

Coronavirus infection in humans is commonly associated with mild to severe respiratory diseases, with high fever, severe inflammation, cough, and internal organ dysfunction that can even lead to death (92). Most of the identified coronaviruses cause the common cold in humans. However, this changed when SARS-CoV was identified, paving the way for severe forms of the disease in humans (22). Our previous experience with the outbreaks of other coronaviruses, like SARS and MERS, suggests that the mode of transmission in COVID-19 is mainly human-to-human transmission via direct contact, droplets, and fomites (25). Recent studies have demonstrated that the virus could remain viable for hours in aerosols and up to days on surfaces; thus, aerosol and fomites contamination could play potent roles in the transmission of SARS-CoV-2 (257).

The immune response against coronavirus is vital to control and get rid of the infection. However, maladjusted immune responses may contribute to the immunopathology of the disease, resulting in impairment of pulmonary gas exchange. Understanding the interaction between CoVs and host innate immune systems could enlighten our