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## Correspondence

## Neutrophils as a pallbearer for SARS-CoV-2 disease burden

We read the Article by Bernadette Schurink and colleagues,1 and were impressed, similar to the authors, with the heterogeneity of the invasion of end organs by neutrophils, despite a severe and systemic COVID-19 disease burden among the study sample. In other words, it is unclear why some organ systems among patients with COVID-19 are affected more extensively compared with others, despite the assertion of this Article that organ damage is predicated by a reactive infiltrate, perhaps independently of the presence of the replication of active severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in the specific tissue.

Because there is evidence to suggest that the SARS-CoV-2 entry receptor,<sup>2</sup> ACE2, also has a role in mediating immune cell activity,<sup>3</sup> with the use of RNAseq data from GSE150316<sup>4</sup> we correlated ACE2 expression from 17 lung specimens from autopsies of patients with SARS-CoV-2 normalised, and derived the ontology of the top 1% of differentially expressed genes. We found a significant correlation of ACE2 expression with neutrophil activation (p<0.0001; appendix).<sup>5</sup> This finding provides support for the work by Schurink and colleagues, but does not conclusively establish this association.

Accordingly, we wondered if Schurink and colleagues have any histological evidence within their data to suggest that variation in ACE2 might serve as a crucial intermediary to end-organ infiltration by inflammatory cells, and consequent disease severity, in response to a SARS-CoV-2 infection.

We declare no competing interests

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See Online for appendix