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cases had connection of AKI with previous COVID-19. In addition, they all had SIRS markers, corresponding diagnostic criteria of SARS-Cov2 associated multisystem inflammatory syndrome.

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Evaluation of neutrophil to lymphocyte ratio as a predicted marker for the assessment of severe Coronavirus Disease-19 patients under a resource-constrained setting

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Purpose: Analysis of clinical and laboratory markers are critical to determining the disease severity in Coronavirus Disease-19 (COVID-19) patients. The purpose of this study was to evaluate neutrophil to lymphocyte ratio (NLR) as a predicting marker of severe COVID-19 cases under the resource-constrained setting.

Methods & Materials: This retrospective cross-sectional study was conducted among the purposively selected 71 COVID-19 patients admitted to the COVID hospital of the Bangabandhu Sheikh Mujib Medical University (BSMMU) from March 2021 to May 2021. The study population was grouped into mild to moderate COVID-19 (n=25) and Severe COVID-19 (n=46) patients based on the World Health Organization (WHO) COVID-19 disease severity classification. The predictive performance of the NLR for the assessment of severity in the COVID-19 population was determined by generating receiver operative characteristics (ROC) curves to obtain the best cut-off value.

Results: Among the study populations, none of the studied laboratory parameters was found to significantly varied between the mild to moderate and severe COVID-19 patients group except NLR. NLR values in severe COVID-19 patients (median: 12.57, IQR:3.79-18.6) were found significantly higher ($P<0.01$) than that of the mild to moderate COVID-19 group (median: 3.45; IQR: 2.71-8.16). Based on the ROC curve analysis, the best cut off value to determine the severe COVID-19 cases over mild to moderate COVID-19 patients was 4.26 with a sensitivity and specificity of 71.1% and 52.4% respectively. The area under the curve (AUC) was 0.701 with a 95% confidence interval (95% CI) of 0.557 to 0.845.

Conclusion: This study demonstrated NLR as a low-cost laboratory predictor for the assessment of disease severity in COVID-19 patients that can be utilized under resource constraints settings.

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Long COVID-19 - a pathology of concern

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Purpose: COVID-19 is an infectious disease that has been concerning the entire medical world for more than a year. But in addition to the severity of the acute phase, more people who have experienced non severe forms of acute infection suffer from a polymorphic clinical features that gradually begins in the subsequent weeks after acute episode and persists for weeks and months after.

Methods & Materials: A 6-month prospective study from January to June 2021, was conducted in a private practice for Infectious Diseases, Oradea, Romania. The study's outcome was the identification and follow-up of a set of clinical manifestations occurring one month after a non-severe acute episode of COVID-19. The statistical analysis was performed by Software SPSS (Statistical Package for the Social Sciences), version 26.

Results: A total of 75 patients were available for analysis. We identified fatigue in 33.33% (25), anxiety in 40% (30), depression in 13.33% (10), brain fog in 20% (15), fever in 20% (15), anosmia in 13.33% (10), dysgeusia in 6.66% (5), cough in 26.66% (20), dyspnoea in 21.33% (16), chest pain in 4 (5.33%), rash in 4% (3), hair loss in 33.33% (25), dizziness in 6.66% (5), hypotension in 28% (21), arrhythmias in 2.66% (2), diarrhoea in 42.66% (32), peripheral limb ischemia in 1.33% (1) cases, in the period between 4 to 12 weeks after acute COVID-19. The following clinical features were reported after 12 weeks from acute episode: brain fog in 6.66% (5), fever in 1.33% (1), cough in 5.33% (4), dyspnoea in 9.33% (7), hair loss in 4% (3), hypotension in 2.66% (2), diarrhoea in 12% (9) cases. A direct positive statistically significant correlation between the patients' age and the number of clinical features has been registered ($r=0.29$, $p=0.010$).

Conclusion: The long COVID-19 leads to negative socio-economic and medical effects for people who have suffered from COVID-19. The effects intensify as patients age.

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Descriptive Study On Starvation Ketoacidosis In Covid-19 Obstetric Patients In A Tertiary Hospital in Central Region of Malaysia

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Purpose: This study describes the presentation of starvation ketoacidosis in cases of pregnancy related Covid 19 pneumonia and their outcomes toward Cytokine Release Syndrome (CRS), Intensive Care Unit (ICU) admission, overall maternal and fetal outcome.

Methods & Materials: Prospective study on all obstetric admissions for Covid 19 pneumonia in a tertiary hospital in central region of Malaysia (Hospital Ampang) from 1st July to 31st August 2021 was done. Starvation ketoacidosis cases as defined as serum bicarbonate less than 20mmol/L, with serum ketone of more than 3mmol/L or urine ketone more than 4+ were selected. Their outcome related to CRS, ICU admission and fetal outcome was monitored. Patients with incomplete data, and other cause of metabolic acidosis were excluded from this study.

Results: 31 patients been isolated to have starvation ketoacidosis based on our study criteria. The median age of our study population was 31 years old. Patients mostly presented in stable condition before the onset of starvation ketoacidosis whereby 23 cases (74.19%) presented with Category 1 to 3 Covid-19 infection and only 8 cases (25.81%) require oxygen (Category 4) on presentation. Starvation ketoacidosis has commonly been observed in gestational diabetes mothers (61.29%) and those with obesity (51.61%). It happened mostly at day 6 to day 10 of covid infection (54.83%) with commonly lower CRP count of less than 50 (61.29%) during onset