

SARS-CoV-2: Treatment and Therapeutic Approaches

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Abstract

Actually there are no specific treatment approach for COVID-19 and most of the cases treated with supportive conventional treatment such rest; parenteral fluids, pain reliever, cough medication and cytokines storm treatment. Many drugs used on personal experience were used and there is no clinical trial for their evaluation. In Iraq, the Ministry of Health (IMH) recommended the use of the protocol that included combination of hydroxuchloroquine, azithromycin, Tamiflu (Oseltamivir), Kaletra (Lopinavir+Ritonavir)

and antibiotics according to patients need. Additionally, in other geographical areas some expert recommended the use of Remdesivir which may be of promising clinical outcome.

Keywords: SARS-CoV-2, SARS-CoV, MERS-CoV, COVID-19, 2019-nCoV, Azithromycin, Coronaviruses, Pandemic COVID-19, Hydroxuchloroquine, Tamiflu (Oseltamivir), Remdesivir, Kaletra (Lopinavir+Ritonavir).

Introduction

Actually there are no specific treatment approach for COVID-19 and most of the cases were treated with supportive conventional treatment such rest, parenteral fluids, pain reliever, cough medication and cytokines storm treatment. Many drugs used on personal experience were used and there is no clinical trial results for their evaluation. In Iraq, the Ministry of Health (IMH) recommended the use of the protocol as shown in Table 1.

Table .1. COVID-19 Treatment protocol in Iraqi hospital [1].

Drug	Dose	Indication
Hydroxychloroquine	400 mg BID 1 st day and then 200 mg BID for 14 days	SARS-CoV-2 positive with pneumonia in ICU
Azithromycin	500 mg BID 1 st day and then 250 mg BID for 14 days	
Tamiflu (Oseltamivir)	75 mg twice daily for 5 days	
Kaletra (Lopinavir+ Ritonavir; 200/50 mg)	2 tabs PO BID for 5 days	
Antibiotics		Accordingly

In mild cases, there is no need to use antiviral agents, however in moderate cases IMH recommended the use of combination of Oseltamivir (Tamflu) with either Chloroquine or Hydroxychloroquine or Ribavirin. While in severe cases, the combination of Kaletra plus

Oseltamivir with either Chloroquine or Hydroxychloroquine or Ribavirin. In addition, in critical cases, course if combination of Kaletra + Oseltamivir + Ribavirin with either Chloroquine or Hydroxychloroquine. To date there are no data available that confirm their effectiveness in the treatment of COVID-19.

Drugs under testing for their Anti-SARS-CoV-2 activity

Globally, there are more than two hundreds (6 April, 2020) of clinical trials registered in the official sites of clinical trials [2] undergoing evaluation of their effectiveness as treatment approach for SARS-CoV-2 infection. COVID-19 is the first infectious health problem that takes the attention of WHO, world leaders, non-governmental organization, social media and whole world societies, even the children. The world is now desperate to find ways to slow the spread of the novel coronavirus and to find effective treatments. The drugs under evaluation included previous drugs that were used previously in the treatment of malaria, HIV, parasitic disease, and viral infections, Table 2 [3-7]. Tu et al [7]. Fortunately, the drugs and chemical agents listed in Table 2, which are under testing for their antiviral activity, are with varied mechanisms of antiviral activity. However, to early so suggest a novel antiviral agent against SARS-CoV-2 infection.

COVID-19 treatment is the major challenge as the disease mortality is around 7% (estimated at 25th April 2020 cases). Gordon et al [3], in their study reported that human proteins interacted with SARS-CoV-2 proteins with multiple functions that include epigenetic and gene expression regulators (Nsp5, Nsp8, Nsp13, E), DNA replication (Nsp1), vesicle trafficking (Nsp6, Nsp7, Nsp10, Nsp13, Nsp15, Orf3a, E, M, Orf8), signaling (Nsp8, Nsp13, N, Orf9b), RNA processing and regulation (Nsp8, N), ubiquitin ligases (Orf10), lipid modification (Spike), nuclear transport machinery (Nsp9, Nsp15, Orf6), mitochondria (Nsp4, Nsp8, Orf9c), cytoskeleton (Nsp1, Nsp13) and extracellular matrix (Nsp9). These host virus interactome could be a novel target for drugs such as chloroquine [79,114]. However, the researcher not identified the mechanisms by which chloroquine acts in COVID-19 cases. One explanation is that chloroquine targeted Sigma 1 and Sigma 2 receptors [3]. Azithromycin, Tigecycline Linezolid and chloramphenicol antibiotics exerted their effects against human ribosomes, components of which interact with the Nsp8 protein of

SARS-CoV-2 [3,115,116]. ACE2 inhibitors and non-steroidal antiinflammatory drugs may be tested for their role as treatment approach of COVID-19.

Table 2. Drugs and Chemical Substances that modulates SARS-CoV-2 interactors.

Drug/ Compound	Human gene	Viral target	Reference
Haloperidol	SIGMAR1; TMEM97	Nsp6; Orf9c	8
JQ1	BRD2/4	Envelop	9
RVX	BRD2/4	Envelop	9
Sinitasertib	CSNK2A2	Nucleocapsid	10,11
TMCB	CSNK2A2	Nucleocapsid	12
Apicidin	HDAC2	Nsp5	13
Valproic acid	HDAC2	Nsp5	14,15,16
Bafilomycin A1	ATP6AP1 ATP6V1A	Nsp6 Membrane	17
E-52862	SIGMAR1	Nsp6	18
PD-144418	SIGMAR1	Nsp6	19
RS-PPCC	SIGMAR1	Nsp6	20
Pb28	SIGMAR1 TMEM97	Nsp6 Orf9c	21
Etacapone	COMT	Nsp7	22,23
Indomethacin	PTGES2	Nsp7	24
Metformin	NDUFs	Nsp7, Orf9c	25
Ponatinib	RIPK1	Nsp12	26
H-89	PRKACA	Nsp13	27
Merimepodib	IMPDH2	Nsp14	28
Migalastat	GLA	Nsp14	29
Mycophenolic acid	IMPDH2	Nsp14	30
Ribavirin	IMPDH2	Nsp14	31
XL413	DNMT1	Orf8	32
CCT365623	LOX	Orf8	33
Midostaurin	MARK2/3	Orf9b	34
Ruxolitinib	MARK2/3	Orf9b	35
Zinc 1775962367	DCTPP1	Orf9b	36
Zinc 4326719	DCTPP1	Orf9b	37
Zinc 4511851	DCTPP1	Orf9b	38
Zinc 95559591	MARK3 TBK1	Orf9b Nsp13	39

AC55541	F2RL1	Orf9c	40
AZ8838	F2RL1	Orf9c	41
AZ3451	F2RL1	Orf9c	41
Daunorubicin	ABCC1	Orf9c	42
GB110	F2RL1	Orf9c	43
S-Verapamil	ABCC1	Orf9c	44
ABBV-744	BRD2/4	Envelop	45
dBET6	BRD2/4	Envelop	46
MZ1	BRD2/4	Envelop	47
CPI-0610	BRD2/4	Envelop	48
Sapanisertib	LARP1	Nucleocapsid	49,50
Rapamycin	LARP1 FKBP15 FKBP7/10	Nucleocapsid Nsp2 Orf8	50,51
Zotatifin	EIF4E2/H	Nsp2	52
Verdinexor	NUPs RAE1	Nsp4 Nsp9/Orf6	53
Chloroquine	SIGMAR1	Nsp6	54
Dabrafenib	NEK9	Nsp9	55
WDB002	CEP250	Nsp13	3
Sanglifehrin	IMPDH2	Nsp14	56
FK-506	FKBP7 FKBP10	Orf8	57
Pevonedistat	CUL2	Orf10	58
Ternatin4	Translation		59
4E2RCat	Translation		60
Tomivosertib	Translation		61,62
Compound 2	Viral Transcription		63
Compound 10	Viral Transcription		64
PS3061	ER protein processing		65
IHVR-19029	ER protein processing		66,67
Captopril	Cell entry		68
Lisinopril	Cell entry		69
Camostat	Cell entry		70,71
Nafamostat	Cell entry		70,72
Chloramphenicol	Mitochondria l ribosome		73

Tigecycline	Mitochondria l ribosome		74
Linezolid	Mitochondria l ribosome		75
Emtricitabine/ Tenovir			2
Hydroxychloroquine	Blocking virus-cell membrane fusion		2
Remdesivir		RNA- dependent- RNA polymerase	76- 80
Favibiravir ChiCTR2000029600		RNA – dependent RNA polymerase	81
Ivermectin		Viral protease	82-85
Lopinavir/ Ritonavir		Viral protease	78,86
APNO1 [Recombinant Human ACE2]	Blocking virus-cell membrane fusion		87,88
Hydroxychloroquine	Blocking virus-cell membrane fusion		89-92
Arbidol Hydrochloride [Umifenovir]	Blocking virus-cell membrane fusion		93,94
NK cells	Enhancing innate immunity		95
Recombinant interferon I			96,97
Mesenchymal Stem Cells	Attenuating Inflammatory Response		98,99
Intravenous Immunoglobulin	Attenuating Inflammatory Response		100

SARS-CoV-2-Specific Neutralizing Ab	Attenuating Inflammatory Response		101,102
Anti-C5a Monoclonal Ab	Attenuating Inflammatory Response		103
Blocking Interleukin-6 pathway	Attenuating Inflammatory Response		104-108
Thalidomide	Attenuating Inflammatory Response		109,110
Methyprednisolone	Attenuating Inflammatory Response		7
Fingolimod	Attenuating Inflammatory Response		111
Bevacizumab	Symptomatic control		112
EIDD-2801		Nsp15, Orf1	113
Combination of oseltamivir, favipiravir, and chloroquine		Protease	2
ASC09F + oseltamivir vs Ritonavir + oseltamivir vs Oseltamivir		Protease	2
Abidol hydrochloride vs Oseltamivir vs Lopinavir/Ritonavir		Protease	2

Modified from Gordon et al [3], ChEMBL [4], ZINC [5] and IUPHAR/BPS Guide to pharmacology [6], Tu et al [7]

In a recent study by Zhou et al.,[117] perform an integrative analysis of interactome networks associated with human coronaviruses and drugs targeting the components of these networks was applied to reveal 16 novel candidates for drug repurposing.

Zhou et al [117], presented a network-based methodology for systematic identification of putative repurposable drugs and drug combinations for potential treatment of SARS-CoV-2/2019-nCoV.

Integration of drug–target networks, HCoV–host interactions, HCoV induced transcriptome in human cell lines, and human protein–protein interactome network are essential for such identification. They suggested three potential drug combinations and sixteen repurposable drugs [Table.3], for targeting SARS-CoV-2/2019-nCoV. Although there is evidence reported in literature that predict their antiviral activity [Table 3], however, these suggested combinations and drug must be tested against SARS-CoV-2 in vitro and in clinical trials in animal models before their use in human.

Tu et al [7], in a review summarized the ongoing clinical trials of drugs against SARS-CoV-2 that are effective against other viruses. The drugs targets of action included: inhibition of the RNA-dependent RNA polymerase, inhibition of viral protease, blocking virus-cell fusion, enhancing the innate immunity, attenuating the inflammatory response, and symptomatic control. In addition, the evaluation of SARS-CoV-2 genome derived vaccines [Table 4]. These drugs either acting directly on virus replication, or as immunotherapy to potentiate innate immunity or by acting as inflammatory response dysregulator.

Gordon et al [3] in an extensive study identified 67 human proteins in host pathways targeted by 69 existing compounds currently being investigated or FDA-approved drugs [Table 2]. According to their study findings they suggest that SARS-CoV-2 during its replication cycle inhibit host innate immune response. Additionally, ubiquitin system may be a novel target for antiviral agents that to be tested for their activity on SARS-CoV-2. They suggested that Bafilomycin A1, Valproic acid, Apicidin, Haloperidol, Chloroquine, Centriole (CEP250), mycophenolic acid, Ribavirin, Merimepodib, Sanglifehrin A, Sapanisertib, Rapamycin and Metformin may be of predictive value in treating COVID-19.

Vaccine is the novel approach for control and prevention of viral infections including SARS-CoV-2, SARS-CoV, and MERS-CoV. However, the development of effective vaccine takes a long period. Vaccine development influenced by many factors such the safety, vaccine material antigenicity, coronaviruses diversity, and SARS-CoV-2 strains variation. At present (30th, April, 2020) there are more than 110 SARS-CoV-2 vaccines developed by universities and companies research groups under evaluation [118,125, Table 5]. In

order to induce an effective immune response that prevent infection or kill the virus after infection, 9 approaches were used in clinical trials or animal model. These approaches include: weakened virus vaccine, inactivated virus vaccine, replicating virus-vectors vaccine (weakened measles), non-replicating virus-vector vaccine (adenovirus), RNA vaccine, DNA vaccine, protein sub-unit vaccine, virus-like particles, and vaccines that used previously for other infectious diseases (BCG and polio vaccine) [118].

The vaccine activity map distribution of the active SARS-CoV-2 candidates at 9 th April, 2020, were in North America (36, 46%), in China (14, 18%), in Asia (excluding China, 14, 18%) and Australia, and in Europe (14, 18%) [119]. The vaccine development is a long lasting journey, difficult and expensive. "WHO has repeatedly warned countries against relying on a vaccine to end the current situation" [120]. However, we hope to develop an effective SARS-CoV2 to control or ameliorate the pandemic of the disease.

Sheahan et al [113] reported that EIDD-2801, a ribonucleoside -d-N4 β analogue -hydroxycytidine has broad-spectrum antiviral activity against SARS-CoV, MERS-CoV, SARS-CoV-2, 2b or 2c bat-CoVs, and coronaviruses strains resistance to Remdesivir. The compound induced genetic mutations in viral RNA which attributed to inability of the virus to infect cells. In addition, to its broad-spectrum antiviral activity, the oral bioavailability of the drug addressed the suggestion of its potential antiviral activity against SARS-CoV-2 [113]. From the information mentioned in the above Tables, we concluded that the antiviral research concentrated on the drugs and compounds presented in Table 6. These compounds will induce the basic arms of the management of COVID-19 which include; antiviral activity, prevention of cytokines storm, attenuation of inflammatory responses, and enhancement of immune response.

In conclusion, although there are a global research works that evaluate the effectiveness of drugs/compound as therapeutic approach for COVID-19, however, to date none found to be with promising effect. Additionally, the vaccine evaluation takes a long period until the development of novel potential vaccine. The best approach to find an effective drug against SARS-CoV-2 infection is to test new compounds, not to rely on the testing of that used in another virus's treatment. The novel drugs are that which prevent viral attachment

with the host cell to get rid of immune and inflammatory harmful responses.

Table 3. Network-predicted repurposable drugs [118].

Drug name	Clinical use	Antiviral activity
Irbesartan	Antihypertensive	HBV, HDV
Toremifene	Antineoplastic	EBOV, MERS-CoV, SARS-CoV
Camphor	Antipruritic, Anti-infective	H1N1
Equilin	Estrogen	ZEPOV-GP/HIV
Mesalazine	Anti-inflammatory	EBV
Mercaptopurine	Antimetabolite, Antineoplastic	MERS-CoV, SARS-CoV
Paroxetine	Selective serotonin reuptake inhibitor	EBOV
Sirolimus	Immunosuppressant	ANDV, HCV
Carvedilol	Beta-blocker	EMCV
Colchicine	Anti-inflammatory	EBV
Dactinomycin	Antineoplastic	FECV
Melatonin	Hormone	EBOV, RSV
Quinacrine	Antimalarial, Antibiotic	EV71, EBOV
Eplerenone	Diuretic	Viral myocarditis
Emodin	Anthraquinones	HSV-1, HSV-2, HBV, CB4, SARS-CoV
Oxymetholone	Anabolic steroid	HIV
Sirolimus plus Dactinomycin		
Toremifene plus Emodin		
Mercaptopurine plus Melatonin		

CVB4 Coxsackievirus B4, HBV hepatitis B virus, HSV-1 and -2 herpes simplex viruses, HCV hepatitis C virus, EV71 enterovirus 71, HDV hepatitis delta virus, RSV respiratory syncytial virus, EBOV Ebola viruses, FECV feline enteric coronavirus, ZEBOV-GP Zaire Ebola virus glycoprotein, EMCV encephalomyocarditis

virus, HIV human immunodeficiency virus, ANDV Andes orthohantavirus, EBV Epstein-Barr virus.

Table 4. Targeted sites/ functions of the present clinical trials [7].

Target / Function	Drug / Chemical substance
Inhibiting the RNA-dependent RNA polymerase	Remdesivir
	Favipiravir
Inhibiting the viral protease	Ivermectin
	Lopinavir/Ritonavir
Blocking Virus–Cell Membrane Fusion	Recombinant Human Angiotensin-converting Enzyme 2 (APN01)
	Hydroxychloroquine
	Arbidol Hydrochloride (Umifenovir)
Enhancing the innate immune system	Natural Killer Cells
	Recombinant interferon
Attenuating the Inflammatory Response	Mesenchymal Stem Cells
	Intravenous Immunoglobulin
	SARS-CoV-2-Specific Neutralizing Antibodies
	Anti-C5a Monoclonal Antibody
	Blocking the Interleukin (IL)-6 Pathway
	Thalidomide
	Methylprednisolone
Symptomatic Control	Fingolimod
	Bevacizumab
Vaccine	mRNA-1273
	INO-4800
	ChAdOx1 nCoV-19
	Stabilized Subunit Vaccines
	Nanoparticle-Based Vaccines
	Pathogen-Specific Artificial Antigen-Presenting Cells

Table 5. SARS-CoV-2 [COVID-19] vaccines ongoing trial

Vaccine	Clinical Trial Code	Reference
mRNA-1273	NCT04283461	7
INO-4800		7,97,98
ChAdOX1 nCoV-19	NCT04324606	7,125
Stablized- Subunit vaccine		7,121
Nanoparticle-Based vaccine		7,122
Pathogen-Specific-Artificial Antigen- Presenting Cells	NCT04299724	7, 123
CORVax12		124
Ad5-nCoV	NCT04313127	2
LV-SMENP-D	NCT04276896	2
Adenovirus 5 vector	ChiCTR2000031781; ChiCTR2000030906	125
DNA plasmid vaccine with Electroporation	NCT04336410	125
Inactivated	ChiCTR2000031809	125
Inactivated		125
mRNA	2020-001038-36	125
LNP - encapsulated mRNA	NCT04283461	125
DNA with electroporation		125
DNA plasmid vaccine		125
DNA vaccine		125
DNA vaccine		125
DNA vaccine		125
Plasmid DNA, Needle-Free Delivery		125
DNA plasmid vaccine		125
Inactivated + alum	NCT04352608	125
Inactivated		125
TBD		125
Inactivated + CpG 1018		125
Inactivated + CpG 1018		125
Codon deoptimized live attenuated vaccines		125

Codon deoptimized live attenuated vaccines		125
MVA encoded VLP		125
Replication defective Simian Adenovirus (GRAd) encoding SARS-CoV-2 S		125
Ad26		125
MVA-S encoded		125
Adenovirus-based NasoVAX expressing SARS2-CoV spike protein		125
Ad5 S (GREVAX™ platform)		125
Oral Ad5 S		125
Adenovirus-based + HLA matched peptides		125
Oral Vaccine platform		125
MVA expressing structural proteins		125
Dendritic cell-based vaccine		125
Parainfluenza virus 5 (PIV5) –based vaccine expressing the spike protein		125
Recombinant deactivated rabies virus containing S1		125
Capsid-like Particle		125
Drosophila S2 insect cell expression system VLPs		125
Peptide antigens formulated in lipid nanoparticle formulation		125
S protein		125
S protein +Adjuvant		125
VLP recombinant protein + Adjuvant		125
Native like Trimeric subunit Spike Protein vaccine		125

microneedle arrays S1 subunit		125
Peptide		125
Adjuvanted protein subunit (RBD)		125
Peptide		125
S protein		125
Ii-Key peptide		125
S protein		125
S protein (baculovirus production)		125
Full length recombinant SARS CoV -2 glycoprotein nanoparticle vaccine + Matrix M		125
gp-96 backbone		125
Molecular clamp stabilized Spike protein		125
Peptide vaccine		125
S1 or RBD protein		125
Subunit protein, plant produced		125
Recombinant protein, nanoparticles (based on S protein and other epitopes)		125
COVID-19 XWG-03 truncated S (spike) proteins		125
Adjuvanted microsphere peptide		125
Synthetic Long Peptide Vaccine candidate for S and M proteins		125
Oral E.coli-based protein expression system of S and N protein		125
Nanoparticle vaccine		125
Recombinant spike protein		125

with Advax adjuvant		
Spike –based		125
Recombinant S1-Fc fusion protein		125
Recombinant protein		125
Recombinant S protein in IC-BEVS		125
YF17D Vector		125
Measles Vector		125
Measles Vector		125
Measles Vector		125
Measles Virus (S, N targets)		125
Horsepox vector expressing S protein		125
Live viral vectored vaccine based on attenuated influenza virus backbone (intranasal)		125
Recombinant vaccine based on influenza A virus (intranasal)		125
Influenza vector expressing RBD		125
Replication- competent VSV chimeric virus technology (VSVΔG) delivering the SARS-CoV-2 Spike (S) glycoprotein		125
VSV-S		125
VSV vector		125
M2-deficient single replication (M2SR) influenza vector		125
LNP encapsulated mRNA cocktail encoding VLP		125
LNP encapsulated mRNA encoding RBD		125

Replicating Defective SARSCoV-2 derived RNAs		125
LNP encapsulated mRNA		125
Liposome encapsulated mRNA		125
Several mRNA candidates		125
mRNA		125
mRNA		125
mRNA		125
SaRNA		125
mRNA		125
mRNA in an intranasal delivery system		125
Virus-like particle, based on RBD displayed on virus-like particles		125
Plant-derived VLP		125
ADDomer™ multiepitope display		125
Unknown		125
VLP		125
Evlp		125
Unknown		125
Unknown		125
Unknown		125

Table 6 . Suggested Antiviral agents for evaluation against SARS-CoV-2.

Agent	Target	Reference
Emodin	ACE-2	126
α-Ketoamides	Viral protease	127
Corticosteroids	Attenuate inflammation	128
Corticosteroid ciclesonide	Nsp15	129
Remdesivir+ Hydroxychloroquine	RdRp/ Block Virus-Cell membrane fusion	7,130
Remdesivir + INFb	RdRp	131
Remdesivir + Ivermectin	RdRp/ Viral protease	7,131
Remdesivir +ACE-2 inhibitors	RdRp/ ACE-2 inhibition	132
Lamivudine	RdRp	133
Tenofovir disoproxil	RdRp	132
Emtricitabine, Alovudine, Apricitabine, Zidovudine, Stavudine and / or Zalcitabine	RdRp	132
Lopinavir/Ritonavir	Protease	134-136
Nanoparticle Antiviral Agents Delivery	Multiple	137
SARS-Cov-2- specific human monoclonal antibody	RBD	138
Cyclosporin A	Protein synthesis	139
D, L-lysine acetylsalicylate+glycine	Protein synthesis, RNA polymerase, Transcription	140
Saquinavir and Beclabuvir	Protease	141
Soluble recombinant ACE-2	ACE-2	142
Plant lectin	Entry	143
Zn	RNA polymerase	144
Neutralizing Antibodies Targeting S protein	Entry	145

small interfering RNA (siRNA) or antisense oligonucleotides (ASO)	RNA genome	145
ACE2 Fc	S protein	145
Flavonoids	Protease Enhance Immunity	146
IQ-SAM (1,2,3 and 4)	Protease Spike protein	
Favipiravir	RdRp	147
Umifenovir (Arbidol)	Membrane fusion	148
EIDD-2801	Genome incorporation	113

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