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Corona Virus and Kidney Failure: A review



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Abstract:

Coronavirus disease (COVID-19) is a life-threatening and highly infectious disease. It impacts several body organs for example the lungs, kidneys, blood texture and contents, digestive cannel, and heart. The first case emerged in China and rapidly spreading and affirmed a global pandemic. COVID-19 is a major threat and a pandemic all over the world. Severe Acute Respiratory Syndrome Corona Virus2, the cause of coronavirus disease 19, connects to its target cells utilizing (ACE2), Angiotensin Converting Enzyme 2which can be stated via epithelial cells of numerous organs. Corona Virus can basis reasonable or harsh kidney damage with signs involving proteinuria, hematuria, eminent urea nitrogen, and creatinine. The kidney cell contain ACE2 receptors that allow to Corona Virus 2 to join it, attack, duplicate and potentially destroy all tissue.

Keywords: COVID-19. ACE2, kidney failure, Mechanisms of Renal Injury.

INTRODUCTION

Corona Virus is an RNA virus, with a representative crown-resembling emergence beneath an electron microscope owing to the attendance of glycoprotein spikes on its cover (Perlman and Netland, 2009). There are four genera of corona

virus: alpha CoV, beta CoV) present in bats and rodents, delta CoV and gamma CoV) maybe symbolize avian species. COVID-19hasa normal and zoonotic source: 2situations that can conceivably

clarify the source of SARS-CoV2 are: (Yinet al.,2018; Perlman and Netland, 2009).

Medical characteristics and danger factors are extremely changeable, creating the medical harshness vary from asymptomatic to lethal (Phan ,2020). COVID-19 spike proteins are central causations for disease connection and entrance into objective cells. The receptor for two Severe Acute Respiratory Syndrome Corona Virus 2 is ACE2, a cell-exterior enzyme supplying to organize of blood pressure. SARS-CoV cell access is autonomous of ACE2 catalytic movement(Hoffmann et al.,2020; Lan et al.,2020).



Diagram of corona virus virion organization viewing spikes that figure a "crown" like the astral corona.

COVID-19mayovertake during the mucous membranes, particularly nasal and larynx mucosa, then the virus transfer to the lungs throughout the respiratory cannel. After that COVID-19 will assault the target organs that state ACE2, for instance the lungs, heart, renal system and gastrointestinal tract (Chen et al., 2020; Rose-John, 2018). COVID-19initiates a second assault, making the patient's state to exacerbate just about seven to fourteen days after start. B lymphocyte decrease will happen untimely in the illness, which will influence antibody construction in the tolerant. The provocative causes correlated with illness mostly holding IL-6 are considerably enlarged, which as well added toward the exasperation of the illness just about two to ten days after start (Chen et al., 2020).

SARS of Corona Virus 2 joins directly to (ACE2) receptor that can be invasion of epithelial cell

of many organ such(lung, blood vessel ,kidney and intestine) , which can be stated by epithelial cells of numerous organs(blood vessels, lung, kidney and intestine) (Fang et al.,2020). Though SARS-CoV-2chieflycreates respiratory illness, it may affect renal deficiency in addition to multi-organ failure (MOF) in sober conditions elevated ACE2 appearance identifies equally in bladderurothelial cells and renal proximal tubular cells (Zou et al.,2020).

Alternatively, CKD patients or renal transfer receivers practice a quantifiably bigger danger of harsh Corona Virus disease and extremity. Additionally, researchers report normal renal failure in addition to bigger happening of acute kidney injury (AKI) with pitiable medical results in tolerant with Corona Virus (Zheng et al.,2020; Cheruiyot et al., 2020).



Corona Virus causes respiratory illness, and the symptoms influence respiratory healthiness. In agreement with the Centers for Disease Control and Prevention (CDC) (Cheruiyot et al., 2020),, the major symptoms of Corona Virus symptoms can be extremely gentle to harsh and contain a fever, cough, and shortness of breath. Numerous people are asymptomatic. Symptoms may appear two to 14 days after exposure. Present information proposes that the disease can basis gentle, flu-like symptoms, in addition to more harsh illness. Nearly all patients appear to encompass gentle illness, and about 20% emerge to growth to more harsh illness, involving pneumonia, respiratory failure, as well as, in some cases, passing away (Gu et al.,2020; Kooraki, S., et al.,2020).



COVID-19 is a major threat and a pandemic all over the world. The infection affects all ages, including children moreover older people. Most of the infections are mild symptoms, manifesting as a flu-like illness. COVID-19 with comorbidities tend to have serious sickness and intensive care unit requirement. Kidney impairment may be found in this infectivity, and acute kidney injury (AKI) is an important predictor of death in Coronavirus (Naicker et al.,2020; Perico et al.,2020).

Signs and symptoms of Corona virus be able to emerge two to fourteen days that included Shortness of inhalation or complexity breathing, Fever, Cough, Headache, Diarrhea, Sore throat, Runny nose Tiredness and Vomiting and a number of people comprise practiced the def defaculte of taste or smell (Lai et al., 2020; Yang et al., 2020).

Renal failure: incapability of the kidneys to make excretory purpose causing maintenance of nitrogenous desecrate products from the blood. Benefits of the kidney are:

There are 2 types of kidney failure :

1. Acute Renal Failure (ARF)

Acute renal failure is the disease where glomerular filtration refuses quickly (hours to days) and is regularly emendable. AKI can identify by any one of the subsequent: first, creatinine enlarge of 0.3 mg/dL in 48 hours, second, creatinine enlarge to 1.5 times baseline within last seven days, or third, urine volume less than 0.5 mL/kg per hour for 6 hour (Chertow et al.,2005).

2. Chronic Renal Failure (CRF)

Chronic renal failure defines as unrelenting impairment of kidney function, that is to say, unusually eminent serum creatinine designs for over three months otherwise designs Glomerular Filtration Rate (GFR) fewer than 60 ml in minute / 1.73m. It frequently includes a higher defeat of kidney job dictating renal substitute treatment (dialysis or transplantation). while a patient requires renal substitute treatment, the situation is known end-stage renal disease (ESRD (Luo et al., 2014; Chertow et al., 2005).

Causes of Acute Kidney Failure Involve:

Small blood pressure, obstruction of the urinary cannel, definite prescriptions, muscle collapse, in addition to hemolytic uremic syndrome. Origins of constant kidney failure involve diabetes lofty blood pressure nephrotic disease as well as polycystic kidney illness (Niddk, 2017).

Investigation of sharp failure frequently bases on a mixture of reasons for instance reduce urine manufacture or highly serum creatinine. Analysis of constant failure bases on a Glomerular Filtration Rate (GFR) of fewer than fifteen or the require for renal substitute treatment (Blakeley, 2010; Niddk, 2017). Mechanisms of Renal Injury:

The probable mechanisms that adduce for renal confusions in COVID-19infectivityconsist of dehydration, sepsis causing cytokine tempest disease, rhabdomyolysis, in addition to hypoxia (Chu et al.,2005).

An additional mechanism observes to be at play is the straight cytopathic cause of the disease on tubular cells along with mainly in the case of Corona Virus, glomerular cells too. Dehydration in these longsufferings possibly owing to reduce liquid ingestion or fever particularly in the mature, and can effect in decrease in renal profusion in addition to ultimately acute tubular necrosis if the abuse perseveres. intractable hypotension, which regularly happens in long-sufferings through numerous organ failure and bacterial sepsis chiefly in those on extend Ventilatory sustain can influence to AKI. Straight muscle attack by Severe Acute Respiratory Syndrome Corona Virus 2 causing rhabdomyolysis is a famous device for AKI in SARS. In the cytokine tempest disease, amplification of cytokines for example IL-6 and IL-8 involve viral contagions can cause cohesion of provocative cells to vascular endothelium, probably causing endothelium needy vasodilatation in addition to following renal damage (Annuk et al., 2001; Ding et al., 2003).



Kidney illness is an ordinary chronic illness. The patients with kidney illness who emerge mainly at danger for Corona Virus are those with a kidney transfer, as a result of immunosuppression, in addition to those who endure in-center hemodialysis managements three weeks, owing to incapability to self-separate. Patients with kidney illness as well include additional comorbidities, involving diabetes mellitus, hypertension, as well as cardiovascular illness, that are danger features for reduced results in Corona Virus(Husain et al.,2020; WuJ et al.,2020).

Furthermore, kidney disease is regular in Corona Virus; >40% of patient cases contain unusual proteinuria at hospital permission. Two Acute Kidney Injury(AKI) is frequent amongst significantly sick patients with Corona Virus, distressing approximately 20–40% of patients. It considers an indicator of illness cruelty and an antagonistic predictive factor for existence (Zhou et al., 2020; Pei et al., 2020).

ACE2 receptors can be found in proximal tubules, afferent arterioles and loop of Henle. The SARS-CoV-2 may induce cytopathic effects on kidney cells. Urine of COVID-19 patients may contain some viral nucleic acid, it demonstrated that acute tubular necrosis can occur due to SARS-CoV-2 invasion to kidney tubules (Danser et al.,2020; Qian et al.,2020).

Human being tissue RNA prioritizing information shows that the observation of ACE2 in urinary tracts is almost one hundred-collapse superior than in respiratory tracts. Based on the data, coronavirus entering kidney cells through an ACE2-dependent pathway and may cause some kidney diseases (Ronco et al., 2020; Rudiansyah et al.,2020).

A feeble immunity system causes through patient's indigent nourishment can expose the body's capability to beat COVID-19. For the reason that kidney cells contain angiotensin-converting enzyme two receptors so as to allow the SARS-CoV-2 to connect, go in, occupy, duplicate, in addition to potentially harm the entire crowd tissue. An extra possibility which relates to pneumonia that is frequently notice in harsh cases of Corona Virus infectivity and can provoke kidney dysfunction in patients through abnormal reduces in blood oxygen rank. The immunity reaction to the Severe Acute Respiratory Syndrome Corona Virus 2 can probably as well be accountable intended for the experiential outcomes. The overexcited-activation of the immunity system throughout COVID-19 infectivity in a few patients can guide to cytokine tempest, huge invasion of cytokines can basis harsh irritation in addition to damage kidney tissue. Lastly, Acute Respiratory Syndrome Corona Virus 2 be able to basis the configuration of small coagulates in the bloodstream, which may block the negligible blood vessels inside

REFERENCES:

- Akalin, E. ; Azzi, Y. ; Bartash, R. ; Seethamraju, H. ; Parides, M. and Hemmige, V. (2020). Covid-19 and kidney transplantation, *N. Engl. J. Med*.
- Annuk, M.; Lind, L.; Linde, T. and Fellstrom, B. (2001). Impaired endothelium-dependent vasodilatation in renal failure in humans. *Nephrol Dial Transplant*. 16(2):302-6.
- Banerjee D, Popoola J, Shah S, Ster IC, Quan V, Phanish M. COVID-19 infection in kidney transplant recipients. Kidney Int.
- Blakeley, Sara. (2010). *Renal Failure and Replacement Therapies*. Springer Science & Business Media. p. 19.
- Chen, C.; Zhang, X.R.; Ju, Z.Y. and He, W.F. (2020). Advances in the research of cytokine storm mechanism induced by Corona Virus Disease 2019 and the corresponding immunotherapies. Zhonghua Shao Shang Za Zhi, 36.
- Chertow, G.M.; Burdick, E.; Honour, M.; Bonventre, J.V. and Bates, D.W. (2005). Acute kidney injury, mortality, length of stay, and costs in hospitalized patients. *J. Am. Soc. Nephrol.* 16(11):3365-70.
- Cheruiyot, B.; Henry, G.; Lippi, V.; Kipkorir, B.; Ngure, J. and Munguti. (2020) . Acute kidney injury is associated with worse prognosis in COVID-19 patients: a systematic review and meta-analysis, *Acta Biomed*. 91 (3), e2020029
- Chu,K.H.; Tsang, W.K.; Tang, C.S.; Lam, M.F. ; Lai, F.M. and To, K.F (2005). Acute renal impairment

the kidney in addition to accordingly weaken renal transmission and benefit. (Askari et al.,2021; Husain et al.,2020).

in coronavirus-associated severe acute respiratory syndrome. *Kidney Int.*; 67(2): 698-705.

- Columbia, P. (2020). University Kidney Transplant, Early description of coronavirus 2019 disease in kidney transplant recipients in New York, *J. Am. Soc. Nephrol.*
- Danser, A.H.J.; Epstein, M. and Batlle, D. (2020). Renin-Angiotensin System Blockers and the COVID-19 Pandemic: At Present There Is No Evidence to Abandon Renin Angiotensin System Blockers.
- Dellepiane, S. ; Marengo, M. and Cantaluppi, V. (2016). Detrimental cross-talk between sepsis and acute kidney injury: new pathogenic mechanisms, early biomarkers and targeted therapies, *Crit. Care* 20 (1) 61.
- Ding, Y.; Wang, H.; Shen, H.; Li ,Z.; Geng, J. and Han, H. (2003). The clinical pathology of severe acute respiratory syndrome (SARS): a report from China. *J Pathol*.;200(3):282-289.
- Fang, L.; Karakiulakis, G. and Roth, M. (2020). Are patients with hypertension and diabetes mellitus at increased risk for COVID-19 infection? *Lancet Respir. Med.* 8 (4) e21.
- Gandolfini, I.; Delsante, M.; Fiaccadori, E.; Zaza,
 G.; Manenti, L. and Degli Antoni, A. (2020).
 COVID-19 in kidney transplant recipients, *Am. J. Transplant*.
- Gu, J.; Han, B. and Wang, J. (2020). COVID-19: Gastrointestinal Manifestations and Potential Fecal–Oral *Transmission. Gastroenterology*.

- Hassan Askari a, Nima Sanadgol b,c, Asaad Azarnezhad d, Amir Tajbakhsh e, Hossein Rafiei f, Ali Reza Safarpour a, Seyed Mohammad Gheibihayat g, Ehsan Raeis-Abdollahi h, Amir Savardashtaki e,i, Ali Ghanbariasad j,k,**, Navid Omidifarl,(2021). Kidney diseases and COVID-19 infection: causes and effect, supportive therapeutics and nutritional perspectives. Heliyon 7 (2021) e06008
- Henry, B.M. and Lippi, G. (2020). Chronic kidney disease is associated with severe coronavirus disease 2019 (COVID-19) infection, *Int. Urol. Nephrol.*
- Hoffmann, M.; Kleine-Weber, H. and Schroeder ,S. (2020). SARS-CoV-2 cell entry depends on ACE2 and TMPRSS2 and Is blocked by a clinically proven protease inhibitor. Cell; 181(2):271–280.e8.
- Husain, S.A.; Dube, G.; Morris, H.; Fernandez, H.; Chang, J.H.; Paget, K.; Sritharan, S.; Patel, S.; Pawliczak, O.; Boehler, M.; Tsapepas, D.; Crew, R.J.; Cohen, D.J. and Mohan, S. (2020). Early outcomes of outpatient management of kidney transplant recipients with coronavirus disease 2019. *Clin J Am Soc Nephrol* 15: 1174–1178,
- National Institute of Diabetes and Digestive and Kidney Diseases. (2017). *Kidney Failure*".
- Kooraki, S., et al. (2020). Coronavirus (COVID-19) outbreak: what the department of radiology should know. *Journal of the American college of radiology*.
- Lai, C. C., et al., (2020). Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and corona virus disease-2019 (COVID-19): the epidemic and the challenges. *International journal of antimicrobial agents*, p. 105924

- Lan, J.; Ge, J.and Yu, J. (2020).. Structure of the SARS-CoV-2 spike receptor binding domain bound to the ACE2 receptor. *Nature* 30.
- Lu, R.; Zhao, X.; Li, J.; Niu, P.; Yang, B.; Wu, H.; Wang, W.; Song, H.; Huang, B. and Zhu, N. (2020). Genomic characterization and epidemiology of 2019 novel coronavirus: Implications for virus origins and receptor binding. *Lancet*, 395, 565–574.
- Luo, X.; Jiang, L.; Du, B.; Wen ,Y.; Wang, M. and Xi, X. (2014). Beijing Acute Kidney Injury Trial (BAKIT) workgroup. A comparison of different diagnostic criteria of acute kidney injury in critically ill patients. *Crit Care.Ju* 108;18(4):R144.
- Ma, Y.; Diao, B.; Lv, X.; Zhu, J.; Liang, W. and Liu, L.(2020). 2019 Novel Coronavirus Disease in Hemodialysis (HD) Patients: Report from One HD center in Wuhan, China. *medRxiv*,
- Naicker, S.; Yang, C.W.; Hwang, S.J.; Liu, B.C.; Chen, J.H. and Jha, V. (2020). The Novel Coronavirus 2019 Epidemic and Kidneys. *Kidney Int*.:1-5.
- Pei, G.; Zhang, Z.and Peng, J. (2020). Renal involvement and early prognosis in patients with COVID-19 pneumonia. *J Am Soc Nephrol* 2020; published online April 28.
- Perico, L.; Benigni, A. and Remuzzi, G. (2020). Should COVID-19 Concern Nephrologists? Why and to What Extent? The Emerging Impasse of Angiotensin Blockade. *Nephron.*; 24126:1-9.
- Perlman, S. and Netland, J.(2009). Coronaviruses post-SARS: Update on replication and pathogenesis. *Nat. Rev. Microbiol.*, 7, 439–450
- Phan, T. (2020). Novel coronavirus: From discovery to clinical diagnostics. Infect. Genet. *Evol.*, 79

- Qian, J.Y.; Wang, B. and Liu, B.C.(2020). Acute Kidney Injury in the 2019 Novel Coronavirus Disease. *Kidney Dis*.:1-6
- Ronco, C.; Reis, T.and Husain-Syed, F. (2020). Management of acute kidney injury in patients with COVID-19. *Lancet Respir Med.*;8(7):738-742.
- Rose-John, S. (2018). Interleukin-6 family cytokines. Cold Spring *Harb. Perspect. Biol.*, 10.
- Rudiansyah , M.; Lubis, L. and Bandiara, R. (2020). Java Barb Fish Gallbladder–Induced Acute Kidney Injury and Ischemic Acute Hepatic Failure. *Kidney Int. Reports.*,5(5):751-753
- Wu, J.; Li, J.; Zhu, G.; Zhang, Y.; Bi, Z.; Yu, Y.; Huang, B.; Fu, S.; Tan, Y.; Sun, J. and Li, X. (2020).Clinical features of maintenance hemodialysis patients with 2019 1088 CJASN novel coronavirus-infected pneumoniain Wuhan, China. *Clin J Am Soc Nephrol.*, 15: 1139–1145,
- Yang, W., et al., (2020). Clinical characteristics and imaging manifestations of the 2019 novel coronavirus disease (COVID-19): A multi-center study in Wenzhou city, Zhejiang, China. *Journal of Infection.*
- Yin, Y.; Wunderink, R. and MERS, G. (2018). SARS and other coronaviruses as causes of pneumonia. *Respirology*, 23, 130–137.
- Zheng, X.; Yang, H.; Li, X.; Li, H.; Xu, L. and Yu, Q. (2020). Prevalence of kidney injury and associations with critical illness and death in patients with COVID-19, *Clin. J. Am. Soc. Nephrol.*
- Zhou, F. Yu, T. and Du, R. (2020). Clinical course and risk factors for mortality of adult in patients with COVID-19 in Wuhan, China: a retrospective cohort study. *Lancet*; 395: 1054–62.

- Zhu, L.; Gong, N.; Liu, B.; Lu, X.; Chen, D. and Chen, S. (2020). Coronavirus disease 2019 pneumonia in immunosuppressed renal transplant recipients: a summary of 10 confirmed cases in Wuhan, China, *Eur. Urol.*
- Zhu, L. ; Xu, X. ; Ma, K. ;Yang, J. ; Guan, H. and Chen, S. (2020). Successful recovery of COVID-19 pneumonia in a renal transplant recipient with long-term immunosuppression, *Am. J. Transplant*.
- Zou, X.; Chen, K.; Zou, J.; Han, P. Hao, J. and Han, Z. (2020). Single-cell RNA-seq data analysis on the receptor ACE2 expression reveals the potential risk of different human organs vulnerable to 2019-nCoV infection, *Front. Med.* 1–8.