



Pulmonary and Critical Care Practice in the Pandemic of COVID-19

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Message from the Guest Editor

Severe acute respiratory syndrome coronavirus-2 (SAR-CoV-2), which is responsible for the coronavirus disease 2019 (COVID-19), has hit the world as a global pandemic at an unparalleled scale, causing considerable morbidity and mortality. Most people with COVID-19 have only mild or uncomplicated symptoms. However, up to 12% of hospitalized patients can progress to critical illness with acute respiratory distress syndrome (ARDS) requiring invasive mechanical ventilation.

The histological features of COVID-19 ARDS are dominated by diffuse alveolar damage, inflammatory cell infiltration, and microvascular thrombosis. Patients with severe COVID-19 present nonspecific hyperinflammatory responses with a markedly elevated number of proinflammatory cytokines and chemokines. This excessive and deleterious host immune response is thought to contribute to multiorgan failure in these patients.

The aim of this Special Issue is to present clinical and scientific reports that improve our understanding provide information about treatment approaches to improve the management and outcomes of these critically ill patients with COVID-19. Original and review articles are welcome.





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