

THE IMPORTANCE OF S-REACTIVE PROTEIN, PROCALCITONIN, AND CYTOKINES IN DETERMINING THE PROSPECT OF SARS-COV-2-ASSOCIATED PNEUMONIA

Maqsudjon Ergashov Muzaffarovich

Abu ali ibn Sino nomidagi Buxoro Davlat Tibbiyot Instituti

Yuqumli Kasalliklar

ANNOTATION

This article highlights the importance of S-reactive protein (CRP), procalcitonin (PCT), and cytokines in determining the prognosis of SARS-CoV-2-associated pneumonia. The article discusses the methods used to measure these biomarkers and the results of studies that have investigated their use in predicting the severity and outcome of SARS-CoV-2-associated pneumonia. The article concludes with a discussion of the implications of these findings and suggestions for future research.

Keywords: SARS-CoV-2, pneumonia, S-reactive protein, procalcitonin, cytokines, biomarkers, prognosis.

АННОТАЦИЯ

The article Highlights the importance of s-reactive Protein (CRP), procalcitonin (PCT), and cytokines in determining the prognosis of SARS-CoV-2-associated pneumonia. The article discusses the methods used to measure these biomarkers and the results of studies that have investigated their use in predicting The severity and outcome of SARS-CoV-2-associated pneumonia. В 1997 году защитил диссертацию на соискание ученой степени доктора философских наук по теме "Проблемы теории познания".

Ключевые слова: SARS-CoV-2, пневмония, S-реактивный белок, прокальцитонин, цитокины, биомаркеры, прогноз.

The COVID-19 pandemic caused by the SARS-CoV-2 virus has affected millions of people worldwide and resulted in a significant number of deaths. One of the severe complications of COVID-19 is pneumonia, which can lead to respiratory failure and death. Early identification of patients with severe pneumonia and predicting their prognosis is critical in the management of COVID-19 patients. Biomarkers such as S-reactive protein (CRP), procalcitonin (PCT), and cytokines have been studied as potential predictors of the severity and outcome of SARS-CoV-2-associated pneumonia.

Studies that investigated the use of CRP, PCT, and cytokines in predicting the prognosis of SARS-CoV-2-associated pneumonia were reviewed. These studies used different methods to measure the levels of these biomarkers in the blood of COVID-19 patients, including enzyme-linked immunosorbent assay (ELISA), chemiluminescence assay (CLIA), and electrochemiluminescence assay (ECLIA).

RESULTS

Several studies have demonstrated the importance of CRP, PCT, and cytokines in predicting the severity and outcome of SARS-CoV-2-associated pneumonia. Elevated levels of these

biomarkers have been associated with a higher risk of developing severe pneumonia and a worse prognosis. In addition, these biomarkers have been used to monitor the response to treatment and predict the risk of complications, such as acute respiratory distress syndrome (ARDS) and sepsis.

SARS-CoV-2 is a novel coronavirus that emerged in Wuhan, China, in late 2019. Since then, it has spread rapidly around the world, causing a pandemic. The disease caused by SARS-CoV-2 is called COVID-19 and can range from mild to severe respiratory illness. SARS-CoV-2-associated pneumonia is one of the severe forms of the disease and can be life-threatening in some cases.

S-reactive protein (CRP), procalcitonin (PCT), and cytokines are all laboratory parameters that can help in the diagnosis and prognosis of SARS-CoV-2-associated pneumonia. In this article, we will discuss the importance of these parameters and their role in determining the prospect of SARS-CoV-2-associated pneumonia.

S-reactive protein (CRP) is a protein produced by the liver in response to inflammation in the body. Its levels in the blood can rise within hours of the onset of infection or inflammation. CRP levels can be measured using a simple blood test. Elevated CRP levels have been found in patients with severe COVID-19 and are associated with poor outcomes. Studies have shown that CRP levels can be used as a prognostic marker in COVID-19 patients. A high CRP level at admission is associated with a higher risk of severe disease, ICU admission, and mortality.

Procalcitonin (PCT) is a peptide hormone produced by the thyroid gland in response to bacterial infections. PCT levels can be measured in the blood, and elevated levels are usually indicative of bacterial infection. However, recent studies have shown that PCT levels can also be elevated in viral infections, including SARS-CoV-2. Elevated PCT levels have been found in COVID-19 patients with severe disease and are associated with poor outcomes. PCT levels can be used as a prognostic marker in COVID-19 patients. A high PCT level at admission is associated with a higher risk of severe disease, ICU admission, and mortality.

Cytokines are a group of proteins produced by cells of the immune system that regulate the body's immune response. During an infection, the body produces cytokines to fight the infection. However, in some cases, the body can produce too many cytokines, leading to a cytokine storm. A cytokine storm is a severe immune response that can cause widespread inflammation and tissue damage. Cytokine storms have been observed in some COVID-19 patients and are associated with severe disease and mortality. Cytokine levels can be measured in the blood, and elevated levels are usually indicative of a cytokine storm.

In conclusion, S-reactive protein (CRP), procalcitonin (PCT), and cytokines are important laboratory parameters that can help in the diagnosis and prognosis of SARS-CoV-2-associated pneumonia. Elevated levels of these parameters are usually indicative of severe disease and poor outcomes. Early identification of patients with elevated levels of these parameters can help in the early intervention and management of SARS-CoV-2-associated pneumonia.

Discussion: The measurement of CRP, PCT, and cytokines is a valuable tool in the management of patients with SARS-CoV-2-associated pneumonia. These biomarkers can help identify patients with a higher risk of developing severe pneumonia and those who may benefit from more aggressive treatment. They can also be used to monitor the response to treatment and predict the risk of complications. However, the use of these biomarkers in clinical practice

should be carefully evaluated, and their limitations should be considered. Further research is needed to investigate the use of these biomarkers in the management of COVID-19 patients.

S-reactive protein (CRP) and procalcitonin (PCT) are acute-phase reactants that are produced in response to inflammation and infection. Elevated levels of CRP and PCT have been observed in COVID-19 patients, and studies have shown that high levels of these parameters at admission are associated with poor outcomes. Both CRP and PCT can be used as prognostic markers in COVID-19 patients to identify those at higher risk of severe disease and poor outcomes.

Cytokines are a group of proteins that regulate the immune response. During an infection, cytokines are produced to fight the infection. However, in some cases, the body can produce too many cytokines, leading to a cytokine storm. Cytokine storms have been observed in some COVID-19 patients and are associated with severe disease and mortality. Elevated levels of cytokines, such as interleukin-6 (IL-6) and tumor necrosis factor-alpha (TNF- α), have been observed in severe cases of COVID-19. Measuring cytokine levels can help identify patients at risk of developing a cytokine storm and guide the use of immunomodulatory therapies.

Conclusions:

In conclusion, CRP, PCT, and cytokines are valuable biomarkers in predicting the prognosis of SARS-CoV-2-associated pneumonia. These biomarkers can help identify patients with a higher risk of developing severe pneumonia and those who may benefit from more aggressive treatment. Further research is needed to determine the optimal use of these biomarkers in the management of COVID-19 patients. Additionally, the development of rapid and accurate methods for measuring these biomarkers will improve their utility in clinical practice.

S-reactive protein (CRP), procalcitonin (PCT), and cytokines are important laboratory parameters that can help in the diagnosis and prognosis of SARS-CoV-2-associated pneumonia. Elevated levels of these parameters are usually indicative of severe disease and poor outcomes. Early identification of patients with elevated levels of these parameters can help in the early intervention and management of SARS-CoV-2-associated pneumonia.

Future research should focus on the development of biomarkers that can predict the development of severe disease and mortality in COVID-19 patients. The use of biomarkers can help guide the use of immunomodulatory therapies and improve patient outcomes. Additionally, more research is needed to understand the pathogenesis of cytokine storms in COVID-19 patients and develop effective treatments to mitigate their effects.

REFERENCES

1. Lanzavecchia A. Antigen-specific interaction between T and B cells // *Nature*. – 1985. – Vol. 314, no. 11. – P. 537–539.
2. Scaglioni V., Soriano E.R. Are superantigens the cause of cytokine storm and viral sepsis in severe COVID-19? Observations and hypothesis // *Scand. J. Immunol.* – 2020. – Vol. 92, no. 6. – P. 1–5.
3. Gorbalenya A.E., et al. The species Severe acute respiratory syndrome-related coronavirus: classifying 2019-nCoV and naming it SARS-CoV-2 // *Nat. Microbiol.* – 2020. – Vol. 5, no. 4. – P. 536–544.

4. Encyclopaedia Britannica, Inc. – URL: [https:// www.britannica.com](https://www.britannica.com) (date of viewing: 12.01.2021).
5. Bosch B.J., et al. The coronavirus spike protein is a class I virus fusion protein: structural and functional characterization of the fusion core complex // *J. Virol.* – 2003. – Vol. 77, no. 16. – P. 8801–8811
6. Lopez L.A., et al. Importance of conserved cysteine residues in the coronavirus envelope protein // *J. Virol.* – 2008. – Vol. 82, no. 6. – P. 3000–3010.
7. Schoeman, D. Coronavirus envelope protein: current knowledge // *Virol. J.* – 2019. – Vol. 16, no. 1. – P. 69.