

Sars Virus May Be Mutating Efficacy of Anti-Viral Drug Called Into Question

As scientists discover more about the molecular characteristics of the virus that causes Severe Acute Respiratory Syndrome (SARS), some disturbing facts are emerging.

First of all, this is a hardy virus that can survive for days outside its host. Unlike the HIV or hepatitis C viruses, SARS has many potential transmission routes, which helps explain why so many healthcare workers have contracted it from their patients.

Since the SARS virus can survive on common surfaces at room temperature for hours or even days, people can catch this deadly infection without face-to-face contact with a sick person. One study showed the virus survived for at least 24 hours on a plastic surface at room temperature. This means it might be possible to become infected from touching a tabletop, doorknob or other object.

Disinfecting areas that you touch may be ineffective, as German scientists found a common detergent failed to kill the virus. Japanese scientists concluded that the virus could live for extended periods in the cold, suggesting it could survive the winter.

What has doctors most concerned, however, is that the SARS virus may easily mutate into a form that is resistant to anti-viral therapies. About six samples of the virus have been genetically unraveled and no two are exactly alike. This makes finding an effective vaccine or anti-viral drug therapy that much more difficult.

Physicians initially reported encouraging results with a multi-drug cocktail that included the anti-viral drug ribavirin and an anti-inflammatory corticosteroid drug. SARS patients who were given these drugs in the disease's early stages showed the best response. Initiating anti-viral drug therapy early in a viral disease process has proven efficacy. For example, if a person was exposed to the influenza virus, the FDA approved drug Tamiflu® can prevent most infections if taken before symptoms manifest. If Tamiflu is taken as soon as flu symptoms develop, the average duration of illness can be reduced.

As SARS strikes a growing number of people residing in China, however, it is becoming apparent that some individuals are dying even if they are given ribavirin. A group of French researchers has shown that ribavirin is not useful in killing a version of the SARS virus in cell culture. The Canadian government initially included ribavirin in its SARS protocol, but has withdrawn that recommendation pending further study.

There is so much contradictory information being released about SARS that it is not possible to publish a therapeutic protocol for SARS at this time. In the event a member of The Life Extension Foundation contracts SARS, please call the health advisor help line at 1-800-226-2370 and ask that a Life Extension physician return your call on an emergency basis.

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