

INTERFERON LAMBDA WITH REMDESIVIR AS A POTENTIAL TREATMENT OPTION IN COVID-19

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Dear Editor,

we read the article by Grein et al. [1] published in New England Journal of Medicine with interest. The new SARS-like coronavirus (now named SARS-CoV-2) that emerged in December 2019 has been shown to be closely related (~88%) to two bat-derived SARS-like CoVs (bat-SL-CoVZC45 and bat-SL-CoVZXC21), with ~79% overall sequence identity to SARS-CoV and ~50% to MERS-CoV [2]. Remdesivir is well known in antiviral treatment of coronaviruses (SARS, MERS) [3], hence its consideration for SARS-CoV-2 therapy. However, we must remember that the coronavirus induces the endogenous expression of IFN- λ and/or blocks IFN- λ , affecting inflammatory responses and mechanisms of tissue damage and repair. The main function of IFN- λ is to prevent viral infection by establishing an antiviral state and, if infected, to slow down viral replication and dissemination. IFN- λ acted as a unique immunomodulatory agent by modifying transcriptional and non-translational neutrophil responses, which might permit a controlled development of the inflammatory process [4]. In vitro, treatment with IFN- λ showed potency against a variety of viruses, including SARS-CoV-1 and MERS-CoV [5], and currently pegylated IFN- λ 1 (peg-IFN- λ 1) is the only IFN- λ currently available as a therapeutic agent.

In summary, to increase the therapeutic effect, it is therefore worth considering combined treatment

of COVID-19 patients by using interferon lambda with Remdesivir.

Conflict of interest

The authors declare no conflict of interest.

REFERENCES

1. Grein J, Ohmagari N, Shin D, et al. Compassionate Use of Remdesivir for Patients with Severe Covid-19. N Engl J Med. 2020 [Epub ahead of print], doi: [10.1056/NEJMoa2007016](https://doi.org/10.1056/NEJMoa2007016), indexed in Pubmed: [32275812](https://pubmed.ncbi.nlm.nih.gov/32275812/).
2. Malik YS, Sircar S, Bhat S, et al. Emerging novel coronavirus (2019-nCoV)-current scenario, evolutionary perspective based on genome analysis and recent developments. Vet Q. 2020; 40(1): 68–76, doi: [10.1080/01652176.2020.1727993](https://doi.org/10.1080/01652176.2020.1727993), indexed in Pubmed: [32036774](https://pubmed.ncbi.nlm.nih.gov/32036774/).
3. Gordon CJ, Tchesnokov EP, Woolner E, et al. Remdesivir is a direct-acting antiviral that inhibits RNA-dependent RNA polymerase from severe acute respiratory syndrome coronavirus 2 with high potency. J Biol Chem. 2020; 295(20): 6785–6797, doi: [10.1074/jbc.RA120.013679](https://doi.org/10.1074/jbc.RA120.013679), indexed in Pubmed: [32284326](https://pubmed.ncbi.nlm.nih.gov/32284326/).
4. Hemann EA, Schwerk J, Savan R. IFN- λ 'guts' neutrophil-mediated inflammation. Nat Immunol. 2017; 18(10): 1061–1062, doi: [10.1038/ni.3834](https://doi.org/10.1038/ni.3834), indexed in Pubmed: [28926532](https://pubmed.ncbi.nlm.nih.gov/28926532/).
5. Mordstein M, Neugebauer E, Ditt V, et al. Lambda interferon renders epithelial cells of the respiratory and gastrointestinal tracts resistant to viral infections. J Virol. 2010; 84(11): 5670–5677, doi: [10.1128/JVI.00272-10](https://doi.org/10.1128/JVI.00272-10), indexed in Pubmed: [20335250](https://pubmed.ncbi.nlm.nih.gov/20335250/).

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