

Impact of SARSCoV-2, psychological effects and recovery in younger individuals.

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Introduction

Little is known about how COVID-19 affects kids, and there is also a dearth of data on how common the condition is among kids and how often it kills them or causes symptoms. The majority of the confirmed cases in youngsters during the first few months of the pandemic were brought on by intimate contact with an infected family member [1]. With up to 20% of confirmed instances recorded in young people, the situation appears to have shifted in recent months. This emphasises the necessity of adhering to social distance rules, which may help stop community transmission.

Effect of COVID-19 in different age groups

Age, race, and general health of the individual are only a few of the COVID-19-related health disparities that have been revealed by mounting data. Older people, especially those over 50, have a higher risk of getting COVID-19 and have a worse prognosis than people in other age groups, probably as a result of pathophysiological changes brought on by ageing [2].

SARS-CoV-2 in younger individuals

One of the most prominent symptoms observed in COVID-19-positive young individuals is Multisystem Inflammatory Syndrome in Children (MIS-C). While the pathophysiology of MIS-C still remains unclear, the condition may be the result of an excessive immune response characterized by the generation of non-specific antibodies against an array of respiratory viruses (excluding SARS-CoV-2) [3]. Symptoms associated with MIS-C include fever, rash, gastrointestinal issues, and myocarditis, a cardiac muscle inflammation characterized by high circulatory concentrations of ferritin, troponin, and D-dimer.

Recovery and mortality

For reasons that are yet unknown, the majority of the young people were either asymptomatic or displayed minor symptoms, leading to fewer hospitalizations. A hypothesis and a few studies may be able to specifically address this query. According to several studies, children are more likely than adults to have different viral airway infections, and by the time they are four years old, 75% of all children had had experienced a seasonal coronavirus infection [4]. A young person's higher titre of anti-seasonal coronavirus (CoV)

antibodies may help them clear SARS-CoV-2 more quickly than an elderly one. The expression of transmembrane angiotensin-converting enzyme 2 (ACE2), a crucial cellular receptor that promotes SARS-CoV2 entrance into cells and results in infection, is another theory that might be put forth.

Psychological effects

The COVID-19 pandemic has also caused widespread panic and confusion among the general public. This negative impact can be seen in future generations. Many studies in this area have suggested that the psychological burden caused by COVID-19 was also seen in other pandemic situations, such as the response of young Chinese people during the SARS outbreak or the Influenza A (H1N1) outbreak [5]. The most common cause of concern and panic is the fear of becoming infected, which can be beneficial in terms of getting the general population to follow social distancing rules but detrimental to the individuals themselves.

Conclusion

COVID-19 treatment options are still limited, and no specific vaccines are available. Several clinical trials are currently underway to determine the efficacy of interventions such as antiviral medications, immunoglobulins, high-flow nasal oxygen, and ventilation against COVID-19. The best way to prevent the virus from spreading is to isolate oneself and avoid contact with COVID-19 patients. Because of the lockdown and closure of educational institutions, younger people are less likely to be exposed to SARS-CoV-2. Nonetheless, younger people can become infected through family members who become infected due to their exposure to the outside environment.

Although COVID-19 primarily affects the elderly due to a weakened immune system, underlying diseases, and a lack of vaccinations, the lower rate of transmission and symptomatic disease burden in children and adolescents is perplexing and warrants further investigation. This could be attributed to increased ACE2 expression in the upper respiratory tract or the absence of an excessive immune response (e.g., cytokine storm), which is common in elderly patients. Strict social distancing protocols have been mandated to prevent disease spread, posing challenges in childcare.

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References

1. Sinclair DA, McNamara MS, Mueller AL. Why does COVID-19 disproportionately affect older people? *Aging (Albany NY)*. 2020;12(10):9959-81.
2. Jogalekar MP, Veerabathini A, Gangadaran P. Novel 2019 coronavirus: genome structure, clinical trials, and outstanding questions. *Exp Biol Med*. 2020;245(11):964-69.
3. Cao Q, Chen YC, Chen CL, et al. SARS-CoV-2 infection in children: transmission dynamics and clinical characteristics. *J Formos Med Assoc*. 2020;119(3):670-73.
4. Fang F, Luo X. Facing the pandemic of 2019 novel coronavirus infections: the pediatric perspectives. *Zhonghua Er Ke Za Zhi*. 2020;58(2):81-5.
5. Choi SH, Kim HW, Kang JM, et al. Epidemiology and clinical features of coronavirus disease 2019 in children. *Clin Exp Pediatr*. 2020;63(4):125-32.