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Could Long-Term COVID-X or Autoimmune Disorders be Triggered through the Mechanical Spreading of COVID-X -Virus Invades Bacteria -Self-inclusion-?

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Could Long-Term COVID-X or Autoimmune Disorders be Triggered through the Mechanical Spreading of COVID-X -Virus Invades Bacteria -Self-inclusion-?

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Abstract

We wrote this opinion paper exclusively based on the author's experiences. Its main proposal concerns the possibility that a bacteria may have a couple of units of coronavirus-X inside it. The reasoning is primarily physical, where several coronavirus-X units may fit inside a bacterial body. In such a situation, there is the possibility that units of coronavirus-X can be released into the human body, restarting the virus contamination—long-term coronavirus-X. It is the author's opinion that the virus could also live inside a bacteria.

Introduction

This opinion paper is based exclusively on the author's acquired experiences.

Suppose a bacteria contains a couple of units of coronavirus-X. In that case, units of coronavirus-X can be released into the human body, restarting the virus contamination—long-term coronavirus-X (Balloni, 2023; Balloni & Winter, 2020a, 2020b).

A virus is a nonliving particle that is considered an infectious agent that requires a host for replication. They infect all life forms, including animals, plants, bacteria, and archaea.

While bacteria are considered living organisms, viruses are considered organic structures -rather than living organisms-that interact with living organisms.

Bacteria reproduction happens through binary fission and conjugation. The virus invades the host cell, makes copies of genetic material and proteins, and releases new particles by destroying the cell.

Bacteria cause localized infections. Viruses cause systemic infection. Antibiotics can prevent bacterial infections. Vaccines can prevent virus spread.

Yet, according to Panawala (2017), A virus is a particle considered a nonliving form AND infectious agent. IT REQUIRES host forms, including animals, plants, bacteria, and archaea. Viruses are found in almost every ecosystem on the Earth. Thus, they are the most abundant biological entity type.

It is the author's opinion that the virus may also live inside a bacteria.

Additional Details

From the explanation below (*) and rationalizing in terms of physical dimensions, we know (*) that a BACTERIA can CONTAIN up to 6 units of the coronavirus-X!

* See:

1. diameter of a bacteria: 1 μm and 5 μm = $1x10^{-4}$ to $5x10^{-4}$ cm = 0.0001 - 0.0005 cm - average of 0.0003 cm
2. from the text below (*), we have that the diameter of the coronavirus = 0.00005 cm - therefore, inside a bacteria can be hosted -physically-, up to 6 units of coronavirus,
3. that is

= 0.0003 cm -bacteria-/ 0.00005 -corona virus- = 3/0.5 = 30/5 = 6 units of corona virus.

Suppose This Unit Can Be Contained Or Confined Within The Living Bacteria. In That Case, It Is Possible That When The Bacteria Dies -or even before it dies, depending on the health aspects of the human being- The Virus Contained/Confined In It Can Become Active.

It is the author's opinion that the virus may also live inside a bacteria. Really? Here is the question for biophysicists, biochemists, and researchers in the medical field in general

*** Furthermore**

1. It is well known that the diameter of a hair strand is, on average, 100 microns = 100 x 10^{-4} cm = 0.01 cm
2. The diameter of the coronavirus is, on average, 450 nanometers (*) = 450 x 10^{-7} cm = 0.45 x 10^{-4} cm = 0.000045 cm (-which I ~approximate to 0.00005 cm)
3. The diameter of a droplet, that of air -in a sneeze is, on average, 5 microns = 5 x 10^{-4} cm = 0.0005 cm
   Inside a sneeze droplet -breathing-, it may contain -if infected-: (5 $x10^{-4}$)/(~0.5 x 10^{-4}) = 5/0.5 = 10 units of the COVID-19 virus. A sneeze can spread up to 5 meters from the source!

COVID Lifetime (Ames, 2020):

. On stainless steel and plastic, the survival of the new coronavirus is 72 hours;

. On cardboard, it survives for 24 hours;
. On copper, for 4 hours;
. In aerosol form -air-: 3 or more hours, and
. In respiratory droplets -coughs, sneezes, or talks-. A person talking can emit thousands of droplets, remaining airborne for about 8–14 minutes.

Diameter of the Sars Predecessor

COVID family-: 60-220 nm. AVERAGE of 140 nanometers = 140 x 10^{-7} cm

Perspectives & Conclusion

The main message of this opinion paper is based uniquely on the author's acquired experiences. Its main proposal concerns the possibility that a bacteria may have a couple of units of the coronavirus-X existing inside it. The reasoning is primarily physical, where several coronavirus-X units may fit inside a bacterial body. In such a situation, there is the possibility that units of coronavirus-x can be released into the human body, restarting the virus contamination -long-term coronavirus-X.

The following reasoning seems logical: The current COVID-X (Balloni, 2023) is about three times larger than its predecessor in the COVID family (item 5), and perhaps this is one of the reasons why it remains active for so long on surfaces (item 4), increasing its lethality as a function of time. This CORONA-X may live inside a human -or even not human- bacteria.

After or even BEFORE this living being's health decreases, this virus -hidden inside the bacteria- may restart the recontamination process! Yet, if the bacteria dies for any reason -antibiotic use- this dying bacteria favor the release of the CORONA-X to its environment -the human body or elsewhere-.

Therefore, although the previous COVID was much more lethal, it had a shorter lifespan... it seems COVID-X has its intelligence and is looking for new ways to stay alive by self-protecting -shielding/hiding inside a bacteria…-

In short, if you want to make a difference, try to live to the maximum aim: improving & boosting your immune system.

Finally, we do not have any evidence or plausibility that bacteria may harbor coronavirus-X units; however, no scientific research proves the contrary! However, **it is the author's opinion that the virus may also live inside a bacteria**. Really? Here is the question for biophysicists, biochemists, and researchers in the medical field in general.

So, this is a suggestion for a new scientific study to validate the proposal presented in this opinion paper.

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