

Corona virus's skin effects: Symptoms and risks.

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Description

In early December 2019, an outbreak of coronavirus disease 2019 (COVID-19) was recorded in Wuhan City, Hubei Province, China, caused by a novel severe acute respiratory coronavirus 2 syndrome (SARS-CoV-2). On January 30, 2020, the World Health Organization declared the outbreak a Public Health Emergency of International Concern. On February 14, 2020, 495 laboratories reported COVID-19 outbreaks, with 1,381 deaths. The cases began to be identified on December 8, 2019, and included some patients who worked or lived in the Huanan Seafood Wholesale Market. This virus is a member of the -coronavirus family, which is a large group of viruses found in nature. SARS-CoV-2, like other viruses, has many natural hosts, intermediate hosts, and end hosts. The management of viral infections would be significantly hindered as a result of this. SARS-CoV-2 has a high transmissibility and infectivity, as well as a low mortality rate, when compared to severe acute respiratory syndrome and Middle East respiratory syndrome coronaviruses (SARS-CoV and MERS-CoV). Prior skin conditions such as rosacea, eczema, atopic dermatitis, and neurodermatitis have worsened in some COVID-19 patients. Facial acne and rosacea developed or worsened as a result of the prolonged use of masks during the outbreak. The use of skin disinfectants on a regular basis has increased the incidence of contact dermatitis not only in COVID-19 patients, but also in healthy people and medical staff. To help people, several dermatologists in China are offering free online consultations. Specific treatment approaches for certain skin diseases should be considered during the epidemic. People with multiple skin conditions, such as psoriasis, are more likely to develop cardiovascular disease, depression, and other health issues, which may raise the risk of severe cases and death after COVID-19. In the current scenario, therapeutic drugs such as IL-17 inhibitors, which rapidly control skin lesions and have less side effects on immune functions than traditional immunosuppressants, can be considered first-line therapy. It is also based on some arguments that some biological agents could be useful in the treatment of novel coronavirus pneumonia, despite the fact that the therapeutic effectiveness of biological agents in both skin diseases and novel coronavirus pneumonia is still being studied in clinical trials. Skin rashes in COVID-19 patients have been documented all over the world.

The COVID-19 Virus causes Skin Problems

The skin's dermatological conditions may increase the risk of infection by the novel coronavirus (2019-nCoV). How coronavirus could infect the skin by coming into contact with subcutaneous tissues, mucosal surfaces, or blood vessels? The use of bleach or other disinfectants on the body does not defend

against COVID-19, according to the WHO. If ingested, bleach or any other disinfectant is poisonous and causes skin irritation and harm. The easiest way to eradicate the virus is to clean hands with an alcohol-based hand wash or by washing hands with a mild soap and water. Ultraviolet lamps should not be used to clean the hands or other parts of the skin because they can irritate the skin. An erythematous exanthem (including lacy pattern and a petechial, dengue-like rash), livedo reticularis, cutaneous vasculitis, acute urticaria, chickenpox-like blisters, and COVID toes (also known as pernio, chilblains, or frostbite) have all been reported in coronavirus patients. While the virus is not dermatotropic, it has caused some skin problems, primarily as a result of prolonged contact with PPE and improper use of personal hygiene items. Coronavirus causes pressure inflammation, hives, itching, contact dermatitis, and exacerbation of pre-existing skin diseases, such as acne and seborrheic dermatitis. Mucosal membranes, including the conjunctiva, were eventually identified as the most common mode of infection transmission, with the otic canal having a lower risk of transmission. In the case of coronavirus, skin complications are primarily caused by the hyper-hydration effect of personal protective equipment. These devices can damage the epidermal barrier, cause contact reactions, and cause friction, all of which can aggravate an existing skin issue.

Conclusion

Skin and mucous membrane problems are common among health workers tasked with preventing the spread of coronavirus. The skin and mucous membrane barrier can be harmed by insufficient and unnecessary protection. The skin should be covered from the presence of viruses in the atmosphere by using only the required amount of soaps and sanitizers. Patients with skin disorders should take their medications as directed to prevent coming into contact with the virus. Coronavirus can cause skin problems, especially on the toes. Rashes, irritation, blisters, and acute and chronic dermatitis are also possible side effects.

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