The irreplaceable role of coronavirus carriers in its transmission and in second wave of infection

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Abstract

At present, the fight against the virus is focused on early diagnosis and vaccination, which are indispensable and essential methods in finding a viable solution. However, these are virtually defensive reactions. The virus reigns. We have turned the parasite into the king, practically having become its hostages. The new coronavirus pandemic is not over yet. The second wave has hit and is in full swing, with the third wave lurking around the corner or having already erupted. In most parts of the world, the second wave has proven to be much stronger than what we saw in spring 2020. There is a general perception that the definition of the second wave cannot be adequately expressed as there remains a lot of uncertainty and ambiguity, even among the scientific community. However, this phenomenon needs to be explained as it will help clarify the pandemic of the new coronavirus.

Keywords: coronavirus epidemic; second wave of infection; virus carriers, virus elimination; intestinal track; rectal infection

1. Introduction

Every virus is a parasite that cannot exist on its own and is fully dependent on its carrier. This is the basic condition of its existence. Very little is still known about how viruses can be transmitted between different species and eventually spread to humans. The parasite must have its host and that is a living cell. It is generally claimed that a virus can exist without a carrier for 2 to 5 seconds, during which it transmits to another species. But this contradicts the basic dogma which says that the virus cannot exist without a living cell. Following these viral pathways is not easy and has not been fully investigated. However, this is a key issue that can lead to a major paradigm shift in the way we perceive viruses. The mechanism of virus transmissions and thus of the new coronavirus has not been examined in sufficient detail. It is generally accepted that the virus must have its primary host and carrier. These cannot be cells of the host's organs because the virus could damage them easily. In terms of the mechanism of existence and transmission, the following could be the most suitable carriers of the virus: bacteria, yeast or other single-cell organisms.

Based on work with bovine leukemia virus (BLV) in the stables, we monitored the course of infection in healthy animals and concluded that a bacterial cell can be the host the virus. We tested this assumption and confirmed the results. This idea was then tested on the HIV model. Even with this virus, we have been able to prove that its host may be bacteria. Evidence was confirmed at the DNA level by hybridization and PCR using commercial, diagnostic primers and consequent sequencing [1-11]. At the protein level, HIV-like proteins were confirmed by using commercial monoclonal antibodies against HIV antigens. In the swab of HIV-positive children from Cambodia and Kenya, HIV was found in commensal bacteria [1-11], but it is also often found in the yeast Candida albicans.
These results led us to conclude that many, if not all viruses can be transmitted by bacteria, or by yeast. If all, the coronavirus. A virus, just like a parasite, is not a full-fledged biological form and thus hard to fight. Its main weakness is that it is hosted by bacteria or yeast and a new strategy for its elimination should be based on this basis. If we accept this possibility of transmission we move further in issue of the carrier, because all the above-mentioned one-cell organisms meet the necessary attributes. The virus selects a carrier that will allow it to exist, multiply, and transfer to another suitable host. In what form is the virus released from its primary host and transferred to the other host? Either as the virus itself, or it moves there in its carrier. If we suppose that the virus will travel using the carrier, then for the new host, the virus carrier must be acceptable. Bacteria or yeast have proven to be very suitable because these microbes are a universal part of any higher organism and the chances of the microbe being compatible with a new host are considerable. The transmission time limited by the life of the carrier can be much longer than 5 seconds [12,13]. If we entertain the possibility that the virus is transmitted without a carrier, the transmission time is relatively short. The likelihood of meeting an acceptable host in such a short time is tremendously small. After transmission to humans, the coronavirus travels to cells of the respiratory tract that contain the ACE2 receptor. Upon contact of viral tentacles with this receptor, the virus is released from the carrier and penetrates the receiving cell of the respiratory tract, where the process of tissue destruction occurs.

2. Conclusion
After overcoming the infection and eliminating the virus in the recipient's lung cells by a conventional drug-based treatment approach such as ventilation and activation of the immune system, the infection is suppressed and the patient can be pronounced cured. However, the bacteria or yeast containing the virus survive in the intestinal tract and can multiply under optimal conditions and they then penetrate the body. People after having been infected may become carriers of the coronavirus and thus may infect others by secreting the coronavirus in the form of droplets, but also in faeces. Surprisingly, no attention is currently being paid to a possible fecal infection. However, history provides us with a lot of evidence about the importance of disinfection and disposal of faeces during epidemics, e.g. in the Old Testament, in the First book of Moses, where detailed instructions are mentioned. This important approach has been proven many times in history and has helped to overcome epidemics. It is incomprehensible why, in the current epidemic, this possibility of transmitting infection is absolutely marginal and has not been considered. We have become better at successfully preventing the droplet aspect of this infection with face masks, social distancing and hand washing, however, but we are not yet sufficiently preventing rectal infection. After all, it is this form of virus transmission that can answer the question about what may be the mechanism of induction of the second wave of the infection. Particularly important is administering of suitable antibiotics which eliminate coronavirus carriers in the intestinal and respiratory tract.

Compliance with ethical standards

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References


