

specifically in the respiratory tract will help to reduce virus-triggered immune pathologies in COVID-19 (209). The later stages of coronavirus-induced inflammatory cascades are characterized by the release of proinflammatory interleukin-1 (IL-1) family members, such as IL-1 and IL-33. Hence, there exists a possibility that the inflammation associated with coronavirus can be inhibited by utilizing anti-inflammatory cytokines that belong to the IL-1 family (92). It has also been suggested that the actin protein is the host factor that is involved in cell entry and pathogenesis of SARS-CoV-2. Hence, those drugs that modulate the biological activity of this protein, like ibuprofen, might have some therapeutic application in managing the disease (174). The plasma angiotensin 2 level was found to be markedly elevated in COVID-19 infection and was correlated with viral load and lung injury. Hence, drugs that block angiotensin receptors may have potential for treating COVID-19 infection (121). A scientist from Germany, named Rolf Highfeld, has been working on the identification of drugs for the treatment of coronavirus infection since the time of the first SARS outbreak (19).

The SARS-CoV S2 subunit has a significant function in mediating virus fusion that permits entry into the host cell. Heptad repeat 1 (HR1) and heptad