



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Tuesday 2020825

Phase-2 trial of Oxford Covid-19 vaccine

Phase-2 trial of Oxford Covid-19 vaccine candidate set to begin at PGI-Chandigarh today

The trials are to be conducted across 17 selected sites (The Tribune: 2020825)

<https://www.tribuneindia.com/news/health/phase-2-trial-of-oxford-covid-19-vaccine-candidate-set-to-begin-at-pgi-chandigarh-today-131141>

Phase-2 trial of Oxford Covid-19 vaccine candidate set to begin at PGI-Chandigarh today
Photo for representation only.

The phase-2 human clinical trial of the Oxford COVID-19 vaccine candidate by Pune-based Serum Institute of India (SII) is set to begin from Tuesday.

The observer-blind, randomised controlled study to determine the safety and immunogenicity of "Covishield" on healthy Indian adults will begin at Bharati Vidyapeeth Medical College and Hospital in Pune, sources said.

The Serum Institute of India has partnered with British-Swedish pharma company AstraZeneca for manufacturing the COVID-19 vaccine candidate, developed by the University of Oxford.

"We have got all approvals from the Central Drugs Standard Control Organisation (CDSCO). We are going to start the human clinical trial process at the Bharati Vidyapeeth (Deemed to be University) Medical College and Hospital from August 25.

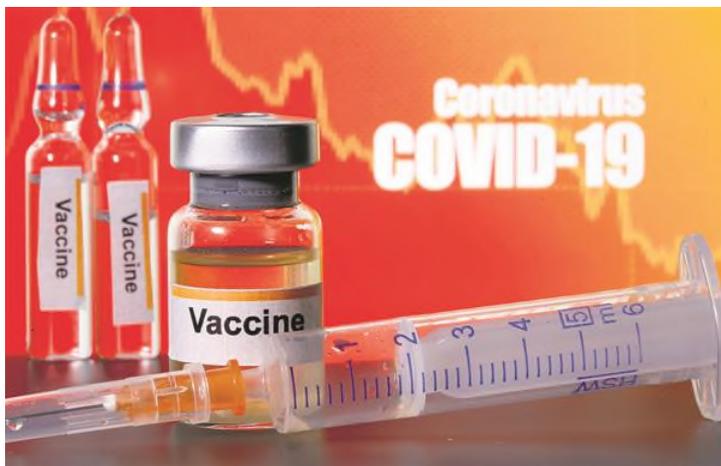
"We are sure that in line with the philosophy of our group, we are going to make available a world class COVID-19 vaccine for people of our country and make our country 'AatmaNirbhar'," Prakash Kumar Singh, Additional Director, Government and Regulatory Affairs, Serum Institute of India (SII) said.

As a rapid regulatory response, the Drugs Controller General of India (DCGI) on August 3 had given nod to the Pune Serum Institute of India (SII) for conducting phase-2 and 3 human clinical trials of the Oxford COVID-19 vaccine candidate in the country.

The trials are to be conducted across 17 selected sites, including AIIMS Delhi, BJ Medical College in Pune, Rajendra Memorial Research Institute of Medical Sciences (RMRIMS) in Patna, Post-Graduate Institute of Medical Education and Research in Chandigarh, AIIMS-Jodhpur, Nehru Hospital in Gorakhpur, Andhra Medical College in Visakhapatnam and JSS Academy of Higher Education and Research in Mysore, SII sources had said.

Around 1,600 people aged above 18 years are likely to participate in the trials. To introduce the vaccine, SII, the world's largest vaccine maker by number of doses produced and sold, has signed an agreement to manufacture the potential vaccine developed by the Jenner Institute (Oxford University) in collaboration with British-Swedish pharma company AstraZeneca.

Initial results of the first two phases of trials of the vaccine conducted in five trial sites in the UK showed it has an acceptable safety profile and homologous boosting increased antibody responses, sources had said. PTI



WHO

WHO: Children aged 6-to-11 should wear masks at times, too (The Tribune: 2020825)

<https://www.tribuneindia.com/news/health/who-children-aged-6-to-11-should-wear-masks-at-times-too-130788>

WHO: Children aged 6-to-11 should wear masks at times, too

Just as millions of children are heading back to school, the World Health Organization says those aged 6 to 11 should wear masks in some cases to help fight the spread of coronavirus.

The recommendations presented Monday follow the widespread belief that children under 12 are not considered as likely to propagate the virus as much as adults. Children in general face less severe virus symptoms than adults, with the elderly the most vulnerable to severe infection and death.

Now WHO says decisions about whether children aged 6 to 11 should wear masks should consider factors like whether COVID-19 transmission is widespread in the area where the child lives; the child's ability to safely use a mask; and adult supervision when taking the masks on or off.

“Luckily, the vast majority of children who are infected with the virus appear to have mild disease or asymptomatic infection, and that’s good news,” said Maria Van Kerkhove, technical chief of the UN health agency’s emergencies programme.

She still cautioned that some children can develop severe cases of coronavirus and even die.

The shift comes as confirmed COVID-19 infections worldwide have surpassed 23 million and confirmed deaths have passed 809,000, according to a tally by Johns Hopkins University. Experts say the tally understates the true toll of the pandemic due to limited testing, missed mild cases and other factors.

The UN health agency for months trailed many governments in backing the widespread use of masks, a point not lost on critics, who said WHO was too slow to get on board with the benefits of general mask use.

WHO had expressed concern that people who put on masks might unwittingly spread the virus from an unclean hand to their face, and insisted that health-care providers needed masks first amid some shortages.

Since then, researchers have found that the virus can be transmitted through aerosols — tiny droplets emitted when people talk, laugh, sing or sneeze — and mask-wearing can cut down on the amount of virus that people are exposed to.

Some policymakers, including public transport authorities in Europe and elsewhere, have set the bar for mask-wearing in crowded places like buses and trains at age 12 — with everyone older required to put them on.

Acknowledging gaps in both research and understanding of the virus, WHO said kids under age 6 should not wear masks, while those 12 to 18 should wear them just like adults should — notably in cases where physical distancing cannot be ensured and in areas of high transmission.

WHO advises a “risk-based approach” for kids aged 6 to 11 that balances various factors.

“Everyone agrees how important it is that schools are operating safely,” Van Kerkhove said. “We’ve outlined how that can be done in terms of physical distancing and hand hygiene stations, respiratory etiquette, the potential use of masks by either the workers or the children themselves.”

WHO said the current evidence suggests virus cases reported from kids stemmed mostly from transmission within households and that “documented transmission among children and staff within educational settings is limited.”

Parents, health officials and educators in countries around the world have been wrestling with the safety questions posed by having millions of children go back to school during a pandemic.

Over the weekend, Britain’s top public health officials issued a joint statement saying that children were more likely be harmed by staying away from school than from being exposed to COVID-19.

They said children are less likely to catch COVID-19 than adults and have “an exceptionally low risk” of dying from the disease. By contrast, they said studies show that not going to school limits children’s ability to succeed in life and may worsen physical and mental health problems.

“Very few, if any, children or teenagers will come to long-term harm from COVID-19 due solely to attending school,” the medical officers said. “This has to be set against a certainty of long-term harm to many children and young people from not attending school.”

The recommendations by WHO on Monday also noted lingering uncertainty about the effectiveness of transparent face shields, with WHO calling for more research into their use in response to COVID-19. AP

Coronavirus re-infection

Hong Kong researchers report first documented coronavirus re-infection (The Tribune: 2020825)

The patient had appeared to be previously healthy, say researchers

<https://www.tribuneindia.com/news/health/hong-kong-researchers-report-first-documented-coronavirus-re-infection-130770>

A Hong Kong man who recovered from COVID-19 was infected again four-and-a-half months later in the first documented instance of human re-infection, researchers at the University of Hong Kong said on Monday.

The findings indicate the disease, which has killed more than 8,00,000 people worldwide, may continue to spread amongst the global population despite herd immunity, they said.

The 33-year-old male was cleared of COVID-19 and discharged from a hospital in April, but tested positive again after returning from Spain via Britain on August 15.

The patient had appeared to be previously healthy, researchers said in the paper, which was accepted by the international medical journal Clinical Infectious Diseases.

He was found to have contracted a different coronavirus strain from the one he had previously contracted and remained asymptomatic for the second infection.

"The finding does not mean taking vaccines will be useless," Dr. Kai-Wang To, one of the leading authors of the paper, told Reuters.

"Immunity induced by vaccination can be different from those induced by natural infection," To said. " will need to wait for the results of the vaccine trials to see if how effective vaccines are."

World Health Organisation (WHO) epidemiologist Maria Van Kerkhove said on Monday that there was no need to jump to any conclusions in response to the Hong Kong case.

Instances of people discharged from hospitals and testing positive again for COVID-19 infection have been reported in mainland China. However, in those cases it was not clear whether they had contracted the virus again after full recovery -- as happened to the Hong Kong patient -- or still had the virus in their body from the initial infection.

The preliminary number of patients in China who tested positive again once being discharged from hospital was 5%-15%, Wang Guiqiang, an infectious disease specialist in China's expert group for COVID-19 treatment, said during a press briefing in May.

One explanation was that the virus still existed in the lungs of patients but was not detected in samples taken from upper parts of the respiratory tract, he said. Other possible causes were low sensitivity of tests and weak immunity that could lead to persistent positive results, he added.

Jeffrey Barrett, an expert and consultant with the COVID-19 Genome Project at Britain's Wellcome Sanger Institute, said in emailed comments to Reuters that it was very hard to make any strong inference from a single observation.

"Given the number of global infections to date, seeing one case of re-infection is not that surprising even if it is a very rare occurrence," he said. Reuters

COVID-19 is a multi-organ metabolic disease

COVID-19 is a multi-organ metabolic disease, study finds (The Tribune: 2020825)

<https://www.tribuneindia.com/news/health/covid-19-is-a-multi-organ-metabolic-disease-study-finds-130701>



Scientists have developed a predictive metabolic model for COVID-19 infection that shows multi-organ effects of the disease.

Researchers from Murdoch University in Australia and the University of Cambridge in the UK collected blood plasma specimens from a group of COVID-19 positive patients.

They matched them with the samples of a control group of healthy age and body mass matched participants to determine the key metabolic differences between the groups.

The samples revealed a profound biological fingerprint of the disease that includes elements of liver dysfunction, dyslipidaemia, diabetes, and coronary heart disease risk, the researchers said.

These have all been found to be related to the long-term effects in patients that were affected by the original SARS virus, they said.

These fingerprints mark systemic changes in biochemistry and are irrespective of the time of collection during the active disease process and independent of the overall severity of respiratory symptoms, according to the researchers.

“Perhaps the most important observation is that the disease involves multiple organs and the majority of the patients show signs of newly presenting diabetes and liver damage irrespective of the severity of the lung symptoms,” said Professor Jeremy Nicholson from Murdoch University.

“Many of the metabolic features that we pick up are not part of routine clinical chemical testing, and this has immediate patient management implications because these morbidities might be occurring under the radar of the current testing paradigms as they can be quite subtle,” said Nicholson.

The researchers said these emergent pathologies need to be managed at the same time as the acute respiratory problems to optimise patient recovery.

“What we do not know is how persistent these symptoms are or whether they change long term disease risks for recovered patients,” Nicholson said. PTI

Covid-19: What you need to know today (Hindustan Times: 2020825)

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

Do we know enough about the strains of the Sars-CoV2 virus in India? How many strains are there? Is there one dominant strain? Are there multiple strains?

Last week, Malaysia claimed to have discovered a strain that was “10 times more infectious” and “easily spread by a superspreader”, but as researchers around the world were quick to point out, while this strain might have been new to that country, it was the predominant strain in most parts of the world even as far back as March and April (including in Europe). Called the G clade (a biological term meaning descendants of a common ancestor), this strain is the dominant strain in India. And it is, unfortunately, a virulent one, which could perhaps explain the virus’s run through the country; India ended Monday with 3.16 million cases of Covid-19, of which 762,051 were active. It saw 58,532 deaths till Monday night.

Around the same time the Malaysian authorities made their claim – resulting in sensational headlines around the world – researchers in Singapore wrote in a study published in The Lancet that a variant of Sars-CoV2 with some of its DNA missing actually caused a milder infection than the other strain. In a small study, it was found that people in whom this strain was found did not require either oxygen support or to be put on the ventilator.

Compared to many other viruses, Sars-CoV2 has stayed relatively stable – and that is both a good thing and a bad thing. It is good because it means vaccines currently under development

have a high chance of succeeding. It is a bad thing because there were hopes during the initial weeks of the pandemic that, like some viruses do, Sars-CoV2 would mutate into an unviable strain and taper off.

The ability of viruses to mutate is one reason why some experts are worried about Russia's Sputnik-V vaccine, which hasn't undergone the kind of rigorous tests any such vaccine should – an ineffective vaccine may, far from proving to be a cure, merely cause the virus to mutate, perhaps into something far more dangerous.

Not that Sars-CoV2 in its current form is benign. Around the world, researchers and doctors no longer see Covid-19 as a respiratory disease – it affects everything from the kidneys to the brain – and are beginning, especially as they set out to answer questions about long-Covid, to believe that it could be much more. Long-Covid refers to the sometimes debilitating and long-drawn-out fallout of Covid-19 that some patients suffer – sometimes even without being seriously ill. Those trying to find out more about long-Covid believe that one explanation for it could be that Covid-19 affects at least some patients the same way an autoimmune disorder does. An autoimmune disease is simply one where the immune system attacks the host (or an organ of the host), or one where it weakens the body's response to infections. While this (accepting Covid-19 as an autoimmune disease) could explain some things, more research is needed before it can be classified as such.

Interestingly, one of the most promising lines of treatment for autoimmune diseases involves the use of monoclonal antibodies (called so because the antibodies are all made up of identical cells, each of which is cloned from the same parent). Several companies (Regeneron Pharmaceuticals, Eli Lilly) are testing monoclonal antibodies for Covid-19. HT's health editor Sanchita Sharma has been writing about them from early July, from around the time Regeneron's monoclonal antibody REGN-COV2 entered Phase 3 trials. Scientists believe that the use of monoclonal antibodies early on in the treatment of Covid-19 could save more lives.

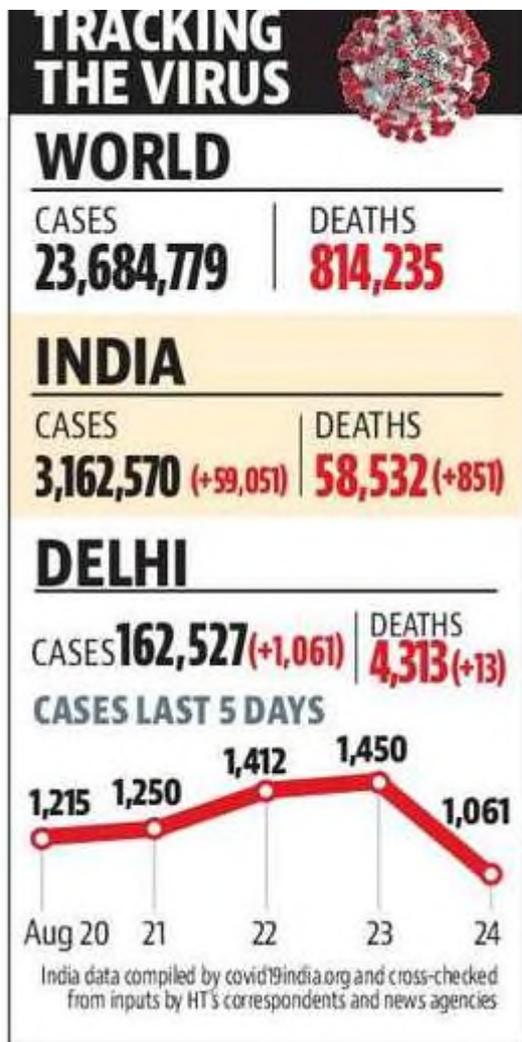
Another treatment for autoimmune diseases involves the use of interferons – proteins released by the body's immune system and which provoke, regulate, or amplify the response to pathogens. And companies are experimenting with interferons, too, in the treatment of Covid-19. A study reported in July, and conducted by the University of Southampton and a company Synairgen, showed that an inhaled interferon helped Covid-19 patients recover faster.

A vaccine is necessary and important, but we'd do well to keep track of the work being done on interferons and monoclonal antibodies.

Covid danger - RESPIRATORY:

Covid danger: Effects may linger long after recovery NOT JUST RESPIRATORY: Autoimmune, neurological, cardio problems dog cured patients (Hindustan Times: 2020825)

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



Clinicians the world over are increasingly treating Covid-19 as more than a respiratory disease, with patients reporting neurological, autoimmune and cardiovascular symptoms that can

manifest as strokes, heart attacks, multisystem inflammatory syndrome, cytokine storm, loss of taste and smell, and fatigue that may occur and last for weeks after recovery.

Close to eight months since the disease first came to light, and after 23.7 millions infections and 814,000 deaths across the world, the range of effects the Sars-Cov2 has had on people adds to the volume of many unknowns about a virus that has caused the first pandemic in a century.

“Around 50% patients have residual symptoms post recovery, which range from fatigue and weakness to breathlessness that requires oxygenation at home even after testing negative for Covid-19. In some people, the symptoms can persist for weeks,” said Dr Rajesh Chawla, senior pulmonologist and critical care specialist at Indraprastha Apollo Hospitals in Delhi, where he has been treating Covid-19 patients since the hospital established isolation wards on March 26.

One of his patients is Achal Jain, 53, who has been experiencing breathlessness, exhaustion and headaches since he recovered from Covid-19 four months ago. “Four people from our family were hospitalised with coronavirus in April after we contracted it from a migrant camp where we went to feed the hungry. We all recovered, but I still feel tired and have trouble sleeping, even though I did not need ICU admission,” said Jain, a businessman who lives in Yamuna Vihar in north-east Delhi.

Long Covid

While there is no peer-reviewed data on such long Covid, a survey of 1,567 people on Facebook page called Survivors Corps showed long-term symptoms stretched from extreme fatigue to difficulty focusing and moving. While all long-haulers suffered from fatigue, more than half had difficulty breathing, concentrating, exercising and sleeping, while at least 40% had anxiety, memory problems and dizziness.

A study of 110 patients treated for Covid in a hospital in Bristol, UK, found 75% were experiencing at least one symptoms three months after recovery, with breathlessness, fatigue and muscle ache reported by 81 patients long after being diagnosed free of disease.

These symptoms overlap with those of patients with chronic fatigue syndrome (myalgic encephalomyelitis), which is a disease of unknown etiology.

“Although a causal link between Sars-CoV2 and the appearance of autoimmune and auto-inflammatory diseases has not yet been firmly established, it is suggested by the temporal association with the current Covid-19 pandemic and the history of exposure of affected patients to Sars-CoV2,” according to a study in the scientific journal, Nature Reviews Rheumatology, on June 4.

Immune threat

Emerging reports show Sars-CoV2 infection is followed by various autoimmune and auto-inflammatory diseases, including multisystem inflammatory syndrome in children. “Early diagnosis of Covid-19-linked autoimmune and auto-inflammatory diseases, and prompt initiation of therapy, is crucial for successful recovery and preventing end-organ damage and fatality,” said the Nature study, which suggested that Sars-CoV2 could act as a direct trigger of autoimmune and/or auto-inflammatory conditions either by molecular mimicry or some other, unknown mechanisms.

“When Sars-Cov2 attaches to the spike protein ACE-2, it activates the cytokine release syndrome that activates immune cells to increase inflammation. The pro-inflammation cytokines include IL-1, IL-6 and IL-10. The chief among them is IL-6 that causes direct damage to cells and triggers other cells to release cytokines, leading to damage to all organs with ACE-

2, which include the lungs, heart, blood vessels, kidneys, liver and gastrointestinal tract,” said Arvinder S Soin, chairman of the Medanta Liver Transplant Institute, Medanta-The Medicity, Gurugram.

“IL-6 has been implicated in triggering a cytokine storm and in the pathogenesis of myocarditis, which explains why drugs that block IL-6 like the steroid dexamethasone and monoclonal antibodies tocilizumab and sarilumab benefit patients with Covid-19,” added Dr Soin, who is the national lead of the Indian multi-centre trial on Tocilizumab (a drug used to treat autoimmune conditions) in moderate and severe Covid-19.

Blood vessel trouble

Heart attacks and stroke after recovery have also been reported in otherwise healthy patients. Heart images of people taken 10 weeks after Covid-19 infection found 78 of 100 had cardiac involvement, and 60% had ongoing myocardial inflammation, which was independent of pre-existing conditions, severity and course of the illness, and the time from the original diagnosis, according to a study published on July 27 in the journal JAMA Cardiology.

“A study of patients in Wuhan, China, found 5% experienced stroke. Neurological symptoms were seen in 36.4% of patients, but were more common in patients with severe disease according to respiratory status, which included stroke, impaired consciousness and muscle injury,” said Dr Pushpendra Renjen, senior neurologist, Apollo Hospital. The study was reported in JAMA Neurology in April.

“The disease is just eight months old, and though we are learning with each passing day, it will take years to fully understand the long-term effects of Covid-19,” added Dr Renjen.

Way forward

With long Covid increasingly being reported in patients in India, the Union health ministry has begun formulating guidelines on the management of post-recovery long-haul complications. “A section of recovered patients experience respiratory or heart-related issues, renal or liver complications, or even ophthalmological side effects. A joint monitoring group chaired by director general health services (Dr Rajiv Garg) is studying data from Covid-19 hospitals across India to draft guidelines on the long-term care required,” said Union health secretary Rajesh Bhushan.

People with long Covid met World Health Organisation (WHO) director general Dr Adhanom G Tedros on Friday. “These patients want three things: recognition, rehabilitation and research. Recognition of their disease, appropriate rehabilitation services, and more research to be done into the long-term effects of this new illness. We still know relatively little about the long-term effects,” said Dr Tedros, in a statement.

“My message to these patients was... we are committed to working with countries to ensure you receive the services you need, and to advancing research to serve you better,” he said.

Vaccine (The Asian Age: 2020825)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=15061341>

THE ASIAN AGE

25 AUGUST 2020

Letter a wake-up call to Congress on its future

The serious issues and concerns raised in a letter by a galaxy of senior Congress leaders, including several former Union ministers and former CMs, to Mrs Sonia Gandhi earlier this month are far-reaching, and how the party handles it will be crucial not only to its own future but to the state of our polity. While Mrs Gandhi was quick to call a meeting of the CWC to discuss the matter on Monday, the questions it raised are too wide-ranging to be resolved at one meeting.

The letter flagged the sense of drift in the party that many raised of late, and sought a “full-time” and “effective” leadership that will be “visible” and “active”. To an extent this could be seen as criticism of Mrs Gandhi’s stewardship for the past 12 months as interim president. But it would be wrong to regard her as its target -- Mrs Gandhi is hugely respected by all sections of the Congress -- and the letter’s primary aim might have been to deter any attempt to reinstall her son Rahul as Congress president, interim or otherwise. Mr Gandhi’s two-year term as chief wasn’t a great success, though he did lead it to a string of Assembly victories, before presiding over the Congress’ second successive Lok Sabha debacle in mid-2019, after which he swiftly resigned. Many Congressmen are unhappy that though not having any formal role, he plays an active role behind the scenes and takes decisions that “create confusion”. Many are upset that he doesn’t listen to them or they don’t have any access to him.

It’s undeniable that the Gandhis -- Sonia, Rahul and Priyanka -- are the Congress’ only nationally recognisable figures. All others are identified with a state or region. That gives them a unique standing. But that said, the Congress must also accept that if the Gandhis -- for whatever reason -- want to pass on the mantle, India’s only national Opposition party must make other arrangements. If it showed wisdom, it would be a huge mistake to treat the letter’s signatories as dissenters or rebels -- let alone accuse them of playing the BJP’s game. Most have served the Congress for decades, many all their lives. It would do well to treat the letter as a wake-up call, on how to revitalise India’s grand old party so it can take on the BJP as well as several regional rivals.

Six years after it lost power to the Narendra Modi-led BJP, and again last year, the Congress failed to make any honest introspection on the reasons for successive defeats. Any problem cannot be tackled until one acknowledges it in the first place, but the Congress prefers to brush all inconvenient truths under the carpet. That is no solution. In any democracy, dissent, discussion and debate only strengthens a party, not weakens it. Congress leaders could look towards America’s Democratic Party, for instance, on how widely divergent views, freely expressed, built a stronger organisation to focus on the removal of Donald Trump. In India, the issues are many -- the government’s handling of the economy, the pandemic, the Chinese intrusion, what stand to take on the Ram Mandir -- which the party should discuss in depth before taking on the BJP. A stronger Congress means a stronger Opposition, which is vitally needed in India so that a government with a sweeping parliamentary majority can be kept in check.

Coronavirus

Coronavirus | Prompt identification, isolation, efficient treatment lead to declining mortality rate in India: Ministry (The Hindu: 2020825)

<https://www.thehindu.com/sci-tech/health/coronavirus-prompt-identification-isolation-efficient-treatment-lead-to-declining-mortality-rate-in-india-ministry/article32429723.ece>

The number of people recuperating from COVID-19 has crossed 23 lakh pushing the recovery rate to over 75%.

India's coronavirus (COVID-19) tests per million rose sharply to 26,016 as cumulative tests surged to 3.59 crore, the Health Ministry said on Monday

Mann Mela,

Mann Mela, a digital museum for your mental health (The Hindu: 2020825)

<https://www.thehindu.com/sci-tech/health/mann-mela-a-digital-and-travelling-mental-health-museum/article32429428.ece>

Mann Mela, a digital and travelling mental health museum shares first-person stories of trauma, self-acceptance, recovery and growth

It is Persepolis in colour and set in India — Imphal to Mumbai. Sadam Hanjabam has made a quasi-graphic novel of his journey in self-acceptance, from rising out of a mental health crisis to establishing Ya_All , a youth and queer-led and -focussed organisation in the North-eastern region of India.

Intensive lifestyle

Study reveals intensive lifestyle intervention focused on weight loss lowers obesity-related cancer risk (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149970.htm>

An intensive lifestyle intervention (ILI) aimed at weight loss lowered incidence of obesity-related cancers in adults with overweight or obesity and type 2 diabetes, according to a study.

The study was published online in Obesity, the flagship journal of The Obesity Society. This study is the only randomised clinical trial that has examined long-term cancer outcomes in an ILI focused on weight loss.

Previous observational studies have shown obesity is associated with increased risk of some cancers, but there was no evidence from clinical trials to date that have evaluated whether ILI for weight loss can reduce the risk of cancer.

"Healthcare providers should be encouraged to provide such counseling or refer patients with obesity to intervention programs that help people manage their weight. Moreover, establishing an environment with easier access to healthy food and physical activities is the foundation of obesity and cancer prevention," said Hsin-Chieh "Jessica" Yeh, Ph.D., associate professor of medicine, epidemiology, and oncology and associate director, Welch Center for Prevention, Epidemiology, and Clinical Research at Johns Hopkins University in Baltimore, Md. Yeh is the corresponding author of the study.

Data from the Look AHEAD (Action for Health in Diabetes) trial were examined for this study. Researchers investigated whether participants randomised to the ILI designed for weight loss would have reduced overall cancer incidence, obesity-related cancer incidence, and cancer mortality as compared with the Diabetes Support and Education (DSE) comparison group.

For the analysis of cancer outcomes, 4,859 participants who had not reported a cancer diagnosis at baseline (except for nonmelanoma cancer) were included. Participants had to meet the following criteria 45 to 76 years of age, body mass index greater than 25, glycated hemoglobin less than 11 percent, blood pressure readings less than 160/100 mm Hg, triglyceride levels less than 600 mg/dL and completion of a maximal graded exercise test. Participants were randomly assigned to an ILI or a DSE by a web-based data management system between August 22, 2001, and April 30, 2004, at Wake Forest School of Medicine in Winston-Salem, NC.

The ILI was designed to achieve and maintain weight loss of at least 7 percent by facilitating reduced caloric intake and increased physical activity. Specific intervention strategies included a calorie goal of 1,200 to 1,800 kcal/d, the use of meal replacement products and at least 175 minutes of moderate-intensity physical activity per week. For the DSE comparison group, diabetes support and education was provided through three group sessions per year on diet, exercise and social support during years one through four. In subsequent years, the frequency was reduced to one session annually.

After an average follow-up of 11 years, 684 participants (332 in ILI and 352 in DSE) were diagnosed with cancer. The incidence rates of obesity-related cancers were 6.1 and 7.3 per 1,000 person-years in ILI and DSE, respectively, with a hazard ratio (HR) of 0.84 (95 percent confidence interval (CI), 0.68 to 1.04). No significant difference existed between the two groups in total cancer incidence (HR 0.93, 95 percent CI, 0.80 to 1.08), the incidence of non-obesity related cancers (HR 1.02, 95 percent CI 0.83 to 1.27) or total cancer mortality (HR, 0.92, 95 percent CI 0.68 to 1.25).

Researchers found an ILI aimed at weight loss lowered incidence of obesity-related cancers by 16 per cent in adults with overweight or obesity and type 2 diabetes. Researchers noted the sample size likely lacked the power to determine effect sizes of this magnitude and smaller.

"While underpowered to detect significant differences, this analysis of Look AHEAD data is an important contribution, as it is one of the first studies to provide empirical data to suggest that a weight loss-focused lifestyle intervention can help to lower risk of obesity-related cancers," said Tiffany L. Carson, Ph.D., MPH, assistant professor, Division of Preventive

Medicine, Department of Medicine, the University of Alabama at Birmingham. Carson was not associated with the research.

Carson added, "In addition to having adequate sample sizes to test for effects which will likely require pooled data, future studies should also explore the magnitude of weight loss that is needed to lower risk for obesity-associated cancers."

Yoga and Physical Fitness

Yoga linked with improved symptoms in heart patients (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149946.htm>

Yoga linked with improved symptoms in heart patients
Washington , August 24: A new study published and presented at the ESC Congress 2020, suggests that yoga could help patients manage the symptoms of atrial fibrillation.

Atrial fibrillation is the most common heart rhythm disorder. One in four middle-aged adults in Europe and the US will develop the condition, which causes 20-30 percent of all strokes and increases the risk of death by 1.5-fold in men and two-fold in women.

Reduced quality of life is common, and 10-40 per cent of patients are hospitalised each year. Symptoms of atrial fibrillation include palpitations, racing or irregular pulse, shortness of breath, tiredness, chest pain and dizziness.

"The symptoms of atrial fibrillation can be distressing. They come and go, causing many patients to feel anxious and limiting their ability to live a normal life," said study author Dr. Naresh Sen of HG SMS Hospital, Jaipur, India.

This study investigated whether yoga could ease symptoms in patients with atrial fibrillation. The study enrolled 538 patients in 2012 to 2017. Patients served as their own controls.

For 12 weeks they did no yoga, then for 16 weeks patients attended 30-minute yoga sessions every other day, which included postures and breathing. During the yoga period, patients were also encouraged to practice the movements and breathing at home on a daily basis.

During both study periods, symptoms and episodes of atrial fibrillation were recorded in a diary. Some patients also wore a heart monitor to verify atrial fibrillation episodes. Patients completed an anxiety and depression survey and a questionnaire assessing their ability to do daily activities and socialise, energy levels and mood. Heart rate and blood pressure were also measured. The researchers then compared outcomes between the yoga and non-yoga periods.

During the 16-week yoga period, patients experienced significant improvements in all areas compared to the 12-week non-yoga period. For example, during the non-yoga period, patients experienced an average of 15 symptomatic episodes of atrial fibrillation compared to eight

episodes during the yoga period. Average blood pressure was 11/6 mmHg lower after yoga training.

"Our study suggests that yoga has wide-ranging physical and mental health benefits for patients with atrial fibrillation and could be added on top of usual therapies," said Dr. Sen.

Smokeless tobacco

Unregulated sale of smokeless tobacco can spread Covid, doctors warn (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149879.htm>

Given their ability to abet the spread of coronavirus, doctors and health professionals are advocating stringent regulations on chewing tobacco and smokeless tobacco products like 'gutka', and 'pan masala' variants.

Doctors and advocacy groups are demanding similar restrictions on chewing and non-smoking tobacco products as on smoking tobacco products.

Shram, a self-help group working in collaboration with doctors and professionals in the field of health and education to build awareness against tobacco and alcohol abuse, has appealed to Union Minister of Health and Family Welfare Harsh Vardhan and Union Finance Minister Nirmala Sitharaman to regulate the unorganised manufacturing, distribution and sale of smokeless tobacco and other non-virginia tobacco in India to curtail their widespread consumption and protect the health of citizens.

Dr Pranasmita Kalita from Shram made an appeal for introducing a regulatory framework for trading of smokeless tobacco.

"Smokeless tobacco industry in India is majorly an unorganised sector that sees producers, manufacturers and distributors take advantage of it being outside any regulatory or taxation structure. This has led to widespread exploitation of labour and massive tax evasion. The need of the hour lies in the government taking into account this crisis and introduce policies and laws to regulate and ensure legally taxed trading of smokeless tobacco and its products," he said.

Meanwhile, doctors also opined that the need for regulations to curtail use of smokeless tobacco is even more significant during the COVID-19 pandemic as this variant of tobacco is mostly chewed and spat, which aids in the spread of coronavirus. "It is well proven that the virus could be airborne. The saliva of a person carries the virus which can travel on aerosols and infect people in proximity," said Dr Chandragouda Dodagoudar, Director, Medical Oncology, Aakash Healthcare and Super Speciality Hospitals, Dwarka.

Dr Dodagoudar also added that COVID-19 or not, India needs a strict regulation policy against smokeless tobacco. He estimated that 80 per cent of cancer cases his hospital receives are

consumers of chewing tobacco products. India is considered a hotspot of smokeless tobacco consumption as per many researches.

According to a study published in BMC Medicine, the country accounts for 70 per cent of deaths globally due to chewing of smokeless tobacco. According to the Global Adult Tobacco Survey, the average age of tobacco consumers in India is 17.4 years.

While the country has an expansive set of rules and laws to restrict and regulate tobacco used in cigarettes and cigars at par with international norms, smokeless tobacco products and their variants do not fall under this umbrella despite 85 per cent of them being homegrown.

"Steps to tackle the sale, manufacturing and production of smokeless tobacco are of utmost importance now during COVID-19 as products derived from this category of tobacco are chewed and spat instead of being swallowed or breathed in. A definitive regulatory policy and subsequent taxing can play a part in curtailing its widespread consumption," Dr Kalita said.

Cancer treatment

Cancer treatment may accelerate ageing process in young patients (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149833.htm>

Researchers have found that the expression of a gene associated with ageing is higher in young patients with cancer after chemotherapy treatment and in young cancer survivors who are frail.

The study, published in the peer-reviewed journal *CANCER*, examined the effects of cancer and its treatment on the ageing process.

Previous research has shown that a protein called p16INK4a, which slows cell division, is produced at higher levels as a person ages. Using the expression of the gene that codes for p16INK4a as a marker of age, the research team examined immune cells circulating in the blood of young adult survivors of childhood cancers and of children and adolescents newly diagnosed with cancer.

"Higher expression of p16INK4a in peripheral blood lymphocytes has been described in older adults following chemotherapy, but prior to this study, not in young adult survivors," said study lead author Andrew Smitherman from the University of North Carolina in the US.

"This study is important as we try to understand the biological mechanisms underlying the manifestations of early ageing in this population," Smitherman added.

The team first analysed cells from 60 survivors and compared them with cells from 29 age-matched individuals without a history of cancer. The findings showed that expression of the gene that codes for p16INK4a was higher in survivors, representing a 25-year age acceleration.

Nine survivors were frail, and they had a higher level of expression compared with survivors who were not frail, representing a 35-year age acceleration, the study said.

The researchers also found that among the nine children and adolescents part of the study, who had been newly diagnosed of cancer, expression was higher after treatment with chemotherapy than before treatment.

Dr. Smitherman noted that elevated p16INK4a expression as a marker of ageing may help identify cancer survivors at the risk of developing frailty and functional disability. "Additionally, expression of p16INK4a may prove useful as a measure to study treatments aimed at mitigating the early ageing effects of cancer treatment," he said.

Common blood pressure medications

Study finds none of most common blood pressure medications increased risk of depression, some lowered it(New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149755.htm>

None of the 41 most common high blood pressure medications increased the risk of depression, while nine medications appeared to lower it, according to a study from Denmark.

The study was published today in Hypertension, an American Heart Association journal.

Depression is common among patients with high blood pressure (also called hypertension), heart disease, and stroke, and this is the first study to systematically investigate whether individual blood pressure medications might influence the risk of developing depression.

"It was highly surprising that none of the 41 most-used anti-hypertensives was associated with increased risk of developing depression and that some within each of the three classes of anti-hypertensives showed protective effects against depression," said Lars Vedel Kessing, M.D., D.M.Sc., lead author of the study and professor of psychiatry at the Psychiatric Center Copenhagen and the University of Copenhagen, Faculty of Health and Medical Sciences in Denmark.

Researchers analysed real-life data on more than 3.7 million adults who took any of the 41 most commonly prescribed high blood pressure medications, as reported in health records across several Danish health registries from 2005 to 2015. Thirty-seven of these medications are approved for use in the US by the US Food and Drug Administration. Patients who had been diagnosed with depression or previously prescribed antidepressants were excluded.

The four main categories of blood pressure-lowering medications were reviewed angiotensin agents (angiotensin converting enzyme inhibitors, ACE inhibitors and angiotensin II receptor blockers, or ARBs); calcium antagonists; beta-blockers; and diuretics.

The analysis found

None of the 41 most common high blood pressure medications increased the risk of depression.

Nine medications - a few within each category - significantly lowered depression risk 2 of 16 angiotensin agents, 3 of 10 calcium antagonists, and 4 of 15 beta-blockers.

Diuretic medications showed no impact on depression risk.

The nine individual high blood pressure medications found to significantly lower depression risk are enalapril and ramipril (angiotensin agents); amlodipine, verapamil, and verapamil combinations (calcium antagonists); and propranolol, atenolol, bisoprolol, and carvedilol (beta-blockers). All nine are approved for prescribing in the US.

"It is possible that the mechanism involved in decreasing the risk of depression is the anti-inflammatory effect among these nine medications," Kessing continued. "In the future, it will be important to compare the inflammatory properties of these nine hypertensives that lowered depression risk." (Low-grade inflammation is common in high blood pressure and heart disease, as well as in depression.)

"Our study's findings could help guide prescriptions for patients with high blood pressure who are at risk of developing depression, those with prior depression or anxiety, and patients with a family history of depression," said Kessing. "However, if a patient is doing well with their current blood pressure prescription, there is no reason to switch. If depression develops, a medication switch may be considered to one of the nine anti-hypertensive medications that lowered depression risk."

The findings of this study are likely generalisable to other populations. However, limitations of the study include it relied on a clinical diagnosis of depression, that it was not a controlled clinical trial that randomly selected, which medication patients receive and that the impact on depression risk was analysed for each high blood pressure medication individually; they were not tested side by side or as combinations of one or more other antihypertensive medications.

COVID-19

COVID-19 cannot be transmitted through breast milk, study suggests (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149399.htm>

Breast milk cannot transmit the COVID-10 virus to the infant, according to a recent study.

The study, which was published in the online edition of JAMA was conducted by the researchers from the University of California San Diego School of Medicine and University of California Los Angeles.

The study examined 64 samples of breast milk collected by the Mommy's Milk Human Milk Research Biorepository from 18 women across the United States infected with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

Although one sample tested positive for viral RNA, subsequent tests found that the virus was unable to replicate, and thus unable to cause infection in the breastfed infant.

"Detection of viral RNA does not equate to infection. It has to grow and multiply in order to be infectious and we did not find that in any of our samples," said Christina Chambers, PhD, MPH, co-principal investigator of the study, professor of paediatrics at UC San Diego School of Medicine, director of Mommy's Milk Human Milk Research Biorepository and co-director of the UC San Diego Center for Better Beginnings.

"Our findings suggest breast milk itself is not likely a source of infection for the infant," Chambers added.

The current recommendations to prevent transmission while breastfeeding are hand hygiene and sterilising pumping equipment after each use.

"In the absence of data, some women infected with SARS-CoV-2 have chosen to just not breastfeed at all," said Grace Aldrovandi, MD, co-principal investigator of the study, chief of the Division of Infectious Diseases at UCLA Mattel Children's Hospital and a professor of paediatrics in the David Geffen School of Medicine at UC Los Angeles.

"We hope our results and future studies will give women the reassurance needed for them to breastfeed. Human milk provides invaluable benefits to mom and baby," added Aldrovandi.

Early breastfeeding is associated with a reduced risk of sudden infant death syndrome and obesity in children, as well as improved immune health and performance on intelligence tests. In mothers, breastfeeding has been associated with lower risks for breast and ovarian cancer, cardiovascular disease and type 2 diabetes.

The researchers also mimicked conditions of the Holder pasteurization process commonly used in human donor milk banks by adding SARS-CoV-2 to breast milk samples from two different donors who were not infected.

The samples were heated to 62.5-degree celsius for 30 minutes and then cooled to 4-degree celsius. Following pasteurization, infectious virus was not detected in either sample.

"This is a very positive finding for donor milk, which so many infants, especially those born premature, rely on. Our findings fill in some important gaps, but more studies are needed with larger sample sizes to confirm these findings," said Chambers.

Chambers said future work will not only look at whether breast milk is free of the virus, but also whether it contains active antiviral components. For example, antibodies to SARS-CoV-2 that women may produce after exposure to the virus and then transfer to their infants through breast milk, protecting them from COVID-19.

BP medication

BP medication may improve Covid-19 survival rates: Study (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149310.htm>

In a fight against the novel coronavirus, researchers have found that medication for high blood pressure could improve Covid-19 survival rates and reduce the severity of the infection.

For the study, published in the journal *Current Atherosclerosis Reports*, the research team studied 28,000 patients taking antihypertensives -- a class of drugs that are used to treat hypertension (high blood pressure).

They found that the risk of severe Covid-19 illness and death was reduced for patients with high blood pressure who were taking Angiotensin-Converting Enzyme inhibitors (ACEi) or Angiotensin Receptor Blockers (ARB).

"At the start of the pandemic, there was concern that specific medications for high blood pressure could be linked with worse outcomes for Covid-19 patients," said study lead author Vassilios Vassiliou from the University of East Anglia in the UK.

"We wanted to find out what the impact of these medications is for people with Covid-19," Vassiliou added. Therefore, the research team studied the outcomes for patients taking antihypertensives -- looking particularly at what they call 'critical' outcomes such as being admitted to intensive care or being put on a ventilator, and death.

The team analysed data from 19 studies related to Covid-19 and ACEi and ARB medications. The meta-analysis involved more than 28,000 patients and is the largest and most detailed such study to date.

They compared data from Covid-19 patients who were taking ACEi or ARB medications with those who were not -- focusing on whether they experienced 'critical' events (admission to intensive care and invasive or non-invasive ventilation) and death.

"We found that a third of Covid-19 patients with high blood pressure and a quarter of patients overall were taking an ACEi/ARBs," Vassiliou said. This is likely due to the increased risk of infection in patients with co-morbidities such as cardiovascular diseases, hypertension and diabetes.

"But the really important thing that we showed was that there is no evidence that these medications might increase the severity of Covid-19 or risk of death," the study authors wrote.

"On the contrary, we found that there was a significantly lower risk of death and critical outcomes, so they might, in fact, have a protective role -- particularly in patients with hypertension. Covid-19 patients with high blood pressure who were taking ACEi/ARB medications were 0.67 times less likely to have a critical or fatal outcome than those not taking

these medications. Our research provides substantial evidence to recommend continued use of these medications if the patients were taking them already," the study authors noted.

Vitamin D supplementation

Influence of vitamin D supplementation on a baby's gut microbiome: Study (New Kerala: 2020825)

<https://www.newkerala.com/news/2020/149250.htm>

A team of researchers has now shed light on the influence of vitamin D supplementation on a baby's developing gut microbiome.

The study, published in the journal *Gut Microbes*, found that vitamin D supplementation is associated with compositional changes in a baby's microbiome--notably a lower abundance of the bacteria *Megamonas*--at three months of age.

"Vitamin D plays an important role in early life, supporting bone metabolism and the healthy development of a baby's immune system," said senior author Anita Kozyrskyj, a professor in the Department of Pediatrics at the University of Alberta and a CHILD Cohort Study investigator.

"Most infants in North America receive vitamin D, either as a supplement to breastfeeding or as an ingredient in commercial infant formulas, so we wanted to understand the association between vitamin D and the presence or abundance of key bacteria within a baby's intestinal tract," the professor added.

The researchers examined faecal samples taken during home visits from 1,157 infants who are part of the CHILD Cohort Study--a national study that is following nearly 3,500 Canadian children from before birth to adolescence with the primary goal of discovering the root causes of allergies, asthma, obesity, and other chronic diseases.

They found that direct vitamin D supplementation of infants with vitamin D drops was associated with a lower abundance of *Megamonas*, regardless of how a baby was fed (breastfed or formula-fed).

"While little is known about *Megamonas* in infancy, our previous research suggests there may be a link between this bacterium and asthma or respiratory viral infections, so vitamin D may offer additional benefits for childhood health that should be studied further," added Kozyrskyj, also a member of the Women and Children's Health Research Institute.

The researchers also assessed the association between infant and maternal vitamin D supplementation and the presence of *Clostridioides difficile* (*C. difficile*) in a baby's gut. "Some infants carry the diarrhea-causing bacterium *C. difficile* in their guts without any symptoms.

However, when the levels of gut bacteria become imbalanced, this particular bacterium can multiply, causing illness and increasing the susceptibility to chronic disease later in childhood,"

commented first author Kelsea Drall, an MSc graduate from the U of A and an AllerGen trainee.

The study found that nearly 30 per cent of the infants carried *C. difficile*, but there was a lower incidence of the bacterium among exclusively breastfed infants. However, neither infant supplementation with vitamin D drops nor maternal vitamin D supplementation during pregnancy or after delivery was associated with *C. difficile* colonization. "Interestingly, maternal consumption of vitamin D-fortified milk was the only factor that reduced the likelihood of *C. difficile* colonization in infants," added Drall.

According to Kozyrskyj, an infant's gut microbiota undergoes a rapid change in early life.

Therefore, it is critical to understand the factors associated with microbial communities populating the infant gut during this key developmental period.

"Low vitamin D levels have been associated with a respiratory syncytial virus (RSV)--a common lung infection among infants--and more recently, susceptibility to COVID-19 disease," she pointed out.

"In the CHILD Cohort Study, we have a unique opportunity to follow our study children as they get older to understand how microbial changes observed as a result of dietary interventions may be associated with later health outcomes such as asthma and viral infections," she added.

Corona Infection

कोरोना संक्रमण से ठीक होने के बाद भी हो सकती है सांस संबंधी समस्या (Amar Ujla: 2020825)

<https://www.amarujala.com/lifestyle/fitness/respiratory-problems-may-occur-even-after-recovery-from-coronavirus-infection?src=hl>

कोरोना वायरस के संक्रमण से ठीक होने के बाद लोग सांस संबंधी समस्याओं के सबसे ज्यादा शिकार हो रहे हैं। ऐसे लोगों के कोरोना से ठीक होने के बाद क्रॉनिक ऑब्सट्रक्टिव पल्मोनरी डिजीज और उच्च रक्तचाप समेत अन्य बीमारियों के प्रति अधिक संवेदनशील होने की संभावना है। शोधकर्ताओं ने यह खुलासा कोरोना से स्वस्थ हो चुके 2,900 से अधिक लोगों की जांच के बाद किया है। स्वास्थ्य विशेषज्ञों का कहना है कि जो लोग पहले से ही श्वसन तंत्र संबंधी समस्याओं से जूझ रहे हैं, यदि वे कोरोना से संक्रमित हो जाते हैं तो उन्हें ठीक होने के बाद भी अतिरिक्त सतर्कता बरतने के साथ ही कोरोना से बचाव के लिए जारी दिशानिर्देशों का सख्ती से पालन करने की जरूरत है।

Corona Virus

कोरोना वायरस किन अंगों को कैसे बर्बाद कर रहा है? रिसर्च स्टडी में सामने आई चौंकाने वाली जानकारियां(Amar Ujla: 2020825)

<https://www.amarujala.com/photo-gallery/lifestyle/fitness/how-coronavirus-damage-human-organ-covid-effects-on-lungs-liver-kidney-sars-cov-2-effect?src=hl>

कोरोना वायरस मानव शरीर में प्रवेश करने के बाद विभिन्न अंगों को प्रभावित करता है। संक्रमण गंभीर होने पर फेफड़े, किडनी और अन्य कई अंगों को यह बुरी तरह चोटिल कर देता है। द लैंसेट माइक्रोब में प्रकाशित रिसर्च स्टडी में बताया गया है कि वायरस के कारण जिन मरीजों की मौत हुई, उनके फेफड़ों और किडनियों पर चोट के निशान थे। इंग्लैंड में कोविड 19 मरीजों पर हुई पोस्टमार्टम एजामिनेशन पर इंपीरियल कॉलेज लंदन और इंपीरियल कॉलेज हेल्थकेयर एनएचएस ट्रस्ट ने यह स्टडी की। इस स्टडी में मामलों की संख्या कम थी, लेकिन यह पोस्टमार्टम एजामिनेशन की सबसे बड़ी स्टडी बताई जा रही है। शोधकर्ताओं का दावा है कि इस स्टडी से मरीजों के इलाज में मदद मिलेगी।
अगली स्लाइड देखें

India Coronavirus

India Coronavirus News: पिछले 24 घंटे में मरीजों से ज्यादा ठीक होने वालों की संख्या बढ़ी (Dainik Gagan: 2020825)

https://www.jagran.com/news/national-india-coronavirus-news-more-patients-recover-in-comparison-of-new-cases-in-the-last-24-hours-20666662.html?itm_source=website&itm_medium=homepage&itm_campaign=p1_component&utm_expid=.EV9lrgB0QnKoaDL62_wZVQ.0&utm_referrer=https%3A%2F%2Fwww.jagran.com%2F

कोरोना वायरस (COVID-19) को लेकर अच्छी खबर सामने आई है। पिछले 24 घंटे के दौरान नए ठीक होने वाले मरीजों की तदाद नए मामलों से ज्यादा रही। पिछले 24 घंटे में कोरोना के 60 हजार 975 मामले सामने आए हैं और 848 लोगों की मौत हो गई है। वहीं 66 हजार 550 मरीज ठीक हुए। इस दौरान नौ लाख 25 हजार 383 सैंपल टेस्ट हुए।

स्वास्थ्य मंत्रालय के अनुसार देश में अब तक कोरोना के कुल 31 लाख 67 हजार 324 मामले सामने आ गए हैं। इनमें से सात लाख चार हजार 348 एक्टिव केस हैं। 24 लाख चार हजार 585 मरीज ठीक हो गए हैं और 58 हजार 390 मरीजों की मौत हो गई है। रिकवरी रेट 76 फीसद के करीब और डेथ रेट 1.84 फीसद है। देश में अब तक कुल तीन करोड़ 68 लाख 27 हजार 520 सैंपल टेस्ट हुए हैं।

दिल्ली-महाराष्ट्र में कम हुए नए केस

दिल्ली और महाराष्ट्र में पिछले दिनों की तुलना में नए मामलों में कमी आई है। दिल्ली में 1,061 और महाराष्ट्र में 11,015 नए केस मिले हैं। जबकि, पिछले कुछ दिनों से दोनों ही जगह अधिक मामले मिल रहे थे, हालांकि रविवार को महाराष्ट्र में 10 हजार से कुछ अधिक केस मिले थे। दिल्ली में अब तक एक लाख 62 हजार 527 और महाराष्ट्र में छह लाख 93 हजार 398 संक्रमित पाए जा चुके हैं। दोनों राज्यों में क्रमशः 4,313 और 22,465 लोगों की मौत भी हो चुकी है। वहीं उत्तर प्रदेश में लगातार मामले बढ़ रहे हैं। राज्य में और 4677 नए केस मिले हैं और कुल संक्रमितों का आंकड़ा एक लाख 92 हजार 382 पर पहुंच गया है। राज्य में अब तक 2,987 लोगों की कोरोना ने जान भी ले ली है।

Coronavirus: वैक्सीन

Coronavirus: वैक्सीन नहीं आई, तो सर्दियों में और भी भयानक रूप ले लेगा कोरोना वायरस! (Dainik Gagan : 2020825)

https://www.jagran.com/lifestyle/health-coronavirus-will-get-worse-in-winters-if-theres-no-vaccine-20666670.html?utm_expid=.EV9lrgB0QnKoaDL62_wZVQ.0&utm_referrer=https%3A%2F%2Fwww.jagran.com%2Ftopics%2Fcoronavirus%3Fitm_source%3Dweb%26itm_medium%3Dheader%26itm_campaign%3Dcoronavirus

Coronavirus: वैक्सीन नहीं आई, तो सर्दियों में और भी भयानक रूप ले लेगा कोरोना वायरस!

Coronavirus चिंता का विषय यह है कि भले ही SARS-CoV-2 वायरस काफी उत्परिवर्तन नहीं कर रहा है जो कि वैक्सीन विकास के लिए अच्छी खबर है लेकिन यह अभी भी एक खतरनाक दर से फैल रहा है।

नई दिल्ली, लाइफस्टाइल डेस्क। Coronavirus: कोरोना वायरस पिछले साल 31 दिसंबर 2019 को चीन के वुहान में रहस्यमय निमोनिया जैसी बीमारी के रूप में सामने आया, जिसने जल्द ही पूरी दुनिया को अपनी चपेट में ले लिया। 8 महीनों में कोरोना वायरस दुनिया के 213 देशों में फैल चुका है। दो करोड़ से अधिक लोगों को बीमार कर चुका है और 8 लाख से ज्यादा लोगों की जान ले चुका है।

चिंता का विषय यह है कि भले ही SARS-CoV-2 वायरस काफी उत्परिवर्तन नहीं कर रहा है, जो कि वैक्सीन विकास के लिए अच्छी खबर है, लेकिन यह अभी भी एक खतरनाक दर से फैल रहा है।

इसलिए, बावजूद इसके कि दुनिया भर के शोधकर्ता नए कोरोना वायरस के लिए एक वैक्सीन तैयार करने के लिए बिजली की गति से काम कर रहे हैं, लेकिन फिर भी शायद उनकी रफ्तार धीमी पड़ जाए।

सर्दी के मौसम के साथ आ सकती है कोविड-19 की दूसरी लहर

Eating Out During COVID-19: महामारी के समय रेस्तरां जानें के लिए हैं बेताब, तो इन बातों का रखें ख्याल

Eating Out During COVID-19: महामारी के समय रेस्तरां जानें के लिए हैं बेताब, तो इन बातों का रखें ख्याल यह भी पढ़ें

सर्दियों का मौसम कुछ ज्यादा दूर नहीं है, ऐसे में वैश्विक स्वास्थ्य विशेषज्ञों का मानना है कि यह महामारी की दूसरी लहर ला सकता है, जो संभवतः पहले वाले की तुलना में अधिक खतरनाक साबित हो। हालांकि, ठंडे मौसम में वायरस कैसा व्यवहार करेगा, इस बारे में अनिश्चितता बनी हुई है। शुरुआती रिपोर्ट्स से पता चलता है कि यह सर्दियों के दौरान लंबे समय तक जीवित रह सकता है।

द प्रिंट में प्रकाशित एक रिपोर्ट के अनुसार, एक संक्रामक रोग विशेषज्ञ, क्लाउस स्टोह, जो पहले डब्ल्यूएचओ के साथ भी काम कर चुके हैं, का कहना है कि "इस वायरस का व्यवहार अन्य श्वसन से जुड़े रोगों से बहुत अलग नहीं होगा। सर्दियों के दौरान, ये भी वापस आ सकता है।"

बॉडी में बार-बार होने वाले ये 5 बदलाव इशारा करते हैं कमजोर इम्युनिटी की ओर, न करें इन्हें इग्नोर
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सर्दियों में बढ़ सकते हैं कोविड के मामले

यह एक गंभीर तथ्य है, जो हमें याद दिलाता है कि दुनिया को महामारी की एक और लहर से निपटने के लिए अच्छी तरह से तैयार होने की आवश्यकता है, आने वाली स्थिति अभी से अधिक गंभीर हो सकती है। यूके की मेडिकल साइंस अकादमी में हुई एक रिसर्च के मुताबिक, इस साल सर्दी का मौसम बेहद चुनौतीपूर्ण समय हो सकता है। ऐसा माना जा रहा है कि जनवरी / फरवरी 2021 में अस्पताल में मरीजों की संख्या के साथ मृत्यु की संख्या भी अधिक बढ़ जाएगी।

सेहत दुरुस्त रखने के साथ ही तनाव और डिप्रेशन से दूर रहने के लिए जिंक से भरपूर चीजों का करें सेवन
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यह भी पढ़ें

कैसे करें सर्दियों की तैयारी?

दुनियाभर के हेल्थ एक्सपर्ट्स का मानना है कि आने वाले सर्दियों के मौसम में कोरोना वायरस अधिक घातक हो जाएगा। वहीं, एक सफल वैक्सीन आने में कम से कम 6 महीने का वक्त है। क्योंकि सर्दी का मौसम वैक्सीन से पहले आ जाएगा, इसलिए हमें समाज के सबसे संवेदनशील और कमजोर वर्गों को संक्रमण से बचाने के लिए एक ठोस रणनीति बनाने की आवश्यकता है। सर्दी के मौसम में सामाजिक दूरी, हाथों की साफ सफाई और सभी तरह की सावधानियां बरतने में किसी तरह की कोताही जानलेवा साबित हो सकती है।