

Integrative Medicine for the Treatment of Mild to Moderate COVID

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Perspective

The majority of SARS-CoV-2 infected people develop mild-to-moderate COVID-19 illness. Despite the fact that mild-to-moderate (MtoM) COVID-19 infections are not severe, they are accompanied by pathophysiological alterations as well as acute and chronic symptoms. Integrative medicine (IM) approaches often advocate a combination of practises such as dietary changes, breathing exercises, physical activity, supplements, and so on. These writers, all of whom are IM subject matter experts, propose viable integrative ways to aid in recovery from MtoM COVID-19. Coronavirus disease of 2019 (COVID-19), caused by the Novel SARS-coronavirus-2 (SARS-CoV-2), was first described in December 2019 in Wuhan, China. SARS-CoV-2 is a coronavirus-like big RNA virus. Its mode of infection is similar to that of other Coronaviridae family members, which cause many common upper respiratory illnesses. Endothelial and epithelial cells of the lungs, heart, blood arteries, kidneys, and gastrointestinal tract all express the ACE2 receptor.

This widespread distribution of ACE2 in tissues could explain the pleiotropic consequences of viral replication in diverse hosts. The SARS-CoV-2 virus has shown significant variation in host symptomology as well as target organ pathogenicity. Viral infection of mucosal epithelial cells occurs, which may be followed by vigorous replication of the virus down the respiratory tree to the upper and lower lungs. Coronavirus infects type I and type II pneumocytes, causing a loss of surfactant and potentially leading to an ARDS-like pathophysiology with respiratory failure and sepsis. A simultaneous immunological reaction known as a "cytokine storm" can ensue, further complicating the situation. The activation of macrophages, monocytes, and lymphocytes in response to the virus causes a flood of cytokines to be released. Convalescence looks to be a time-consuming process in comparison to the original infection. Complications of macro- and microthromboses, for example, are relatively prevalent and may necessitate extended anticoagulation.

Recovery from ARDS is a long rehabilitative process that frequently necessitates the use of supplementary oxygen. The natural course of COVID-19 recovery is diverse and determined by a variety of factors such

as age, the individual's baseline health, the existence of comorbid illnesses, the origin and severity of infection, and socioeconomic circumstances. Atypical chest CT abnormalities, notably ground-glass opacities, are seen in up to 50% of asymptomatic COVID-19 patients, indicating pulmonary inflammation and perhaps fibrosis. Unresolved post-viral fibrosis, as seen in other coronavirus infections, can lead to altered lung elasticity and impaired pulmonary function. In a cohort of over-65 patients hospitalised for various forms of infectious pneumonia, the risk of cardiovascular disease events increased fourfold in the first year compared to age-matched controls and remained elevated for ten years following the pneumonia. Immune dysregulation can occur, particularly in people over the age of 50, and is characterised by decreasing lymphocyte counts, particularly CD8+ T cell counts, and impaired adaptive immunity.

A low-glycemic, low-saturated fat diet can help to control inflammation in general. An anti-inflammatory diet blends traditional Mediterranean and Asian eating patterns and is distinguished by a high intake of vegetables, fruit, legumes, fish, lean protein, whole grains, spices, nuts, and seeds, as well as a limited intake of refined grains and processed foods. While dietary supplements are presently being explored in acute COVID-19 infections, no clinical trials have been conducted to demonstrate the usefulness of dietary supplementation in supporting convalescence. The therapeutic goals of adjunctive support alter between these phases; for example, while active infection, anti-viral treatment is critical, whereas during convalescence, the primary goal is inflammatory downregulation. Integrative medicine is defined as a healing-oriented medicine that considers the entire individual, including all areas of lifestyle. It stresses the therapeutic interaction between the practitioner and the patient, is evidence-based, and employs all acceptable therapies.

To be clear, IM is part of a bigger paradigm that includes traditional techniques. In IM, an emphasis on restoring homeostasis is critical. Even when there is no obvious treatment for a condition, practitioners can apply IM principles to aid healing. IM may give the patient the ability to help themselves recover. This is significant in chronic diseases such as diabetes and cancer since it improves individual disease control while also lowering healthcare costs.

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