews. Author has chosen the Comparative Literature review as methodology for this research article. The purpose is to show that Randomly chosen articles are in favor of "Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients". SPSS 19 software is used to show Diagrammatic presentation for the results and analysis. Initial part of the Article discusses and refer-

enced the epidemiology and prevention of COVID-19 Pandemic. In the last part of the article the author discusses the other Medical/surgical diseases and treatment and preventions (Table 3). Current Pandemic of COVID-19 Ahsan Ali Siddiqui, [13] has taught all the Global Health authorities such as WHO, UN, UNESCO, UNICEF, UNHCR, EU Others and all Governments of 200 countries that we were not ready for COVID-19. Although Developed Countries such as USA, UK, France and countries of EU spends Billions of US Dollars on their Health System but it did not stop the Deaths of COVID-19 Pandemic in their countries and they are actually affected the most in this world.

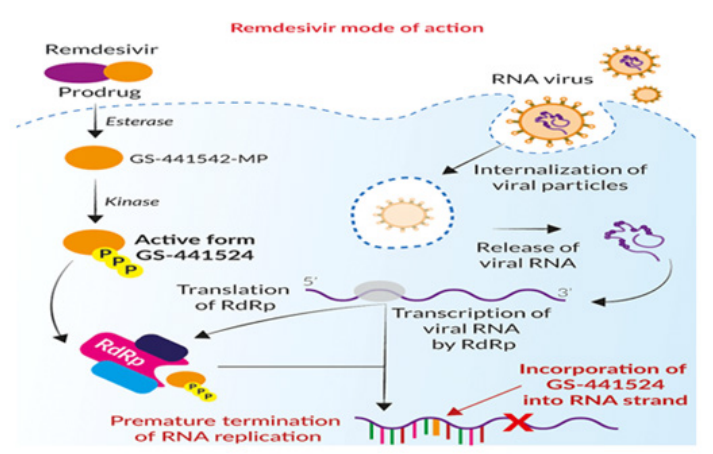

Figure 5: GOOGLE, [14].

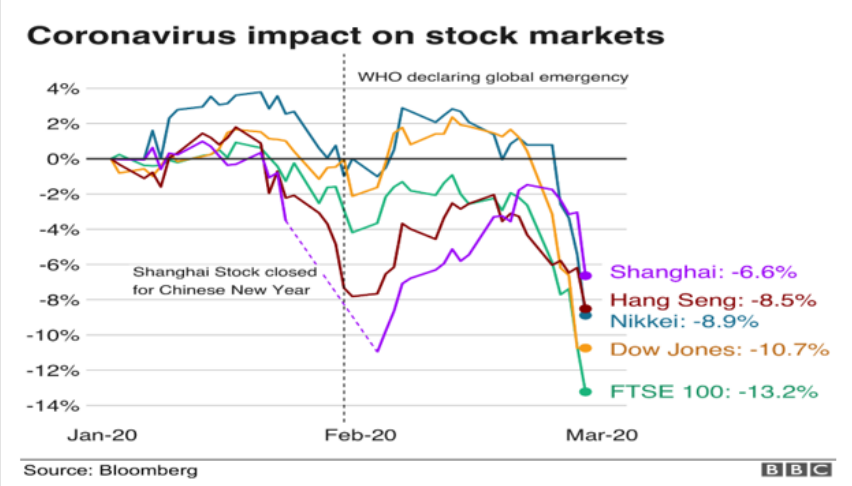

Figure 6: GOOGLE, [15].

Table 3: 15 Selected Articles to show that is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases where Proven treatment is available for ill Patients.

S.NO	Complete Reference of the Articles selected for study	Study favors "is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases where Proven treatment is available for ill Patients" - YES	Study ignores "is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases where Proven treatment is available for ill Patients" - No	Percentages% of Articles agreed "is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases where Proven treatment is available for ill Patients"
1	Yunjun Zhang, Yuying Li, Lu Wang, Mingyuan Li et al. (2020) Evaluating Transmission Heterogeneity and Super-Spreading Event of COVID-19 in a Metropolis of China. Int J Environ Res Public Health. 2020 May; 17(10): 3705. doi: 10.3390/ijerph17103705.	YES	-------	100%

2	Zhongjie Li, Qiulan Chen, Luzhao Feng, Lance R et al. (2020) Active case finding with case management: the key to tackling the COVID-19 pandemic. Lancet. 2020 4-10 July; 396(10243): 63–70. doi: 10.1016/S0140-6736(20)31278-2.	YES	-------	100%
3	Ahsan Ali Siddiqui (2020) The Use of Latest Medical Technology and Taking Benefits from Technology to Treat Various Medical Diseases Including Covid-19 in the Current Pandemic. 2020 - 2(3) OAJBS. ID.000185. DOI: 10.38125/OAJBS.000185.	YES	-------	100%
4	Ahsan Ali Siddiqui. (2020) The Need of Early Detection of Positive COVID-19 Patients in the Community by Viral Tests (e.g. RTPCR Tests) and Antibody Tests (Serological Tests) to Stop the Spread. 2020 - 9(1). AJBSR.MS.ID.001357. DOI: 10.34297/AJBSR.2020.09.001357.	YES	-------	100%
5	Ahsan Ali Siddiqui. (2020) Advancement in Medical Sciences to Treat Medical and Surgical Diseases including Prevention, Treatment and Vaccine Development of COVID-19 in Pandemic. Biomed J Sci & Tech Res 28(4)-2020. BJSTR. MS.ID.004695.	YES	-------	100%
6	Ahsan Ali Siddiqui (2020) COVID-19 Pandemic and Public health Preventions to Reduce the Infection, Incidence and Distribution among the Community. 2020 - 2(2) OAJBS.ID.000178. DOI: 10.38125/OAJBS.000178.	YES	-------	100%
7	Ahsan Ali Siddiqui. (2020) Covid-19 Proposed Treatment and other Medical Diseases Prevention and Treatment as Modern Medical Sciences is Beneficial for All of Us. Biomed J Sci & Tech Res 28(4)-2020. BJSTR. MS.ID.004696.	YES	-------	100%
8	Ahsan Ali Siddiqui. (2020) The Epidemiology of COVID-19 Novel Corona Virus in Incidence and the Distribution of the Disease across the World. 2020 - 9(4). AJBSR. MS.ID.001407. DOI: 10.34297/AJBSR.2020.09.001407.	YES	-------	100%
9	Ahsan Ali Siddiqui. (2020) Role of Convalescent Plasma Therapy in Successful Prevention and Treatment of Covid-19 Novel Corona Virus Critical Patients, In 2020 Global Pandemic. Biomed J Sci & Tech Res 28(2)-2020. BJSTR. MS.ID.004618.	YES	-------	100%
10	Jamali Z, Siddiqui Ahsan, Jamali D, Nazim S, et al. (2018) Correlation of Early and Late Cord Clamping Time with Hematological Variables: An Observation Study Focusing on The Neonatal Outcomes. SOJ Gynecology Obstetric Women's Health 4(1): 1-5. DOI: http://dx.doi.org/10.15226/2381-2915/4/1/00135.	YES	-------	100%

11	Jamali Z, Fatima M, Yaqoob S, Ahsan S, et al. (2018) Neonatal Outcomes in Cord Clamping; An Observational Study Highlighting the Correlation of Cord Clamping Time with Hematological Parameters. SOJ Gynecology Obstetric Women's Health 4(1): 1-5. DOI: http://dx.doi.org/10.15226/2381-2915/4/1/00134.	YES	-------	100%
12	Amna MB, Siddiqui AA, Wajid Z, et al. (2018) Presentations in Patients of Chronic Myeloid Leukemia; an Observational Study Focusing on the Association of Hematological Parameter on Gender. Cancer Sci Res Open Access 5(1): 1-5. DOI: http://dx.doi. org/10.15226/cs-roa.2017.00139.	YES	-------	100%
13	Reena Kumari, Ali Siddiqui A, Zubair T, Fatima S, et al. (2018) Levels of electrolyte in cancer patients a prospective study focusing on the Variations before and after therapy. Palliative Med Care 5(4): 1-4. DOI: http://dx.doi.org/10.15226/2374-8362/5/4/00168.	YES	-------	100%
14	Reena P, Ali J, Ahsan Ali S, Nasir M, et al. (2018) Febrile Neutropenia in Patients Receiving Chemotherapy; an observational study highlighting its association with hematological parameters on gender basis. Cancer Sci Res Open Access 5(1): 1-5. DOI: http://dx.doi.org/10.15226/cs-roa.2017.00140.	YES	-------	100%
15	Amna MB, Ahsan Ali S, Shahzain H, Mir A, et al. (2018) Characteristics of chronic myeloid leukemia: an observational study highlighting the correlation of age with hematological parameters. Cancer Sci Res Open Access 5(1): 1-4. DOI: http://dx.doi. org/10.15226/cs-roa.2017.00142.	YES	-------	100%

The reason is, there is no current Vaccine, proven Treatment for COVID-19 to this date and still research is going on to find the right Treatment or Vaccine for COVID-19 [14-16]. More hard work needed in Medical Ahsan Ali Siddiqui, [13] Sciences to find out the Proven and approved vaccine and treatment for current pandemic or for preparation for Future Epidemics (Figure 6).

Results

Author of this Article has used SPSS 19 Software to present the results. First SPSS Diagram shows that All selected 15 Articles favors "Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients". The Second SPSS Diagram shows that 15 Articles agreed 100% for "Is COVID-19 Pandemic is out of control as compare to other Medical and Surgical Diseases, where Proven treatment is available for ill Patients". The main theme of this Article Ahsan Ali Siddiqui, [17] is to discuss the Preventions, training, and control strategies against COVID-19 novel corona virus in China in initial first two months of Pandemic. When Chinese health authorities in Wuhan china found Novel coronavirus pneumonia (NCP) in patients in health facilities they first treated them with (TCM) Traditional Chinese medicines with western medicines. In most of the cases they have found (TCM) Traditional Chinese medicines more effective than other medicines. The current positive statistics of Pandemics about China shows the complete control on COVID-19 with no spread and no Fatalities in May 2019. While the Pandemic of Ahsan Ali Siddiqui, [17] COVID-19 is on the rise all around the world specially in the USA, Europe, and the UK.

You can reduce your chances Ahsan Ali Siddiqui, [18] of being infected World Health Organization or spreading COVID-19 by taking some simple precautions such as Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them with soap and water. Current Pandemic of COVID-19 has taught us that we in the twenty first century is not ready to provide health care to vulnerable community such as elders, children, and sick people with chronic illness. Such vulnerable people with bad health

and low socio-economic status are more prone to get effected by COVID-19 novel corona virus. More serious work needed Ahsan Ali Siddiqui, [18] to be done by Global health agencies and world organizations such as WHO, CDC, UN, UNESCO, UNHCR others. This Article teaches us the lesson Ahsan Ali Siddiqui, [19] that Technology in Medical Sciences and Inventions, Discovery of new Medicines and Surgical Instruments are Blessings for Mankind. Latest Technologies such as MRI Scans, CT Scans, Chemotherapy, Radiotherapy, Nuclear Technology, X rays/ Ultrasound, Latest Laparoscopic surgery, Endoscopy, Angioplasty others are treating more ill patients than ever before.

But more Medical research is needed to find the Treatment for COVID-19 Pandemic, Ebola, MERS, Avian Influenza, Swine Flu and other Viral diseases. Urgent research institutes needed to build up for the discovery of new Vaccines when needed in times of Ahsan Ali Siddiqui, [19] COVID-19 Pandemic.

Discussion

Discussion About Other Medical and Surgical Diseases and Their Treatment

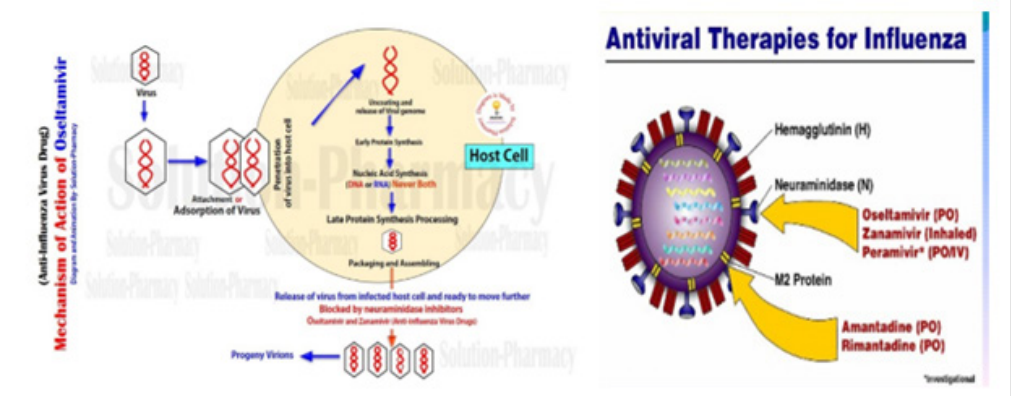

Figure 7: GOOGLE [22].

Type 1 diabetes mellitus-T1DM is a condition Andrej Janež, et al. [20] in which the body can no longer produce sufficient amounts of its own insulin. As a result, blood sugar (glucose) levels increase and in the absence of supplemental insulin diabetic coma and death will eventually occur. In order to meet the standard treatment target (glycated hemoglobin levels < 7%), patients with T1DM require insulin supplementation which is given as injections at set times of the day (basal) and at mealtimes bolus or prandial. Patients may use a pump that provides a continuous supply of insulin Andrej Janež, et al. [20] if they do not meet treatment targets or if they have frequent or severe hypoglycemia. Avian flu- H5N1 is a type of influenza A Ahsan Ali S, [21] that mainly infects birds but occasionally affects humans. Avian flu can be transmitted from live birds to people although transmission between humans is very inefficient. Wild birds are the natural hosts of the virus hence the name avian influenza or bird flu. The author told the dangers and the harmful effects done by the Avian flu and how this deadly disease spread in the communities silently. And the health departments come to know about this disease when it done its work killing the innocent people Ahsan Ali S [21,22] terrorize the whole community by its deadly results (Figure 7).

The purpose of this study was to Jamali Z, et al. [23] evaluate the neonatal outcomes in early and delayed cord clamping and to find their correlation in early and delayed cord clamping with different hematological parameters in neonates. The present study predicted that no correlation in either group existed between hemoglobin hematocrit and bilirubin with increasing cord clamping time. A total of 342 pregnant Jamali Z, et al. [24] females in their third stage of labor were selected for this study. No correlation existed between hemoglobin and hematocrit with cord clamping time (p-value 0.661) and (p-value 0.439) respectively. Weak positive correlation (p=0.002, r = 0.169) existed between bilirubin levels with clamping time. Chronic Myeloid Leukemia-CML Amna MB, et al. [25] is malignancy of blood that arise from a molecular alteration in a solitary pluripotent hematopoietic stem cells resulting in continuous production of the myeloid progeny. In 90% of cases CML is caused due to the existence of Philadelphia chromosome and infrequently by Hyper diploidy of greater than 50 chromosomes. The present study predicted that considerable difference did not exist in various hematological parameters of male and female CML patients. However, there was significant difference Amna MB, et al. [25] observed in myelocyte count of these patients on the basis of gender.

Cancer patients are usually encountered Reena Kumari, et al. [26] by number of different issues one of them include electrolyte imbalance. Other causes of electrolyte imbalance include para neoplastic syndrome or those associated with chemotherapeutic regimes. Life threatening complication has been documented because of these malignant specific electrolyte disorders they may require urgent therapy and correction. Our study Reena P, et al. [27] showed that among male and female cancer patients on chemotherapy, more than half of males were found to have febrile neutropenia, while fewer females had febrile neutropenia. There was no

significant difference in occurrence of febrile neutropenia between two genders. In 90% of cases, CML is because of the Amna MB, et al. [28] presence of Philadelphia chromosome and uncommonly by Hyperdiploidy of >50 chromosomes. Expansion of break point cluster region and Abelson's (BCR-ABL) a new fusion gene due to the translocation between chromosome 9 and 22 t (9,22) (q34; q11) encodes for an oncoprotein (P210) located in the cytoplasm that has a strong capability to stimulate tyrosine kinase. Resulting in activation of several signals that alter hematopoietic stem cells into the leukemic cells, as a result amplifying tyrosine kinase action which plays a fundamental role in the pathogenesis of CML.

This study predicted that there is difference in electrolyte levels before and after chemotherapy in cancer patients. Furthermore Reena Kumari, et al. [29] no correlation was observed in various electrolytes with the duration of chemotherapy although the difference in electrolyte levels is not clinically significant and can be managed promptly in less time.

Conclusion

Although the Incidence, Distribution, Illness, and mortality due to COVID-19 Pandemic is reducing day by day as compare to peak in March 2020 in the EU, the UK and the USA. But the Head of CDC USA warn the WHO and US Government that COVID-19 Pandemic has the tendency to become deadly as same as Spanish flu Pandemic in 1918 where approximately 60 to 100 million people died. The governments of the 200 affected countries due to COVID-19 should understand the seriousness of the warnings and do the recommended preventions such as wearing Masks, washing hands with soap or sanitize it with Alcohol, social distancing and staying home as much as possible. In case of fever and shortness of breath take oxygen therapy, and paracetamol and ask the doctor for Antiviral, Plasma therapy and dexamethasone others as soon as possible.

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