

Intimidation of Bacterial and Viral Infections in Humans

Prabhakar Reddy Veerareddy*

Palamuru University, India

***Corresponding author:** Prabhakar Reddy Veerareddy, University College of Pharmaceutical Sciences, Palamuru University, Mahabubnagar, Telangana State, India;

Email: vpreddyindia@gmail.com

Editorial

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Viruses are very small microorganisms, size range from 15 to 400 nm. Viruses cause a huge variety of diseases in animals, plants and humans. Viruses can be transmitted in diverse ways, when an infected person coughs by droplets, by contamination with stool samples, by sexual intercourse, by contact with blood, by contact with infected animals [1]. Bacterial and viral infections have a lot of things are in common. Both types of infections are caused by microbes (bacteria and viruses). Microbes cause coughing, sneezing, acute and chronic infections. Bacterial and viral infections also cause mild, moderate and severe diseases. Drews et. al, reviewed 1341 cases of respiratory viral infections detected with conventional techniques [2]. The mechanisms of bacteria and virus interactions were occurring either in the gastrointestinal tract or upper respiratory tract [3]. Bacterial and virus interactions are complex which results in enhanced pathogenesis and many papers have recognized the bacterial inhibition of viral infection [4]. Respiratory viruses follow recurring patterns of activity and cause pneumonia. Several viruses can be circulating at definite times of the year during the main epidemic peaks of one virus [5]. American Thoracic Society recommends that the diagnosis of pneumonia must be arranged on the basis of chest radiography [6]. Influenza vaccines used since 1940 and recognized as a role model in the obstacle of influenza A and B virus infections. Inactivated influenza vaccine is effective in young children (less than 3 years) [7]. Opportunities are very less in clinical observation for use of antiviral in the management of pneumonia [8]. Live-attenuated vaccines formed by reverse genetics are now in clinical studies [9]. World Health Organization (WHO) case definitions of surveillance of severe acute respiratory syndrome (SARS) were inevitable for surveillance [10]. The strategy for treatment in children with SARS was antibiotics and

ribavirin with or without corticosteroids at different stages of the disease conditions [11]. Samples collected during an influenza type A epidemic in Britain (1989-1990) and cultured in MDCK cells, aspirates were cultured in LLC-MK2 cells. Nasal aspirates were cultivated in Ohio HeLa, clone 16 cells and HEp-2 cells [12]. The cytopathic effect of an isolate was established by acid stability testing, 5 immunofluorescence, electron microscopy or haemadsorption [13]. Earlier studies of upper respiratory infections has recommended that exposure with cell cultures missed many infections [14]. These were considered to be mostly rhinoviruses or undiscovered agents. Some Viral diseases are connected with defects in cellular immunity will reflect to reduce in the number of functional T cells [15]. Epidemic diarrhoea in infant mice (EDIM) is transmitted by airborne droplets [16] and rotavirus infection has related with respiratory symptoms in humans [17]. 2.5 Million People had hepatitis A virus (HAV) after consumption of contaminated clams in Shanghai, China [18]. Norovirus (NoV) is the frequent reason of gastroenteritis in all age group of people [19]. NoV infections can be diagnosed by image of virus particles by electron microscopy and RT-PCR methods. Hepatitis E virus (HEV) variants were found in pigs and also found similar virus in some humans [20]. The prevention and detection of food borne viral infections should be evaluated vigilantly by WHO, NGOs and governments. Food service persons and catering Managers need to exclude food handlers with infectious symptoms to food borne diseases [21]. A small number of diarrheal diseases in the USA are recognized to bacterial pathogens [22].

Amebiasis caused by zoonotic protozoan parasite effect in no clinical symptoms from colitis, abscesses in the brain, liver and lungs. Humans and 240 species of

extant nonhuman primates are vulnerable to bacterial infections like salmonellosis, tuberculosis, campylobacter and shigellosis [23].

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