



## Clinical and Epidemiological Characteristics of COVID-19 Virus (Clinical Experience)

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In the 21<sup>st</sup> century, humanity is facing a new pandemic COVID-19, which it has not seen for 100 years. Given the rapid and global spread of the new coronavirus infection, the World Health Organization announced the start of the COVID-19 (Coronavirus Disease 2019) pandemic on March 11, 2020.

As of December of 2019, a new coronavirus disease (COVID-19) caused by the SARS-CoV2 virus emerged in Wuhan, Hubei Province, China, and has spread globally via travel [1]. The pandemic was initially declared a Public Health Emergency of International Concern on January 20<sup>th</sup>, 2020 by the World Health Organization (WHO) [2]. By February 17<sup>th</sup>, there had been 72,436 confirmed cases and 1,868 confirmed deaths in Chinese Provinces and affiliated entities as of, according to the Chinese Healthy Authority, and 332,930 confirmed cases globally as of March 23<sup>rd</sup>, 2020, there being no antiviral treatments so far proven to be efficacious [3]. Efforts to contain the pandemic have instead focused on public health measures such as social distancing, prohibition of public gatherings, and increased use of face masks. These measures alone, however, are unlikely to stop the pandemic owing to the highly contagious nature of the disease [4].

Chongqing Public Health Medical Center, a designated treatment hospital for such patients, received nearly 200 COVID-19 patients. To facilitate diagnosis and treatment, additional clinical and epidemiological features of SARS-CoV-2 pneumonia are required [5]. Therefore, a study of the clinical and epidemiology features of 114 patients admitted to Chongqing Public Health Medical Center confirmed to have COVID-19, was conducted.

The majority of COVID19 cases showed a mild clinical syndrome, ranging from absence or paucity of symptoms to common cold or influenza-like symptoms. The findings of the present study increase the accuracy of the clinical diagnosis for the prompt identification and management of suspected COVID19 cases, being particularly useful during resurges of the SARS-CoV-2 pandemic [6].

We also analyzed the age distribution of the disease in patients admitted to the Teaching Surgery Clinic of the Azerbaijan Medical University with a diagnosis of COVID-19, depending on the severity of the disease. 967 patients admitted to the clinic from April to August 20, 2020 were taken under control. Examination of the patient groups revealed that 13 of them were foreign nationals. Most of them were citizens of Turkey, Cuba, Turkmenistan, Russia, Japan and Georgia.

Symptomatic and asymptomatic course of the disease was recorded in the patients included in the study. Depending on the severity of the disease, the clinical picture of the infection differed. The number of patients with mild coronavirus infection was 207. They have a body temperature of 37.5-37.8 ° C, some patients have impaired smell and taste, sore throat and diarrhea.

The number of severe patients was 380, moderate -380.

During moderate infection, shortness of breath, cough, shortness of breath, diarrhea occurred.

Moderate shortness of breath and suffocation are also recorded. Saturation in the clinic is 80-70. It is 40-50 in severe cases. Mild degree was between 95-100.

In the case of very severe infections, patients are connected to a ventilator in the clinic.

The patients underwent PCR, X-ray and CT diagnostics of the swab taken from the nasopharynx. Symptoms of «icy glass» were found in moderate to severe patients. Depending on the severity of the disease, they received etiotropic, pathogenetic and symptomatic treatment.

When analyzing the age structure of the patients included in the study, it was found that the majority of them were patients aged 19-45 years.

The number of patients aged 56-65 was 193. The disease was less common in patients under 1 year of age (3 people (0.3%)) and in patients aged 1-18 years (36 people (5.6%)). The number of patients over 75 years was 32 people (3.3%).

Analysis of the structure of patients aged 1-18 years revealed that the vast majority of them are children under 9 years. The number of these patients was 21, which was 58.3% of the total number of patients.

The dead patients were between 28-83 years old. Patients with diabetes, obesity, metabolic syndrome, cardiovascular disease and oncological diseases predominated among the dead. We would like to note that high lethality has been reported in patients with concomitant disease and severe progression.

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