



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Thursday 20220113

Breastfeeding

How beneficial is breastfeeding? Here is an age-wise breakup (The Indian Express: 20220113)

<https://indianexpress.com/article/lifestyle/health/how-beneficial-is-breastfeeding-here-is-an-age-wise-breakup-7714837/>

When the baby turns a month old, the oxytocin released from nursing bonds the mother and the child.

breastfeeding, breastfeeding health benefits, breastfeeding for child, breastfeeding for mother, how beneficial is breastfeeding, for how long should you breastfeed, breast milk health benefits, indian express news By the time the baby turns four months old, breastfeeding lowers the risk of sudden infant death syndrome (SIDS). (Photo: Getty/Thinkstock)

The health benefits of breastfeeding cannot be stressed enough. Doctors say that breast milk contains immunity-boosting components that can keep a newborn healthy. But beyond the newborn stage, for how long should a mother continue to feed her child? If you are curious about this question, we bring you the answer.

On Instagram, the page Freedom To Feed — actor Neha Dhupia’s breastfeeding and parenting initiative — shared a post that highlighted the benefits of breastfeeding at various stages of infancy. Take a look.

According to this information, newborn milk, called colostrum, is a laxative that helps remove “sticky meconium”. Colostrum is understood to protect the baby’s sensitive gut in the just-born stage.

When the baby turns a month old, the oxytocin released from nursing bonds the mother and the child. It helps the new mother’s uterus to go back to its original size. It also helps to lower the risk of hospitalisation for the baby.

ALSO READ |Breastfeeding vs formula feeding

By the time the baby turns four months old, breastfeeding lowers the risk of sudden infant death syndrome (SIDS). In addition to that, the long-term risk of asthma is also lowered, along with the mother's risk of postpartum depression.

At the six-month age, the baby is ready for solid foods, but by continuing to breastfeed, some cancer risks are reduced. When the baby turns nine months old, and is not into solid foods, you can continue to breastfeed them that can provide them all the nutrition.

At 12 months, breastfeeding reduces a baby's lifelong risk of heart disease, several cancers, high blood pressure, and other chronic diseases. At 18 months, if you continue to breastfeed, it will give nutritional insurance to your child when they are ill, while also providing hydration. The antibodies in breast milk continue to support the immune system.

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Mental Health

Planning, stress and worry put the mental load on mothers — will 2022 be the year they share the burden? (The Indian Express: 20220113)

<https://indianexpress.com/article/lifestyle/health/planning-stress-worry-mental-load-mothers-2022-share-burden-7709533/>

Mothers are exhausted not only from the physical demands of work and family but also the cognitive labour of holding it all together at work while worrying about torpedoing children's educational futures from keeping them home, alone and glued to screens. While the pandemic exacerbated the physical demands of care -- housework and childcare -- it also exacerbated another part of the work that keeps households and families running: the mental load. (photo: Pexels)

The COVID pandemic has made the very private issue of the domestic division of labour — the way housework and childcare are divided — a very public issue.

During lockdowns, the burden of housework and childcare grew significantly for men and women in opposite-sex and same-sex couples both in Australia and elsewhere.

Overnight, homes became offices, childcare centres and makeshift schools and it was mothers who largely stepped into these teaching and caring roles at the expense of their anxiety levels and sleep.

While the pandemic exacerbated the physical demands of care — housework and childcare — it also exacerbated another part of the work that keeps households and families running: the mental load.

ALSO READ | [Mental health 2021: The psychological consequences of the pandemic](#)

What is the mental load?

A lot has been written about the mental load over the past two years, with many confusing the mental load with household labour — cleaning and cooking or caring after children — or planning tasks involved with childcare. But the mental load is so much more.

In our recently published research, we define the mental load as the combination of two types of work or labour: cognitive labour and emotional labour.

The cognitive aspect of the mental load involves the scheduling, planning, and organising required to support the smooth operating of families. This type of work ranges from organising a play date to planning dinner

ALSO READ | [How work-from-home has disrupted mothers' work-life balance](#)

We argue this cognitive work becomes a load or the mental load when it has an emotional element, for example, when there is worry or stress attached to these tasks.

Some have described list-making as the mental load, but list-making isn't always stressful or emotional and, importantly, list-making has a finite beginning and end.

But, once cognitive tasks like list-making take on an emotional element — like worry about whether Nana will like her present, anxiety about how relatives will get along at holiday dinners and stress about filling stockings while finishing work — then it becomes the mental load.

We argue the mental load operates in families and societies in three ways.

First it's invisible — it's the type of work that is done internally. Unlike housework or childcare, it's unseen and therefore hard to recognise.

Second, the mental load is boundaryless. Because it's invisible, it can be performed anywhere or at anytime.

American sociologist Arlie Hochschild termed women's domestic labour done after work as the "second shift" but the mental load has no shifts — it can be done before, during and after work or even during time that should be spent sleeping.

And lastly, the mental load is enduring, meaning it never ends. Unlike housework such as like cooking or cleaning, thinking and caring about family members never ends, which is why the mental load can be so burdensome and Nana still reminds you to take a jacket.

How can we lessen mental loads in 2022 and beyond?

Individuals and society can do a number of things to decrease the mental load.

Make the mental load more visible by quantifying it

We have no robust, standardised and nationally representative measure of the mental load. This means, unlike housework and childcare, we have no idea the volume and consequences of the mental load for Australians

Recent reports on housework show women do 21 more hours of unpaid work than men. They may also spend the bulk of the day thinking about, planning and worrying about their families.

Yet, we have no measure of this labour and, importantly, we don't know how men carry the mental load either.

Quantifying and capturing how much time we spend on the mental load and how this is shared between couples will help lay the groundwork for change.

Acknowledge the toll on women

The pandemic has left workers burnt out, stressed and overwhelmed by the intensity of balancing work, homeschooling and full-time care demands while isolated at home.

It's no wonder the pandemic has knocked mothers out of employment.

Mothers are exhausted not only from the physical demands of work and family but also the cognitive labour of holding it all together at work while worrying about torpedoing children's educational futures from keeping them home, alone and glued to screens.

ALSO READ |Omicron in India: How to deal with anxiety over the new Covid-19 variant

The mental load, as the unrelenting internal nag, is a drain on well-being with serious consequences for economic productivity and fatigue.

The mental load is a national health emergency and should be treated seriously by workplaces and governments alike.

3) Help families better reconcile work and family demands

Both organisations and governments need to be better at helping families combine their work and care responsibilities. The mental load overloads women (and some men) particularly at work when they are thinking and worrying about their children's needs.

Workplaces need to improve support for families to lessen the mental load. This may mean more working remotely or concrete programs to support workers' mental loads. This is also likely to improve workers' productivity.

ALSO READ |Here's why postpartum mental health for new moms should be given importance

At the same time, governments need to provide better care infrastructure to support families, for example more universal affordable childcare, supports for transitioning children to and from school, and better aged care. This will lessen workers' worries about the experiences of loved ones while they're engaged in paid work.

Ultimately, the mental load is a mental health issue and companies and governments should treat it as such. This will unburden families, and particularly mothers, from managing the mental load alone.

1Delhi records 3 new Omicron cases, tally at 549

2Foggy morning in Delhi, temperature dips 2 degrees below normal

3North Delhi civic body quashes commissioner's proposal to hike tax

More from Delhi

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Covid-19, Centre's twin concerns

On Covid-19, Centre's twin concerns: spreading reach, rising case count (The Indian Express: 20220113)

<https://indianexpress.com/article/india/tpr-above-5-300-districts-omicron-not-common-cold-get-vaccinated-govt-7719578/>

● The Centre also warned that there is "rampant and irrational use" of the anti-viral pill Molnupiravir, emphasising that efforts should be made to restrict its use as known and unknown harms far outweigh its claimed benefit.

Covid patients at Sehnai Banquet Hall at the Covid Care Center in New Delhi. (Express photo by Abhinav Saha)

The Centre Wednesday said that while hospitalisation rate may be low at the current levels of the Omicron surge, the Covid-19 cases are spreading at a large scale, and flagged that in just one week, 300 districts have reported more than 5 per cent positivity rate, compared to just 78 districts in the previous week.

On Wednesday, the Union health ministry said that overall across the states, the country is witnessing a sharp surge in Covid-19 cases and that a twin concern is emerging in several pockets of the country: high case positivity, indicating an increase in the spread of infection, coupled with an increase in the total number of active cases.

Twin concern emerging in states across India

The health ministry said that there has been a progressive in districts reporting an increase in case positivity. In the week ending January 11, 300 districts have a case positivity more than 5 per cent compared to just 78 districts in the week ending January 4.

The head of India's Covid-19 task force, Dr V K Paul, further flagged that positivity rates being reported in certain districts are "phenomenally high". "The intensity of the pandemic has increased. It is quite clear from the data that it is being driven and powered by Omicron. It is rapidly replacing or has replaced the previous dominant Delta variant. Omicron has high transmissibility and growth rate... We are seeing phenomenally high test positivity rates," Paul said.

Paul reiterated that Omicron is not common cold and it has the potential to overwhelm the health infrastructure in the country. "Understanding the disease from Indian experience... it may look like the hospitalisation rate is low. Maybe. But it is spreading at a large scale. If one is infected, the entire family gets infected. We cannot lower the vigil and preparedness. I endorse the statement of the WHO: Omicron is not a common cold. It is not a simple or ordinary infection. We cannot take this lightly," Paul said.

Also Read |Covaxin booster effective against Omicron, Delta: Bharat Biotech cites study

"Also the current situation is like this because of the high vaccination rates... because vaccines provide protection against severe disease. So Omicron is not a common cold and because of it, many health systems have collapsed in a few countries. Many health workers have been forced to stay at home. There is more pressure. We have to slow the transmission," Paul said.

The Centre Wednesday also warned that there is “rampant and irrational use” of the anti-viral pill Molnupiravir, emphasising that efforts should be made to restrict its use as known and unknown harms far outweigh its claimed benefit.

On Wednesday, DG ICMR Dr Balram Bhargava spelled out the recommendations of the experts of the Covid-19 task force, highlighting that Molnupiravir — the first anti-viral drug granted emergency use authorisation (EUA) by the drug regulator — has certain risks that warrant caution in its use.

“We have had extensive debates and discussion among national experts... The final conclusion was that Molnupiravir has certain risks that warrant caution in its use. Number two, experts present at the meeting opined that there is a rampant and irrational use of Molnupiravir. Number three, efforts should be made to restrict its use as known and unknown harms far outweigh its claimed benefit,” Bhargava said.

“Number four, the currently available synthesised evidence was reviewed and the members unanimously agreed that it does not merit the inclusion of Molnupiravir in national treatment guidelines. The emerging evidence will be constantly reviewed,” Bhargava said.

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Bhargava also said that there is no evidence of the benefit of the use of Molnupiravir in persons previously infected with Covid-19 or who were vaccinated. “Lastly, it was further highlighted that the current clinical window of an application appears extremely narrow for Molnupiravir with relevance only to the following: elderly, unvaccinated with other comorbidities. There is no evidence of benefit in diabetic patients, and those who were previously infected with Covid-19 or were vaccinated,” Bhargava said.

Paul, during the briefing, also raised concerns of irrational consumptions of drugs for Covid-19 treatment. “There is a concern. Whichever medicines are being given (for Covid-19), there should be a rational approach in using them. They cannot be overused. In the last wave, we witnessed a scary situation where the overuse of drugs caused mucormycosis... There is a guilt that there was an overuse. Steroids are very potent and life-saving drugs, but they also have side effects. They disturb many bio-chemical pathways. We have learnt our lessons. We don’t want that situation to repeat,” Paul said.

1Delhi records 3 new Omicron cases, tally at 549

2Foggy morning in Delhi, temperature dips 2 degrees below normal

3North Delhi civic body quashes commissioner’s proposal to hike tax

More from Delhi

“General public should be aware of these set of rational treatments... we have true concern over overuse and misuse of drugs. For mild symptoms, in case of fever, only paracetamol should be given. For cough, one can take cough syrup, warm water, and, gargle and only if the cough persists for more than five days, in selected cases, you can use budesonide. These are the only three things to be done... we would request our medical fraternity to follow the rational guidelines,” Paul said.

New Cases

2.47 lakh new Covid cases reported; active cases highest in 7 months

380 more deaths reported (TheTribune: 20220113)

<https://www.tribuneindia.com/news/nation/2-57-lakh-new-covid-cases-reported-active-cases-highest-in-7-months-360898>

India logged 2,47,417 new coronavirus infections, the highest in 236 days, taking the total tally of Covid cases to 3,63,17,927, which includes 5,488 cases of the omicron variant, according to the Union Health Ministry data updated on Thursday.

The country saw a single-day jump of 620 cases of the omicron variant, the highest so far, taking the total tally of such cases to 5,488, out of which 2,162 people have recovered or migrated so far.

The active cases have increased to 11,17,531, the highest in 216 days, while the death toll has climbed to 4,85,035 with 380 fresh fatalities, the data updated at 8 am stated.

Maharashtra recorded the maximum number of 1,367 cases of omicron variant followed by Rajasthan at 792, Delhi 549, Kerala 486 and Karnataka 479.

The active cases comprise 3.08 per cent of the total infections, while the national Covid recovery rate decreased to 95.59 per cent, the ministry said.

A total of 2,57,299 coronavirus infections were reported in a single day on May 21.

An increase of 1,62,212 cases has been recorded in the active Covid caseload in a span of 24 hours.

The 380 new fatalities include 199 from Kerala and 40 from Delhi.

A total of 4,85,035 deaths have been reported so far in the country, including 1,41,701 from Maharashtra, 50,076 from Kerala, 38,389 from Karnataka, 36,905 from Tamil Nadu, 25,240 from Delhi, 22,940 from Uttar Pradesh and 19,959 from West Bengal. PTI

ICMR

Molnupiravir harms far outweigh claimed benefits: ICMR's second warning in a week (TheTribune: 20220113)

<https://www.tribuneindia.com/news/nation/molnupiravir-harms-far-outweigh-claimed-benefits-icmrs-second-warning-in-a-week-360680>

In India, the national task force experts have for the third time unanimously rejected the inclusion of the drug in the Indian Covid-19 treatment guidelines

In its second warning against the use of Molnupiravir, the world's first anti-Covid oral pill developed by Merck, the Indian Council of Medical Research on Wednesday said the harms of the anti-viral pill far outweigh its benefits.

An experimental Covid-19 treatment pill, called molnupiravir and being developed by Merck & Co Inc and Ridgeback Biotherapeutics LP, is seen in this undated handout photo released by Merck & Co Inc. Reuters file

The ICMR noted irrational use of the pill which the Drug Controller General of India approved on December 28 last year and said while the pill has been approved in the UK and Denmark, it has not made to the Covid treatment guidelines there also.

In India, the national task force experts have for the third time unanimously rejected the inclusion of the drug in the Indian Covid-19 treatment guidelines.

“We had extensive discussions among national experts and reviewed whatever data was available from three trials – one on 1433 patients in the US; one which was prematurely terminated for business reasons and another that is ongoing. The conclusion is that Molnupiravir has certain risks that warrant caution in its use. Experts present at the meeting opined that there is a rampant and irrational use of the pill. They said efforts should be made to restrict its use as known and unknown harms far outweigh its claimed benefit,” ICMR chief Balram Bhargava said today.

He said currently available synthesized evidence was reviewed and members unanimously agreed that the medicine does not merit inclusion in the national Covid treatment guidelines.

The emerging evidence will be constantly reviewed, ICMR chief said.

He also said the current window of application appeared extremely narrow for Molnupiravir with relevance only to the elderly and the unvaccinated with other comorbidities except diabetes.

WHO

Omicron quickly overtaking Delta globally in terms of circulation: WHO (TheTribune: 20220113)

<https://www.tribuneindia.com/news/world/omicron-quickly-overtaking-delta-globally-in-terms-of-circulation-who-360615>

The update said Omicron variant has substantial growth advantage and is rapidly replacing other variants

Omicron quickly overtaking Delta globally in terms of circulation: WHO

Photo for representational purpose only. Reuters file

Omicron is quickly overtaking the Delta variant of COVID-19 and becoming dominant around the world, a senior WHO official has warned, with the global health agency cautioning that there is “increasing evidence” Omicron is able to evade immunity but has less disease severity as compared to other variants.

It could take some time for Omicron to overtake Delta in some countries, because it depends on the level of circulation of the Delta variant in those countries, Infectious Disease Epidemiologist and COVID-19 Technical Lead at the World Health Organisation (WHO) Maria Van Kerkhove said on Tuesday.

“Omicron has been detected in all countries where we have good sequencing and it’s likely to be in all countries around the world. It is quickly, in terms of its circulation, overtaking Delta. And so Omicron is becoming the dominant variant that is being detected,” Kerkhove said during a virtual questions and answers session.

She further cautioned that even though there is some information that Omicron causes less severe disease than Delta, “it’s not a mild disease” because “people are still being hospitalised for Omicron.” The COVID-19 Weekly Epidemiological Update, released by the WHO, said that over 15 million new COVID-19 cases were reported globally in the week of January 3-9, a 55 per cent increase as compared to the previous week when about 9.5 million cases were reported.

Over 43,000 new deaths were reported in the past week. As of 9 January, over 304 million confirmed COVID-19 cases and over 5.4 million deaths have been reported.

The highest numbers of new cases were reported from the US (4,610,359 new cases; a 73 per cent increase), France (1,597,203 new cases; a 46 per cent increase), the UK (1,217,258 new cases; a 10 per cent increase), Italy (1,014,358 new cases; a 57 per cent increase) and India (638,872 new cases; a 524 per cent increase), the update said.

Kerkhove said the 15 million cases reported in the last seven days are a “record high in this pandemic” and are an “underestimate” given the challenges in surveillance around the world and COVID-19 self-tests at home that are not registered.

The WHO update said that the Omicron variant has a substantial growth advantage and is rapidly replacing other variants.

“This variant has been shown to have a shorter doubling time as compared to previous variants, with transmission occurring even amongst those vaccinated or with a history of prior SARS-CoV-2 infection; there is increasing evidence that this variant is able to evade immunity,” the update said.

It said that in terms of disease severity, there is growing evidence that the Omicron variant is less severe as compared to other variants.

Citing a non-peer-reviewed retrospective cohort study from the US, the update said the findings suggest that while the absolute number of cases and hospitalisations among children are currently increasing in the US, the risk of hospitalisation still remains lower compared to other age groups during the period when Omicron is circulating as compared to the period when the Delta variant was dominant.

The update also noted that since December, six studies have provided evidence of reduced vaccine effectiveness (VE) of COVID-19 vaccines against the Omicron variant.

“While early VE estimates against the Omicron variant should be interpreted with caution due to potential biases, these preliminary results provide evidence of reduced overall effectiveness of vaccines against the Omicron variant, with greater declines in effectiveness with increasing time since vaccination, relative to Delta... While a booster vaccination appears to improve VE against infection and hospitalisation due to the Omicron variant, more data are needed to assess both the magnitude and duration of the protection,” the update said.

The WHO Technical Advisory Group on COVID-19 Vaccine Composition (TAG-CO-VAC) said that as coronavirus evolves, the composition of current COVID-19 vaccines may need to be updated, to ensure that “COVID-19 vaccines continue to provide WHO-recommended levels of protection against infection and disease by VOCs, including Omicron and future variants.”

Kerkhove added that as Omicron enters and circulates among vulnerable populations, “we will see increase in hospitalisations and deaths. So please treat this virus as seriously as it needs to be treated. The narrative that it’s the common cold is not true. The narrative that it is just mild is not true. So we have to really fight against it. It’s not the time to give up.”

Ayush drugs

Centre advises Ayush drugs for Covid prevention, management (TheTribune: 20220113)

<https://www.tribuneindia.com/news/nation/centre-advises-ayush-drugs-for-covid-prevention-management-360703>

Ministry claims during the first wave, 19,000 Delhi police personnel were given Ashwagandha tablets and a peer reviewed research was published to show they were either not infected or did not progress to severe disease

The government on Wednesday recommended Ayush drugs for prevention and management of Covid-19 saying clinical and preclinical trials had established the efficacy of the medicines.

Issuing revised guidelines for Ayush interventions in Covid-19, the ministry of Ayush said current understanding indicated that a good immune system was important for prevention of the disease.

“Based on clinical and preclinical studies Ayush medicine has been recommended for prophylaxis and management. In the current scenario we recommend three medicines for prophylaxis,” Ayush Ministry officials said today.

These three medicines are Ayuraksha kit which consists of Chyawanprash 6 gm a day; Ayush kwath 75 ml (3gm powder boiled in 150 ml water and reduced to 75 ml) once a day; Samshamani vati 500 mg twice a day; Anu Taila once a day one to two drops nasal application in each nostril once a day.

The second prophylaxis intervention in the Ayush guideline is Guduchi Ghan Vati 500 mg twice a day; third is Ashwagandha tablet 500 mg twice a day.

The ministry said during the first wave, 19,000 Delhi police personnel were given Ashwagandha tablets and a peer reviewed research was published to show they were either not infected or did not progress to severe disease.

For management, the ministry suggested AYUSH 64, a poly herbal formulation developed by the Central Council of Research in Ayurvedic Sciences along with CSIR. “Seven clinical studies were done and were found effective for management through AYUSH 64 of which 2 tablets of 500 mg twice a day are recommended for management of asymptomatic cases and 2 tablets of 500 mg thrice a day for mild to moderate Covid,” said the ministry.

Third wave

Winter sowing powers on despite third wave (Hindustan Times:20220113)

<https://epaper.hindustantimes.com/Home/ArticleView>

India's rabi or winter sowing is powering on robustly despite the pandemic as above-normal seasonal rains have set the stage for the rapid planting of key crops, exceeding last year's levels for this time of the year, official data shows.

The farm sector has emerged relatively unscathed from the pandemic due to higher subsidies and fewer Covid-related curbs even as millions of farmers were on protest against three farm laws, which were eventually repealed by the government on November 30. However, oversupply of labour in the hinterland, triggered by migration of millions of workers back to villages due to the closure of several sources of employment due to the pandemic, and the prices of produce, will still weigh on the farm economy, analysts said.

As on January 10, the total area sown under rabi crops is 65.2 million hectares, against 64.6 million hectares sown during the corresponding period of last year. The total area shows a marginal increase of nearly 600,000 hectares.

“Overall, there has been no impact of the pandemic on farm operations and total acreages are expected to exceed last year's levels if current sowing trends holds,” said Abhishek Agrawal, an analyst with Comtrade.

Agriculture has chugged on unharmed by successive waves of coronavirus infections. In 2020-21, when India faced a rare recession due to the pandemic, agriculture was the only sector to post positive growth of about 3.1%. This helped keep farm incomes steady. Higher fertiliser subsidies, raised by ₹14,000 crore during the summer-sown season, kept farm growth up.

According to data from the India Meteorological Department, winter rainfall in the country stood at 8.1mm against normal of 2.4mm, which is a departure of (+) 237% during the period from January 1 to January 10.

“These rains have been beneficial for early sowing although they have been damaging for some crops in some southern states,” Agrawal said.

According to official advance estimates of GDP for 2021-22 released this week, the agriculture sector is estimated to grow at 3.9%, higher than the 3.6% expansion recorded in the previous financial year. The targeted growth rate for the farm sector is 4%. Overall, the country's GDP is estimated to expand to 9.2%, lower than the Reserve Bank of India's (RBI) December 2021 projection of 9.5%.

The farm sector is crucial to Asia's third-largest economy because it employs the most people and spurs overall demand. For example, when farm output is strong, nearly half of all consumer goods, such as television sets, are sold in rural areas.

Good harvests help keeping a lid on inflation, but also tend to depress farmers' incomes in a country where half the population depends on a farm-derived livelihood.

Lower inflation is key to the Reserve Bank's holding of interest rates steady to boost growth, as the economy battles another Covid wave due to the highly transmissible Omicron variant.

The country's retail inflation however rose sharply to 5.59% in December 2021 from 4.91% in November, pushed up by rising prices of manufactured items and food, data released by the government showed on Wednesday. Food inflation rose to 4.05% in December from 1.87% in November.

The latest sowing trends show a shift towards oilseeds, a scarce commodity, from cereals. Rapeseed and mustard have been sown on 8.9 million hectares compared to 7.2 million hectares sown during the corresponding period last year, up 23%.

In recent months, prices of cooking oil, two-thirds of which is imported, had increased to record levels due to higher international prices.

The higher acreage in oilseeds has resulted in slightly lower acreage under wheat, whose net-sown area stands at 33.3 million hectare against last year's 33.9 million hectare for this time of the year.

The area under pulses, another key commodity, stood at 15.6 million hectare compared to 15.7 million hectare.

"The farm sector has shown remarkable resilience because of two reasons. One, rural supply lines, especially of agricultural inputs, held steady despite the pandemic. Two, rains were plentiful during the 2021 monsoon," said DK Joshi, chief economist of Crisil Ltd, a ratings agency.

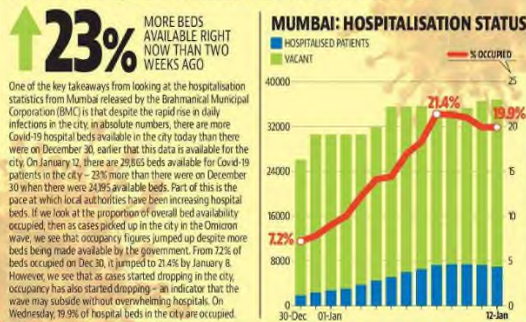
Health Care Services (Hindustan Times:20220113)

<https://epaper.hindustantimes.com/Home/ShareImage?Pictureid=13102781eb9>

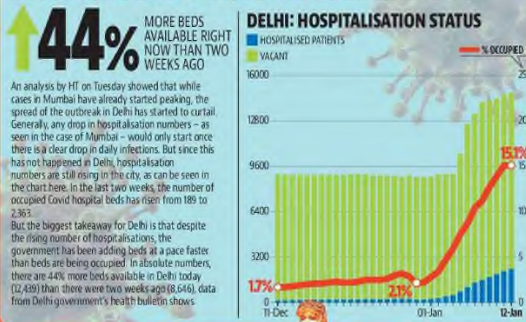
Hospitalisation remains low in Mumbai and Delhi: Data

Experts the world over have said that Omicron variant of Sars-CoV-2 does not cause a massive spike in hospitalisations like previous variants have, and real-world data from Indian cities appears to corroborate that. Data shows that hospitalisations have so far stayed far beyond what was prepared in Mumbai and Delhi – the earlier urban hot spots of India's third wave. A look at what hospitalisation data in these cities show. By Jamie Mullick

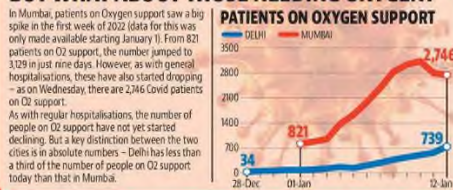
IN MUMBAI, HOSPITALISATIONS BEGIN TO FALL



IN DELHI, NO DROP YET, BUT ENOUGH SAFETY NET



BUT WHAT ABOUT THOSE NEEDING OXYGEN?



Infectivity Rate

In 20 mins, virus loses 90% of its infectivity in air (Hindustan Times:20220113)

<https://epaper.hindustantimes.com/Home/ArticleView>

New Delhi : When exhaled, the Sars-CoV-2 is most potent in causing infection within the first two minutes. It then drops significantly over the next three minutes, and between five and 20 minutes, it consistently loses potency to cause infection, retaining only 10% of its infectivity at the 20th minute.

The insights have been drawn from a first-of-its-kind study by scientists at the University of Bristol, who used novel techniques to keep the virus suspended in a controlled environment using electrostatic energy.

The researchers exposed the virus to varying levels of humidity and found that the coronavirus survived longer when the air was moister, but rapidly lost their ability to replicate when it was drier.

The authors explain the science behind why it happens: the virus is transmitted as airborne droplets, surrounded by water that includes various chemicals. When the relative humidity is low, the droplets begin to crystallise quickly, robbing the virus of its biological viability.

The most rapid loss in infectivity happened when the relative humidity of air was in the 40% range – in this condition, the virus lost half of its infectivity within the first five seconds. But if the relative humidity was at 80-90%, it retained 48% of infectivity for a good five minutes.

What does this mean?

Fundamentally, it shows what has been understood from real-world observations: the majority of the transmission happens during prolonged, consistent contact with an infectious person. If the person is talking loudly or singing, they are consistently spewing out more viral particles, which increases the chances of someone getting infected.

It also suggests that most infection happens at short range transmission, than long range. This is why outdoor spaces have consistently proven to be safer.

The correlation between humidity and infection viability of the virus suggests that the likelihood that someone will catch the virus in summer is lower than in monsoon, if they are exposed to a contagious person for the same duration of time at the same distance.

The equation become a little complicated in Indian winters, though. Relative humidity depends on temperature– if it's cold, the air's ability to hold is water is reduced, consequently raising the relative humidity levels. Conversely, for instance, if you switch on a heater in your room on a cold day, the relative humidity will reduce and you will feel it becoming drier as the higher temperature expands the air's ability to hold water.

Does it hold true for Omicron too?

It almost certainly does, the authors say. While the test did not include the Omicron variant, the scientists found the loss of infectivity was consistent across three variants that they tested.

They also detailed the “physiochemical” processes that essentially reduce the virus's viability. Biological fluids like saliva and the airborne particles we exhale carry chemical buffers – these buffers tend to be stable at a particle level of acidity. But once they come in contact with their air, they become more alkaline. In other words, the vapour which the virus floats after being exhaled becomes less suited for the pathogen's survival. The reasons for this, the scientists added, will be further investigated by them.

Studies published over the last month suggest that Omicron may be spreading more readily because it thrives significantly better in the upper respiratory passage.

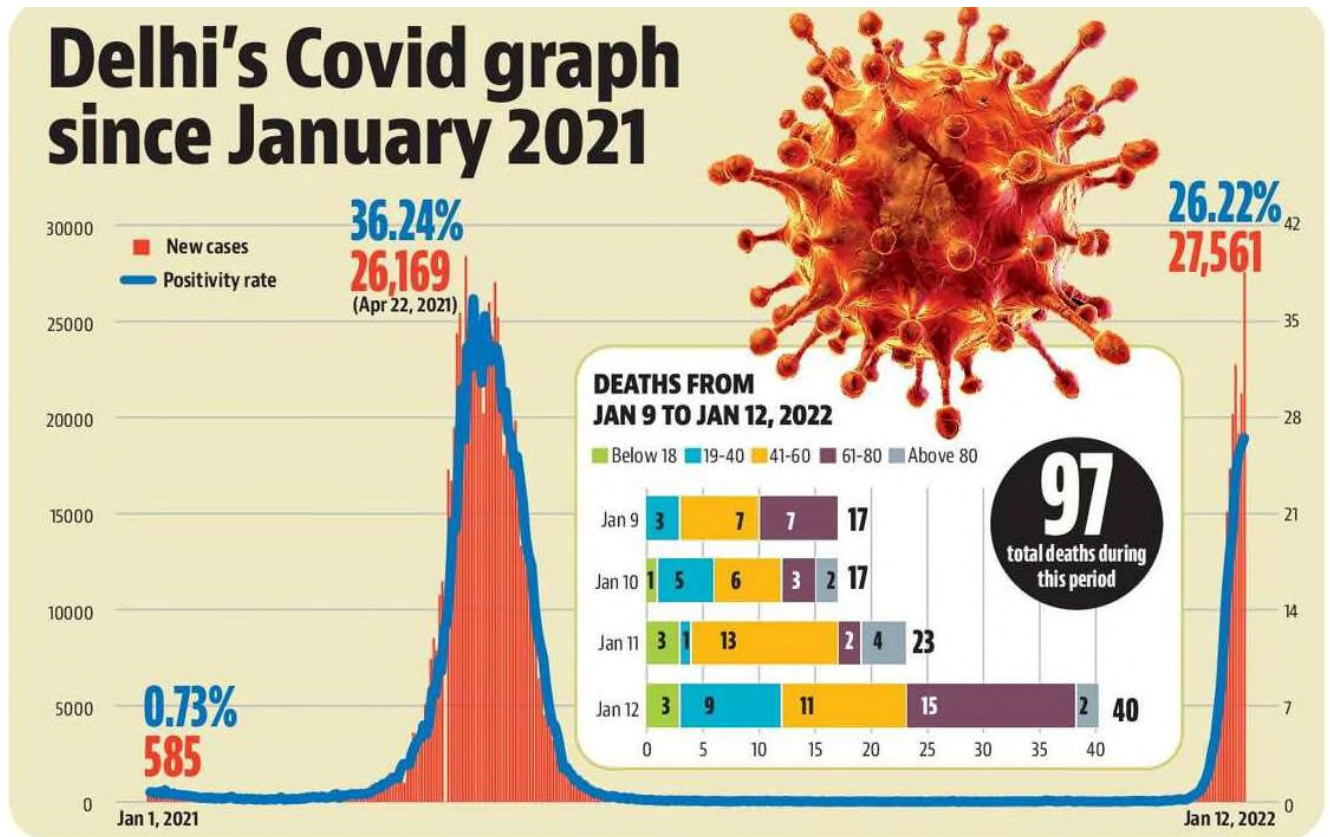
In any case, the new study that shows how the virus survives or loses infectivity reinforces the need for people to stay masked, avoid prolonged, close contact, and ventilate indoor spaces.

Covid

Tally over 27k as tests ramped up; Covid death toll rises by 40(Hindustan Times:20220113)

<https://epaper.hindustantimes.com/Home/ArticleView>

Delhi's Covid graph since January 2021



Delhi recorded over 27,000 Covid-19 cases on Wednesday, its second highest daily case spike of the pandemic, showed state government data, as testing jumped to an eight-month high, with the test positivity rate rising by a little above 0.5 percentage point.

Additionally, hospitalisation numbers remain a fraction of the city's total caseload, with fewer than 2,400 beds occupied across the national capital.

Delhi added 27,561 Covid-19 cases and 40 deaths on Wednesday. The city's daily case count has only ever been higher on April 20 last year, when Delhi added 28,395 infections -- the record single-day jump in the city's infection tally, which came amid the brutal fourth surge of infections.

The fatalities on Wednesday were the most in a day since June 10 last year, when Delhi recorded 44 deaths, and took the city's overall pandemic toll to 25,240.

Over the last four days, of the 97 Covid-19 deaths reported in the national capital, 72 were patients aged above 40, showed Delhi government data.

Of the deaths reported on Wednesday, most (15) were aged between 61 and 80, the state government data accessed by HT showed. Eleven were between aged between 41 and 60, and nine were in the 19-40 group. Two people who died were above 80 years of age and three were below 18.

The city added nearly 20,500 Covid-19 cases each day over the past week on average.

Wednesday's fresh infections came on the back of 105,102 tests, nearly 23,000 more than the previous day, as the state continues to shore up its sampling and testing infrastructure. These

were also the most samples collected in a day since April 14 last year, when over 108,000 people got tested for Covid-19.

As a result of this surge in testing, the daily case count jumping by more than 6,000 compared to Tuesday, but the test positivity rate rose only by 0.57 percentage point. On Wednesday, 26.22% of all collected samples returned positive results, as compared to 25.65% on Tuesday.

Despite the ongoing surge in cases, with the daily caseload now nearly neck-and-neck with the fourth wave, hospitalisations and deaths continue to be far lower now, with most Covid-19 patients recording milder symptoms that don't require hospital care. This is because the Omicron variant of the coronavirus currently fuelling Delhi's fifth wave - and the country's third -- is far less virulent than the Delta configuration of the virus that caused the city's fourth surge of infections between April and May.

For instance, as Delhi added 28,395 cases on April 20, it also logged 277 deaths of the infection. Similarly, during its third-highest daily spike on April 30, Delhi added 375 Covid-19 deaths.

Delhi currently has over 87,000 active Covid-19 cases, of whom just over 2,300 occupy beds in the city's hospitals. As a result, nearly 12,500 of Delhi's 14,802 Covid-19 beds are still vacant, leaving hospitals with enough breathing room in terms of infrastructure, supplies, and staff. The state government has also earlier said that it is in a position to ramp up the city's Covid-19 bed count to 37,000 within days if required, and eventually to around 65,000, as part of its larger upgrade plan.

HT on January 11 reported that of the 35 of the 46 people (76%) who died of Covid-19 between January 5 and 9 were not vaccinated against Covid-19.

Of the 97 deaths between January 9 and 12, most were in the 41-60 group, which saw 37 Covid fatalities in that period. The 61-80 age group saw 27 deaths, and the 19-40 group saw 18 deaths.

The fewest deaths, meanwhile, were among those aged 18 or below, with seven of this cohort dying of Covid-19 in these four days.

“While the infections under the Omicron wave are largely showing milder symptoms among patients, but senior citizens and people with comorbid conditions are still the more vulnerable group,” a senior health department official said on Wednesday.

Experts affirmed that most of those hospitalised during the ongoing wave are senior citizens, people with comorbidities and unvaccinated people.

“What we are seeing currently in hospitals is that the symptoms are mild, but people with comorbidities, people vulnerable, people unvaccinated and elderly people should get themselves tested if there are symptoms. They are the priority for hospitalisations and we need to intervene early for these cases,” said Dr Sumit Ray, head (department of critical care), Holy Family Hospital.

Positivity Rate 26.22%(The Asian Age:20220113)

Delhi logs 27,561 Covid cases, 40 deaths; positivity 26.22%

AGE CORRESPONDENT
NEW DELHI, JAN. 12

Delhi on Wednesday logged 27,561 fresh Covid cases, which is a 29 per cent rise over the cases in the last 24 hours and the most number of cases in a day since April. The positivity rate has touched 26 per cent, which is the highest in seven months. On April 20 last year, the

city reported 28,395 cases. The city also reported 40 Covid deaths, which is the most since June 10, when it reported 44 deaths. Active Covid cases, according to the health bulletin, stand at 87,445, highest in the last eight months (It was 87,907 on May 8 last year).

There are 25,240 patients in home isolation, says the bulletin. Over the last

24 hours, 1,05,102 tests were conducted, out of which 85,349 were RT-PCR tests, while 19,753 were antigen tests. Some 2,363 patients are admitted in dedicated Covid hospitals, out of which 99 are Covid suspect and 2,264 are confirmed Covid patients.

Out of 2,264 patients, 1987 are from Delhi while 277 are from the city. 739

among them are on oxygen support, 91 patients are on ventilator support and 618 are in ICU.

Out of 14,802 beds in dedicated Covid hospitals, 2363 are occupied by patients and 49.04 per cent beds are vacant.

On Tuesday, private offices in Delhi were ordered to shut down and get employees to Work From Home. Offices

linked to essential services are exceptions to the rule. Restaurants and bars in the city have also been shut down; only takeaway is allowed. A night curfew has been in place since last month.

Delhi health minister Satyendra Jain on Wednesday said the number of hospital admissions in the national capital due to Covid-19 has

stabilised over the last five days, which is an indication that the current wave of the pandemic may have peaked and cases may decline in two-three days. "We have observed that the number of hospital admissions has stabilised in the last four to five. We may see a decline in cases in two to three days," he said. Cases have started

declining in Mumbai and Delhi is likely to follow the same trend, Jain added. He also assured that if cases come down in the next couple of days, restrictions will be lifted.

The minister added that most of those who have died in the ongoing surge of infections had comorbidities and very few deaths have taken place due to coronavirus.

Test Covid + ve (The Asian Age:20220113)

1,700 Delhi cops test Covid +ve since Jan. 1

AGE CORRESPONDENT
NEW DELHI, JAN. 12

A whopping 1,700 Delhi Police personnel have tested positive for the novel coronavirus infection since January 1, officials said on Wednesday, adding that a special camp has been organised for police headquarters staffers to administer booster doses to the eligible beneficiaries. "A total of 1,700 personnel of the force have tested positive for the infection from January 1 to January 12. All of them are doing fine and are under quarantine. They will be joining duty after recovery," a senior police officer said. The strength of the Delhi Police force is over 80,000, police said.

As a precautionary measure, a special camp has also been organised for the staffers working at Delhi police headquarters on Jai Singh Marg for administering booster shots to those found eligible, he said.

"Special arrangements for administering precaution dose (booster) of Covid vaccine has been organised from 11:30 am onwards at Officers lounge on the ground floor of PHQ. This initiative has been taken so that staffers like guards among others deployed at our headquarters do not have to go outside during their duty hours to get booster shots.

But only those eligible police personnel who have completed nine months after taking their second dose of vaccine would be eligible for the booster shots," Shalini Singh, special commissioner of police (welfare), said.

In a meeting on Tuesday with senior officers of the districts and other units, the officers had been strictly instructed to brief their personnel to take care of themselves and follow the standard operating procedure (SOP) for prevention of coronavirus amid rising cases amongst the force, police said.

Third Wave Target Children (The Asian Age:20220113)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=16096967>



THOUGH MOST PAEDIATRIC COVID IN THIS WAVE ARE ASYMPTOMATIC OR MILD, SOME CHILDREN HAVE SHOWN THE USUAL, ADULT-LIKE SYMPTOMS – INCLUDING FEVER AND RESPIRATORY ISSUES, WITH A FEW EVEN REQUIRING VENTILATION.

CAUTION: COVID'S THIRD WAVE TARGETS CHILDREN

WHAT'S MOST WORRYING ABOUT THIS WAVE IS THE RISING CASES AMONG THE VULNERABLE UNVACCINATED GROUP – INFANTS AND CHILDREN

SULOONA MEHTA

✓ The dreaded third coronavirus wave has arrived in the country, bringing with it the highly mutating and infectious omicron variant. And the biggest concern presently is the rising cases among the vulnerable unvaccinated group — infants and children.

Even when the initial two COVID waves, including the dreaded Delta variant, caused widespread death and devastation in April-May 2021, wreaking havoc on the healthcare system, children were largely spared. However, going by the daily spike in COVID cases and reports of infection among children, doctors caution this wave signals danger for children of all age groups.

Despite the government commencing vaccination drives for 15-18-year-olds, crores of infants and children below 15 years remain at risk.

NON-VACCINATION, SCHOOLS REOPENING MAKES IT RISKY FOR KIDS

Dr P Suresh Kumar, lead consultant, paediatric intensivist and paediatrician, Yashoda Hospitals, Hyderabad, admits that with adults getting vaccinated, many completing their second dose, the viral infection is percolating downward demographically, affecting the minor, non-vaccinated population.

He tells us that he's been getting 2-3 paediatric COVID cases daily, with close to 15 cases in their department just last week. "Sadly, one reason for the rising infection cases among children is the reopening of schools in the last couple of months," Dr Kumar points out. "It's unrealis-



“Since the last fortnight, cases have increased. We have over 60 COVID patients for admission, which include

child patients. Earlier, the neo-natal and infants testing COVID positive were mostly asymptomatic. There's no particular trend of symptoms in the omicron variant. Nor can we say that hospitalisation won't be required. Therefore, it's important for people to remain careful.

Dr P MYTHILI, medical superintendent, Government King George Hospital,

tic to expect children to maintain social distance and wear masks properly when they're with friends and classmates. So, school is a place where the infection can potentially spread. Most affected children have no travel history, so it's evident they've caught the infection either from schools or family members.”

SYMPTOMS AND TREATMENTS, JUST AS FOR ADULTS

Dr Kumar shares more important insights. "Children who got COVID during the first and the second wave were mostly asymptomatic. However, a few got the multisystem inflammatory syndrome (MIS) where COVID adversely affect vital organs like the kidneys, heart and brain 3-6 months after the coronavirus infection," elaborates the doctor.

However, in the last two weeks, as cases have escalated, Dr Kumar says they've been find-



COMMON COVID SYMPTOMS OBSERVED IN CHILDREN:

- High grade fever, often around 102-103 degree Fahrenheit
- Body ache and chills
- Sore throat
- Runny nose
- Fatigue
- Headache
- Dry cough (in some cases)
- Loss of smell and taste (in very few cases)

TREATMENT: Symptomatic or as per symptoms, medicines are administered

PRECAUTIONS: Wear good quality and effective masks, wash and sanitise hands frequently, avoid crowds and gatherings and maintain social distance.



“One reason for the rising infection cases among children is the reopening of schools in the last couple of months.

It's unrealistic to expect children to maintain social distance and wear masks properly when they're with friends and classmates. So, school is a place where the infection can potentially spread. Most affected children have no travel history, so it's evident they've caught the infection either from schools or family members.”

Dr P SURESH KUMAR, lead consultant, paediatric intensivist and paediatrician, Yashoda Hospitals

ing symptomatic cases among children of all age groups — from 1-16 years. "Predominant symptoms include high-grade fever going up to 102 or 103 degree Fahrenheit, body pain, sore throat and running nose, with the upper respiratory tract affected. A few have cough and loss of smell and taste," states the doctor.

Treatment for such cases is also symptomatic, explains the doctor. "Just as adults are treated, for kids' sore throats, oral antibiotics are administered while fever and body ache are treated with paracetamol tablets," he adds. "From our observation, it appears that around 5% COVID cases require hospitalisation and among these, approximately, 1% need to be in ICU or need supplemental oxygen."

PAEDIATRIC COVID CASES, REQUIRING HOSPITALISATION

Dr P Mythili, medical superintendent, Government King George Hospital, also states that COVID cases had gradually decreased after the second wave until even a couple of weeks

ago, when they got about three cases a day. "However, since the last fortnight, it's increased once again, and on some days now, we have over 60 COVID patients for admission, which include child patients," emphasises Dr Mythili. "Earlier, the neo-natal and infants testing COVID positive were mostly asymptomatic, and they'd got infected either from their COVID-positive mum or from a family member handling the baby."

Dr Mythili also cautions that though most paediatric COVID in this wave are asymptomatic or mild, some children have shown the usual, adult-like symptoms — including fever and respiratory issues, with a few even requiring ventilation.

"There's no particular trend of symptoms in the omicron variant," adds Dr Mythili. "Nor can we say that hospitalisation won't be required. Therefore, it's important for people to remain careful, avoid crowds and continue to wear masks and use sanitisers. And as kids are still unvaccinated, they must take the same precautions as adults, and stay alert."

COVID-19 | Omicron quickly overtaking Delta globally in terms of circulation

COVID-19 | Omicron quickly overtaking Delta globally in terms of circulation: WHO (The Hindu:20220113)

<https://www.thehindu.com/sci-tech/health/omicron-quickly-overtaking-delta-globally-in-terms-of-circulation-who/article38248557.ece>

Since December, six studies have provided evidence of reduced vaccine effectiveness of COVID-19 vaccines against the Omicron variant, COVID-19 Weekly Epidemiological Update released by the WHO said

Omicron is quickly overtaking the Delta variant of COVID-19 and becoming dominant around the world, a senior World Health Organisation (WHO) official has warned, with the global health agency cautioning that there is “increasing evidence” Omicron is able to evade immunity but has less disease severity as compared to other variants.

It could take some time for Omicron to overtake Delta in some countries, because it depends on the level of circulation of the Delta variant in those countries, Infectious Disease Epidemiologist and COVID-19 Technical Lead at the WHO Maria Van Kerkhove said on January 11.

“Omicron has been detected in all countries where we have good sequencing and it’s likely to be in all countries around the world. It is quickly, in terms of its circulation, overtaking Delta. And so Omicron is becoming the dominant variant that is being detected,” Ms. Kerkhove said during a virtual questions and answers session.

She further cautioned that even though there is some information that Omicron causes less severe disease than Delta, “it’s not a mild disease” because “people are still being hospitalised for Omicron”. The COVID-19 Weekly Epidemiological Update, released by the WHO, said that over 15 million new COVID-19 cases were reported globally in the week of January 3-9, a 55% increase as compared to the previous week when about 9.5 million cases were reported.

Over 43,000 new deaths were reported in the past week. As of 9 January, over 304 million confirmed COVID-19 cases and over 5.4 million deaths have been reported.

The highest numbers of new cases were reported from the U.S. (4,610,359 new cases; a 73% increase), France (1,597,203 new cases; a 46% increase), the U.K. (1,217,258 new cases; a 10% increase), Italy (1,014,358 new cases; a 57% increase) and India (638,872 new cases; a 524% increase), the update said.

Ms. Kerkhove said the 15 million cases reported in the last seven days are a “record high in this pandemic” and are an “underestimate” given the challenges in surveillance around the world and COVID-19 self-tests at home that are not registered.

The WHO update said that the Omicron variant has a substantial growth advantage and is rapidly replacing other variants.

“This variant has been shown to have a shorter doubling time as compared to previous variants, with transmission occurring even amongst those vaccinated or with a history of prior SARS-CoV-2 infection; there is increasing evidence that this variant is able to evade immunity,” the update said.

It said that in terms of disease severity, there is growing evidence that the Omicron variant is less severe as compared to other variants.

Citing a non-peer-reviewed retrospective cohort study from the U.S., the update said the findings suggest that while the absolute number of cases and hospitalisations among children are currently increasing in the U.S., the risk of hospitalisation still remains lower compared to other age groups during the period when Omicron is circulating as compared to the period when the Delta variant was dominant.

The update also noted that since December, six studies have provided evidence of reduced vaccine effectiveness (VE) of COVID-19 vaccines against the Omicron variant.

“While early VE estimates against the Omicron variant should be interpreted with caution due to potential biases, these preliminary results provide evidence of reduced overall effectiveness of vaccines against the Omicron variant, with greater declines in effectiveness with increasing time since vaccination, relative to Delta... While a booster vaccination appears to improve VE against infection and hospitalisation due to the Omicron variant, more data are needed to assess both the magnitude and duration of the protection,” the update said.

The WHO Technical Advisory Group on COVID-19 Vaccine Composition (TAG-CO-VAC) said that as coronavirus evolves, the composition of current COVID-19 vaccines may need to be updated, to ensure that “COVID-19 vaccines continue to provide WHO-recommended levels of protection against infection and disease by VOCs, including Omicron and future variants.” Ms. Kerkhove added that as Omicron enters and circulates among vulnerable populations, “we will see increase in hospitalisations and deaths. So please treat this virus as seriously as it needs to be treated. The narrative that it’s the common cold is not true. The narrative that it is just mild is not true. So we have to really fight against it. It’s not the time to give up.”

COVID-19 crisis chronotope:

COVID-19’s own groundhog day (The Hindu:20220113)

<https://www.thehindu.com/sci-tech/health/covid-19s-own-groundhog-day/article38246682.ece>

The pandemic has irrevocably and fundamentally changed our perception of time and space

Parui A, Simi Raj M. "The COVID-19 crisis chronotope: The pandemic as matter, metaphor and memory." *Memory Studies*. 2021;14(6):1431-1444. doi:10.1177/17506980211054346

As we spent nearly two years in the cavernous belly of COVID-19, one day endlessly coalescing into the other, we sometimes lost track of the time or the

COVID-19 vaccination

COVID-19 vaccination | Fewer adverse reactions seen among teenagers, says national advisory group(The Hindu:20220113)

<https://www.thehindu.com/sci-tech/health/fewer-adverse-reactions-among-teenagers-to-covid-19-jab-ntagi/article38173317.ece>

A Health worker administering a shot of COVID-19 vaccine dose of Covaxin to a 15-year-Old girl in Delhi, on January 5, 2022. | Photo Credit: Shiv Kumar Pushpakar

Doctors warn against indiscriminate use of paracetamol post vaccination in children.

Adverse reactions due to COVID-19 vaccination are much lower in teenagers compared to adults, said National Technical Advisory Group on Immunisation (NTAGI) chief, Dr. N.K. Arora, who heads the National Technical Advisory Group on Immunisation (NTAGI) COVID Working Group, on Friday, adding that Covaxin, which is being given to children between 15-18 years in India, is safe and backed by science and data.

"So far over 1.6 crore children have been vaccinated and we have seen local pain as the most common adverse reaction. Painkillers are given only on doctor's advice. Parents are advised to ensure that children don't go on an empty stomach to get vaccinated. Also they must wait in the healthcare facility for 30 minutes after the vaccination to ensure that any adverse reaction is immediately addressed," he said.

WHO yet to authorise use of Covaxin among adolescents

Doctors have also advised that in case of any adverse reactions including allergic reaction, itching at site of injection within 2 to 12 hours of vaccination etc., should be monitored and reported to the nearest health care centre.

"Under no circumstance should self-medication be encouraged," warned Dr. Arora.

Doctors also advise that teenagers receiving COVID-19 vaccines should not take paracetamol without consultation. The caution comes amid growing concerns that some immunisation centres are advising children to take three 500 mg paracetamol tablets after receiving the COVID-19 vaccine.

Covaxin safe for children, says Bharat Biotech

“Paracetamol is not recommended as prophylaxis, before and after any COVID vaccination as we don’t know how it alters the immune response of the vaccine. A low-grade fever, muscle ache, lethargy, headache, soreness at the injection site is common in the first 2 days after vaccination, which usually subsides on its own, without any medication. However, if the fever persists or the intensity increases then paracetamol or other painkiller is advised after consultation with a physician. So paracetamol is to be taken only after consultation and not as prophylaxis for fever, which happens because of immune response of the body to the vaccine components,” said Dr. Akshay Budhraj, senior consultant, Respiratory and Sleep Medicine, Aakash Healthcare.

To combat the third wave of COVID-19 cases, the Central Government started COVID-19 vaccination for teenagers aged 15 to 18. On January 3, the first day of the children’s vaccination programme, over 41 lakh such children received their first dose of vaccine.

Now doctors are seeing over-use of paracetamols without consulting a doctor in this cohort.

“Giving paracetamol to children (15-18 years old) who are receiving COVID vaccines is not recommended because it has the potential to cause hepatotoxicity (liver damage caused by drug exposure) in them. If children develop a fever after receiving the COVID vaccine, they should be given Mefenamic acid or Meftal syrup. Adults over the age of 18 who have a fever after receiving the Covid vaccine are safe to take paracetamol,” added Dr. Col.Vijay Dutta, senior consultant - Internal Medicine, Indian Spinal Injuries Centre.

“Vaccine-related fever usually occurs within 24 hours of vaccine administration. Other symptoms like some muscle pain, weakness can be there which do not need any medication. Slight fever may need medical management and age and weight-specific dose may be given after consulting with the treating doctor. Waiting at the vaccination center for half an hour post-vaccination is a must. Also adequate hydration, rest, and sleep - going about the day, as usual, is sufficient precautions to take while getting vaccinated,” said Dr. Swetha Reddy Pasam, consultant-paediatrics, Apollo TeleHealth.

Mutations

Greater COVID-19 spread can lead to more mutations, say doctors (The Hindu:20220113)

<https://www.thehindu.com/news/national/greater-spread-means-potentially-more-mutations/article38158767.ece>

A health worker collects swab sample of an air traveller for Covid-19 test, at T-3 terminal of Indira Gandhi International Airport, in New Delhi, Thursday, Jan. 6, 2022. | Photo Credit: PTI

Doctors caution against treating Omicron like the common cold

Justifying the revised shorter home isolation period for mild and asymptomatic COVID-19 cases announced by the Health Ministry recently, doctors note that going by available new data it has been found that the most infectious period is 2-3 days before the first symptom and 2-3 days after.

“This is good enough time to contain the spread, as even in the RT-PCR reports most people become negative by Day 7. However, Omicron should not be treated like the common cold. Greater spread means potentially more mutations,” said Mrinal Sircar, director – Pulmonology and Critical Care, Fortis Hospital Noida.

Doctors say that patients many times demand repeated COVID-19 tests because of the fear that they are not clear of the infection. Says Dr. Kapil Gupta, consultant - Emergency Medicine, HCMCT Manipal Hospital: “The pathology is only for ten days as most of the symptoms subside by then. So, the new guidelines are for seven days of home isolation and the last three days should be without fever. Government has advised against unnecessary testing once you have been cleared of the virus. We faced a problem of people coming for retesting during the first two waves. To use our resources optimally, we need to avoid this.

“We can only hope the other mutations that come up help improve herd immunity rather than make the virus more dangerous,” he said.

Even the United States’ CDC (Centre for Disease Control) guidelines has recommended five days of home isolation for mildly symptomatic and asymptomatic COVID-19 patients. Thereafter they must self monitor for the next five days, but they can step out with mask and adhering strictly to COVID appropriate behaviour, said Gurmeet Singh Chhabra, director Pulmonology, QRG Super Speciality Hospital Faridabad. Thus far, the majority of Omicron patients, especially those who are fully vaccinated, has had only mild symptoms.

“Still, we have to take this seriously as increased transmissibility of Omicron, which is about 3 to 4 times that of the Delta variant, will result in a large number of patients. It is causing reinfection in those who had recovered in the past and breakthrough infection in those already vaccinated. Though hospital admission due to Omicron are 50 to 60 per cent less compared to the Delta virus, a large number of cases will result in overburdening of the health care system,” he said.

Mutation is a normal phenomenon during viral replication. Omicron too is a result of significant mutations — more than 50, over 30 of them in the spike protein itself.

Dr. Singh said it has been observed till now that Omicron mainly affects upper airways and bronchi with lung parenchyma involvement in a few cases. But unvaccinated or partially vaccinated or immunocompromised and high risk patients with co-morbid conditions are prone to severe disease.

Medicine

बेवजह मोलनुपिरवीर दवा लेने से शरीर के अंगों को गंभीर खतराकोरोना महामारी के बढ़ने के साथ ही लोग खुद ही कई दवाएं बिना डॉक्टर की सलाह के ले लेते हैं। यह खतरनाक साबित हो सकता है। विशेषज्ञों का कहना है कि बेवजह मोलनुपिरवीर जैसी दवाओं के प्रयोग से शरीर को गंभीर नुकसान पहुंच सकता है। डॉक्टर के बताने पर ही इसका इस्तेमाल करें। नुकसान (The Hindu:20220113)

<https://epaper.livehindustan.com/>



जार में धड़ल्ले से बिक ने कोरोना की दवा

र में कोरोना के मरीजों के इलाज के लिए ले से बिक रही मोलनुपिरवीर दवा को लेकर के वरिष्ठ डॉक्टरों ने आगाह किया है। साथ ही तरह के इलाज को लेकर डॉक्टरों ने लोगों को सावधान रहने के लिए कहा है। दवा ब्रक द्वारा मोलनुपिरवीर के इमरजेंसी माल को मंजूरी मिलने के बाद यह दवा तेजी डिकल स्टोर्स पर बिक रही है। अब सीएमआर ने इसे कोरोना के इलाज के कॉल से बाहर करने का फैसला किया है।



हमेशा लेना जरूरी नहीं

डॉक्टर नीरज निश्चल ने कहा कि महामारी का मतलब यह नहीं है कि जब तक आपका डॉक्टर कई दवाएं नहीं लिखता, तब तक आप ठीक नहीं होंगे। पैरासिटामोल देकर या लक्षणों के आधार पर इलाज कर अधिकतर रोगियों को ठीक किया जा सकता है।

बाजार में धड़ल्ले से बिक रही कोरोना की दवा

बाजार में कोरोना के मरीजों के इलाज के लिए धड़ल्ले से बिक रही मोलनुपिरवीर दवा को लेकर एम्स के वरिष्ठ डॉक्टरों ने आगाह किया है। साथ ही कई तरह के इलाज को लेकर डॉक्टरों ने मरीजों को सावधान रहने के लिए कहा है। दवा नियंत्रक द्वारा मोलनुपिरवीर के इमरजेंसी इस्तेमाल को मंजूरी मिलने के बाद यह दवा तेजी से मेडिकल स्टोरों पर बिक रही है। अब आईसीएमआर ने इसे कोरोना के इलाज के प्रोटोकॉल से बाहर करने का फैसला किया है।

ये ले सकते हैं

- मरीज बुखार होने पर पैरासिटामोल 650 एमजी ले सकते हैं।
- बुखार कई दिनों तक रहता है तो डॉक्टर की सलाह से नॉन स्टेरॉइड दवा नेप्रोक्सिन 250 एमजी का इस्तेमाल कर सकते हैं।
- अगर सर्दी या जुकाम के लक्षण हैं तो सीट्राजिन 10 एमजी या लिवोसीट्राजिन 5 एमजी का इस्तेमाल कर सकते हैं।

एम्स के मेडिसिन विभाग के एडिशनल प्रोफेसर डॉक्टर नीरज निश्चल ने बताया कि यह दवा भ्रूण विकार उत्पन्न कर सकती है। जेनेटिक बदलाव से जुड़ी समस्याएं पैदा कर सकती हैं। साथ ही मांसपेशियों को भी नुकसान पहुंचा सकती है। इसे मरीजों के बहुत ही चुनिंदा समूह में आपातकालीन उपयोग के लिए दिया गया है, जो गंभीर जोखिम में हैं और उनके पास कोई अन्य विकल्प मौजूद नहीं है। इसके उपयोग को प्रतिबंधित करने के प्रयास हों, क्योंकि ज्ञात व अज्ञात नुकसान इसके सीमित लाभ से कहीं अधिक हैं।

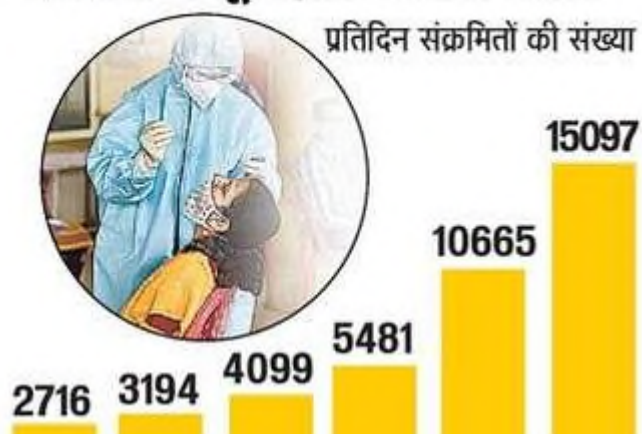
बिना सलाह लेने पर यह खतरा

- जननांगों के ऊतकों को खतरा
- भ्रूण को खतरा
- जवान लोगों की हड्डियों को खतरा
- कैंसर का जोखिम भी

Infection

चौबीस घंटे में 27 हजार नए मामले आए, संक्रमण दर बढ़कर 26 फीसदी से अधिक हुई, सक्रिय मरीजों की संख्या में भी इजाफासंकट: जून के बाद कोरोना से सर्वाधिक (The Hindu:20220113)40 मौतें

जनवरी में यूँ बढ़ता जा रहा कहर



निगम बोध घाट में बुधवार को कोरोना से मृत व्यक्ति की अंत्येष्टि के दौरान परिजन को ढांडस बंधाते स्वास्थ्यकर्मी। • सलमान अली

जनवरी को पुलिस
3156 कोविड
10-11 जनवरी
आर दर्ज की गई,
ज्यादातर मामले
के थे।



वीकेंड हो या नाइट कर्फ्यू सभी में टूट रहे नियम

दिल्ली में कोरोना के बढ़ते मामलों पर लगाम लगाने के लिए सरकार की ओर प्रयास किए जा रहे हैं। इसके लिए नाइट कर्फ्यू से लेकर सप्ताहांत कर्फ्यू तक लगाए गए हैं। लेकिन कोरोना से बचाव के नियम तोड़ने वालों की भी कमी नहीं है।

अगले वीकेंड कर्फ्यू में पुराने ई-पास ही चलेंगे

नई दिल्ली (व.सं)। कोरोना के बढ़ते संक्रमण को देखते हुए इस हफ्ते भी दिल्लीवालों को वीकेंड कर्फ्यू का सामना करना पड़ेगा। वीकेंड कर्फ्यू के दौरान जरूरी सेवा से जुड़े लोगों को जो ई-पास पिछले सप्ताहांत पर जारी किए गए थे, वे इस सप्ताह भी मान्य होंगे। हर सप्ताह के लिए अलग से कई ई-पास जारी नहीं किए जाएंगे।

दिल्ली आपदा प्रबंध प्राधिकरण ने बुधवार को इसे लेकर आदेश जारी कर स्पष्ट किया है। दरअसल, लोग लगातार सवाल पूछ रहे थे कि क्या वीकेंड कर्फ्यू में हर बार नया पास लेना होगा। बताते चलें कि पिछले हफ्ते लगे वीकेंड कर्फ्यू में एक लाख से अधिक आवेदन ई-पास के लिए आए थे।

इसमें तीन हजार से अधिक लोगों को व्यक्तिगत ई-पास जारी किया गया था, जबकि 491 ई-पास बल्क में जारी किए गए थे।

योग कक्षाएं शुरू

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नई दिल्ली | वरिष्ठ संवाददाता

राजधानी दिल्ली में कोरोना से मौत के मामले लगातार बढ़ रहे हैं। बुधवार को दिल्ली में लगभग 219 दिन बाद रिकॉर्ड 40 मौतें हुईं। इससे पहले 8 जून को कोरोना से 41 मौतें हुई थीं। वहीं संक्रमण दर भी बढ़कर 26.22 फीसदी पहुंच गया।

दिल्ली के स्वास्थ्य विभाग के अनुसार, बुधवार को कोरोना के 27561 नए मामले सामने आए। वहीं 14957 मरीजों को छुट्टी दी गई, जबकि 40 मरीजों ने कोरोना के कारण दम तोड़ दिया। दिल्ली में

अबतक 1617716 लोग कोरोना से संक्रमित हो चुके हैं। इनमें से 1505031 मरीज कोरोना से ठीक हो गए। वहीं, 25240 मरीज कोरोना के कारण दम तोड़ चुके हैं। दिल्ली में बढ़ते मामलों के साथ कोरोना से मृत्युदर घटकर 1.56 फीसदी रह गई है।

87 हजार से अधिक सक्रिय मरीज : स्वास्थ्य विभाग के अनुसार दिल्ली में कोरोना के सक्रिय मरीज बढ़कर 87445 हो गए हैं। इनमें से होम आइसोलेशन में 56991 मरीज भर्ती हैं। वहीं, कोविड केयर सेंटर में 590, कोविड हेल्थ सेंटर में 39 और दिल्ली के विभिन्न अस्पतालों में 2264 मरीज भर्ती हैं। विभाग के अनुसार दिल्ली के अस्पतालों में 2363 मरीज भर्ती हैं।

इनमें से 99 मरीज कोरोना लक्षण के साथ और 2264 मरीज कोरोना संक्रमित हैं। कोरोना संक्रमित मरीजों में से 618 मरीज आईसीयू पर, 739 मरीज ऑक्सीजन सपोर्ट पर, 91 मरीज वेंटिलेटर पर पर भर्ती हैं। दिल्ली में भर्ती मरीज में से 1987 मरीज दिल्ली से हैं। वहीं 277 मरीज दिल्ली के बाहर हैं। दिल्ली में कोरोना की जांच के लिए मंगलवार को 105102 टेस्ट हुए, जिसमें 26.22 फीसदी लोग संक्रमित पाए गए। इन जांच के लिए आरटीपीसीआर से 85349 और रैपिड एंटीजन से 19753 टेस्ट हुए।

दिल्ली में अबतक 33748408 टेस्ट हो चुके हैं। दिल्ली में बढ़ते मामलों के साथ ही कंटेनमेंट जोन की संख्या बढ़कर 20878 हो गई है। एक दिन पहले इनकी संख्या 17269 थी। दिल्ली में बीते दो दिनों से लगातार तीन हजार से ज्यादा कंटेनमेंट जोन सील हो चुके हैं।

बाजारों में भी लापरवाही

बाजारों में भी कोरोना प्रोटोकॉल तोड़ने की तस्वीरें अक्सर सामने आ रही हैं। पाबंदियों के बीच भी मंगलवार को जामा मस्जिद स्थित बाजार में सामाजिक दूरी के नियमों की अनदेखी नजर आ रही थी। इससे संक्रमण फैलने का खतरा बढ़ जाता है।

तीन दिनों में 921 एफआईआर

दिल्ली पुलिस द्वारा जारी आंकड़ों पर नजर डालें, तो वीकेंड कर्फ्यू और उसके अगले दिन नाइट कर्फ्यू के दौरान पुलिस ने 921 एफआईआर दर्ज कीं, जबकि 3800 कोविड चालान किए गए।

27561

बिना मास्क पहन घूमते नजर आए

बता दें कि वीकेंड कर्फ्यू यानी 8 और 9 जनवरी को पुलिस ने 751 एफआईआर दर्ज की थीं, जबकि 3156 कोविड चालान किए थे। इसके अगले दिन यानी 10-11 जनवरी की रात में कर्फ्यू के दौरान 170 एफआईआर दर्ज की गईं, जबकि 644 कोविड चालान किए। इनमें ज्यादातर मामले बेवजह बाहर घूमने और मास्क ना पहनने के थे।

22751

21259

20181

19166

17335

नजर रखने के लिए टीमें गठित

कोरोना के नए वेरियंट ओमीक्रोन के खतरे को देखते हुए दिल्ली पुलिस नियम तोड़ने वालों के खिलाफ सख्त रवैया अपना रही है। राजधानी के हर जिले में समय-समय पर पुलिस की टीमें सामाजिक दूरी का पालन नहीं करने वालों के खिलाफ यूं तो कार्रवाई कर ही रही है, लेकिन अब पुलिस ने राजधानी के सभी 15 जिलों में अलग-अलग दो-दो मोबाइल टीमों सहित कुल 30 टीमों के जरिये नियम तोड़ने वालों पर नजर रखने का फैसला लिया है।

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जनवरी

दिल्ली की योगशाला कार्यक्रम के तहत होम आइसोलेशन में रह रहे कोविड मरीजों की बुधवार से ऑनलाइन योग कक्षाएं शुरू हो गईं। पहले दिन कोविड मरीजों ने योग कक्षाओं को लेकर खूब उत्साह दिखाया। बड़ी संख्या में मरीजों ने इसमें हिस्सा लिया।