South African coronavirus variant

South African coronavirus variant may escape antibodies, cause reinfection, say scientists (The Tribune: 20210122)


Scientists believe the findings underscore the prospect of reinfection with such distinct variants of the virus carrying these mutations, and ‘may foreshadow reduced efficacy of current spike-based vaccines’

South African coronavirus variant may escape antibodies, cause reinfection, say scientists

A lineage of the novel coronavirus, first reported to have emerged in South Africa, escapes neutralisation by antibodies from recovered COVID-19 patients, says a new study which raises questions on the possibility of reinfection by this strain.

According to the yet-to-be peer reviewed study, published in the preprint platform bioRxiv, the novel lineage of the coronavirus — 501Y.V2 — has mutations in nine parts of its spike protein, which enables it to infect human cells.

In the research, the scientists, including those from the University of the Witwatersrand in South Africa, tested the neutralisation activity of plasma from patients who recovered from prior infection with other strains of the coronavirus against the 501Y.V2 variant.

They found that nearly half — 21 of 44 — of the samples had no detectable neutralising activity against this variant.
According to the scientists, 501Y.V2 shows “substantial or complete escape from neutralising antibodies in COVID-19 convalescent plasma”.

“Here we show that the 501Y.V2 lineage, that contains nine spike mutations, and rapidly emerged in South Africa during the second half of 2020, is largely resistant to neutralising antibodies elicited by infection with previously circulating lineages,” the researchers wrote in the study.

They believe the findings underscore the prospect of reinfection with such distinct variants of the virus carrying these mutations, and “may foreshadow reduced efficacy of current spike-based vaccines”.

Commenting on the study, clinical virologist Julian Tang from the University of Leicester in the UK, said this variant could escape neutralising antibody responses largely due to the presence of two mutations in the spike (S) region — one in the 484th amino acid position and the other in the 417th molecule of the protein.

“This may reduce some efficacy from S-protein-based vaccine-induced antibodies in some people,” Tang said.

However, he added that the study also noted considerable binding to the 501Y.V2 virus by other non-neutralising antibodies, which the virologist believes could still offer some significant protection against this variant.

“The study also acknowledges that it could not assess the impact of this virus variant on T-cell responses so some additional defence will arise from this, as well as other naturally existing innate components of the immune system in those infected in addition to any residual vaccine protection,” Tang said.

“Further real life studies will be needed to assess the true impact of this South African 501Y.V2 variant on the vaccinated South African population outside of a laboratory context and in the presence of other natural human immune responses,” he added.

Calling the findings “potentially concerning”, Liam Smeeth, Professor of Clinical Epidemiology at the London School of Hygiene and Tropical Medicine, however, said these were laboratory findings, adding that “it would be unwise to extrapolate to clinical effects in humans at this stage”.

Smeeth said the study did, however, raise the possibility that immunity gained from past COVID-19 infection may be lower for re-infection with the South African variant.

Lawrence Young, virologist and professor of molecular oncology, Warwick Medical School, concurred.
Antidepressants ineffectual for back pain and osteoarthritis (The Tribune: 20210122)


Most clinical practice guidelines recommend antidepressants for long term (chronic) back pain and hip and knee osteoarthritis

Antidepressants ineffectual for back pain and osteoarthritis

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A study published by the British Medical Journal (BMJ) provides evidence that stimulant medications are generally inadequate for back and osteoarthritis pain, despite being broadly utilized for these conditions.

The findings, based on moderate certainty evidence, show that for people with back pain the effects were too small to be worthwhile, but for osteoarthritis, a small beneficial effect cannot be ruled out.

Most clinical practice guidelines recommend antidepressants for long term (chronic) back pain and hip and knee osteoarthritis, yet evidence supporting their use is uncertain.

To address this knowledge gap, researchers led by Giovanni Ferreira at the University of Sydney set out to investigate the effectiveness and safety of antidepressants for back and osteoarthritis pain compared with placebo.

Their findings are based on analysis of published data from 33 randomised controlled trials involving more than 5,000 adults with low back or neck pain, sciatica, or hip or knee osteoarthritis.

The trials were designed differently and were of varying quality, but the researchers were able to allow for this in their analysis. Most of the data came from industry-sponsored trials.

The researchers set a difference of 10 points on a 0 to 100 point scale for pain or disability as the smallest worthwhile difference between groups - a threshold commonly used in other studies of chronic pain.
Nasal COVID-19 vaccine will be easy to give to children: AIIMS director
(The Tribune: 20210122)


The director was also asked by the NDRF personnel if a person who has recovered from COVID-19 should get vaccinated with India commissioning two vaccines last week.

A nasal COVID-19 vaccine will be easy to give to school-going children who bear a "very mild" load of the disease, but they are infectious, AIIMS Director Randeep Guleria said on Wednesday.

The noted pulmonologist, who was interacting with the personnel of the National Disaster Response Force (NDRF) during their 16th Raising Day celebrations here, also said that people who have contracted coronavirus should also get the jab about 4-6 weeks after recovery.

"It (coronavirus infection) is very mild in children, but they are infectious. They can spread the disease."

"The vaccines that have come are not approved for children because there have been no studies conducted on children but this (vaccination) is a very important step and trials are being done," he said.

Once children start going to the school regularly, and they contract the COVID-19 infection, they will not have much problem but if they bring it home they can spread it to their parents or grandparents, the chief of the premier Delhi-based All India Institute of Medical Sciences (AIIMS) said.

"Vaccines for children may come later... Bharat Biotech is trying to get approved a nasal vaccine. Such a vaccine will be very easy to be given to children as it is a spray and not a jab and hence compliance is more." "In half-an-hour you can vaccinate an entire class. So, if that (nasal vaccine) is approved it will be even easier to give the vaccine (for COVID-19)," Guleria said in reply to a question.

He was also asked by the NDRF personnel if a person who has recovered from COVID-19 should get vaccinated with India commissioning two vaccines last week.
"A vaccine jab is essential for them (recovered from coronavirus) due to two reasons. "One is you are not sure how strong is your post COVID-19 immunity, and it has been seen quite a few times that those who had a mild to moderate infection their anti-body response has been less, and we also don't know how long will it be," he said.

A vaccine will be "beneficial" for such an individual as it will act as a "booster" and if anti-bodies are depleting, with the vaccine it will be back to a high level, he said.

"So, you should get the vaccine if you have been infected with COVID-19 but if it has happened recently say like 7-10 days then one should wait and take the jab after may be 4-6 weeks," he said.

Before replying to queries, Guleria also gave a PowerPoint presentation on the topic "Infectious Diseases: Emergencies and Challenges Ahead" and said "bio-terrorism" is an upcoming challenge.

He said densely populated countries like India "provide an opportunity" for the outbreak of infectious disease emergencies as it is coupled with the phenomenon of crowding and urbanisation.

He batted for having a "very good surveillance system" to better combat coronavirus like diseases and epidemics.

He said the country did "aggressive" work with a strong political will in the aftermath of the COVID-19 outbreak and said the need of the hour was to have lab-based surveillance and more and more trained public health officials.

"We need to enhance our research capacity, and we should not forget what we learnt during the coronavirus outbreak," Guleria said.

World Health Organisation (WHO) chief scientist Soumya Swaminathan also addressed the personnel of the central force through an online link and said a good digital surveillance system should be in place to better deal with public health emergencies. She said a resilient health workforce was required as it was seen during COVID-19 outbreak that regular health services were "disrupted" as the manpower had to be "diverted" to combat the raging pandemic.

Swaminathan said a robust infection prevention and control system was required, especially for healthcare workers, for battling medical emergencies as it was seen that a major brunt is borne by these professionals during disease outbreaks like COVID-19 as they bear the "highest risk of exposure".

NDRF chief S N Pradhan, while speaking during the event, said his rescuers faced the "double whammy or double challenge" of combating a disaster within a disaster last year.

He was implying the deployment of the force during rescue operations like battling cyclones, a gas leak incident in Vishakhapatnam, floods in various states and other calamities even as COVID-19 continued to spread.
The National Disaster Response Force was raised on January 19, 2006 as a federal contingency combat wing to undertake specific tasks of relief and rescue during natural and man-made disasters or life-threatening situations. — PTI

**Pfizer vaccine**

**Pfizer vaccine appears effective against coronavirus variant found in Britain: Study (The Tribune: 20210122)**


Pfizer vaccine appears effective against coronavirus variant found in Britain: Study

Vials with a sticker reading, "COVID-19 / Coronavirus vaccine / Injection only" and a medical syringe are seen in front of a displayed Pfizer logo in this illustration taken on October 31, 2020. Reuters file photo

The COVID-19 vaccine developed by Pfizer and BioNTech is likely to protect against a more infectious variant of the virus discovered in Britain which has spread around the world, according to results of further lab tests released on Wednesday.

The encouraging results from an analysis of blood of participants in trials are based on more extensive analysis than those released by the U.S. drugmaker last week.

Last week, Pfizer said a similar laboratory study showed the vaccine was effective against one key mutation, called N501Y, found in two highly transmissible new variants spreading in Britain and South Africa.

The latest study, posted on bioRxiv.org but not yet peer-reviewed, was conducted on a synthetic virus with 10 mutations that are characteristic of the variant known as B117 identified in Britain.

Among the 11 authors of the study are Ugur Sahin and Oezlem Tuereci, co-founders of BioNTech. Sahin is chief executive and his wife Tuereci is chief medical officer.

It provides further hope as record numbers of daily deaths from COVID-19 are reported in Britain, which is believed to be driven by the more transmissible variant. It also means vaccine development would for now not have to start all over again.

But the virus needs to be continuously monitored to check that changes maintain protection by vaccines, the study said.

For the test, blood samples drawn from 16 vaccinated participants in prior clinical trials were exposed to a synthetic virus called pseudovirus which was engineered to have the same surface proteins as B117, as characterised by 10 hallmark mutations.
The antibodies in the blood of the volunteers given the vaccine, known as Comirnaty, or BNT162b2, neutralised the pseudovirus as effectively as the older coronavirus version that the product was initially designed for.

Experts said the findings were reassuring and not surprising and results from similar studies on the South African variant would be keenly watched.

"This makes it very unlikely that the UK variant will escape from the protection provided by the vaccine," said Jonathan Stoye, a specialist in virus science at Britain's Francis Crick Institute. "It will be interesting to carry out the same experiments with the South African variant." BioNTech has said it plans to publish a more detailed analysis of the likely effect of its vaccine on the South African variant within a few days.

The world is pinning its hopes on vaccines to rein in the coronavirus, first detected in the central Chinese city of Wuhan at the end of 2019, as many countries impose tighter and longer lockdowns to try to bring the pandemic under control.

Variants and vaccines

The variants are said by scientists to be more transmissible than previously dominant ones, but they are not thought to cause more serious illness.

"The South African strain has been detected in the UK - albeit currently in small numbers - but does seem to be increasing in recent weeks," said Paul Hunter, a professor in medicine at Britain's University of East Anglia.

"Variants with this mutation could reduce vaccine efficacy, though most likely all current vaccines would still be highly effective."

Experts have called for continued testing to establish whether vaccines will protect people as the virus mutates.

COVID-19 has killed more than 2 million people worldwide.

Preparation for potential COVID-19 vaccine strain changes would be "prudent", the study said on Wednesday.

The Pfizer/BioNTech COVID-19 vaccine and the one from Moderna Inc, which both use synthetic messenger RNA technology, or mRNA, can be quickly adapted to address new mutations in the coronavirus if necessary. Scientists have suggested the changes could be made in as little as six weeks.

AstraZeneca, Moderna and CureVac are also testing whether their respective shots will protect against the fast-spreading variants. They have not released the results of those tests.
More than one million health workers in India have now been vaccinated for the coronavirus, with over 230,000 getting doses on Thursday alone, according to government data that at last shows an increase in daily immunisations after the drive was seen to be losing steam due to vaccine hesitancy and technical glitches.

The numbers reported on Thursday are the highest in a single day — the most before this was a little over 200,000 doses that were given on the day of the launch on January 16 — and come on the back of tweaks in the digital management platform to allow walk-ins, and repeated appeals from top government officials for people to come forward.

The cumulative number of vaccinations, while still a little over 57% of the target, is an improvement over what was seen as on Wednesday when it was 55%. Some regions such as Delhi saw a significant jump in turnout — the city was averaging around 50% but it was over 73% on Thursday.

Officials credited the improvement to changes in the Co-WIN application that now allows vaccinators to administer shots to walk-in health care workers if those scheduled did not turn up. “The app has been modified to allow creation of more session sites, more sessions per site, and change in site location as per the local requirement. Instead of daily plan, officials
concerned can now plan and schedule the sessions for the entire week,” said Manohar Agnani, additional secretary, health ministry.

Data from University of Oxford’s Our World in Data shows that India is now the fastest country to breach the million mark, taking only six days compared to nine by the United States. But almost nine million more health workers are still to be vaccinated and, at two doses per person (second doses need to be given 28 days after the first), India will need to ramp up its pace further to achieve the 300 million target it has set for later this summer.

The pace in recent days has worried authorities as well as experts, and has been leading to wastage of doses since vaccinators at some locations could not find enough recipients to finish quantities from the vials that they had opened.

On Tuesday, the top health officials of the country appealed to recipients to not be reluctant, and said it was particularly upsetting that doctors and nurses were being hesitant despite adequate data and arrangements to tackle side effects.

On Thursday, the government launched a mass awareness campaign, tapping even an old Bollywood classic — a Kishore Kumar song from the 1972 Rajesh Khanna starrer Amar Prem — to drive home its message.

“Kuch toh log kahenge, logon ka kaam hai kehna...” goes the song composed by the late RD Burman, whose lyrics have been modified and appear on a series of posters developed by the Union health ministry asking people to ignore vaccine-related rumors. The lyrics translate as “people will say something; then it is their job to say this...”

The posters also have quotes from health care workers who took the shot against Covid-19.

“You are aware that I have taken Covaxin and I have zero side-effects. Data shows that these two vaccines are safe, safe, safe,” says VK Paul, member (health), Niti Aayog, in one of the posters. Paul took the shot on January 16, the day of the launch of the vaccination drive, at New Delhi’s All India Institute of Medical Sciences (AIIMS).

“The misinformation must be countered fiercely. States must do all they can to counter rumour-mongering against Covid-19 vaccines. Let us put a stop to these falsehoods,” Union health minister Harsh Vardhan said while launching the posters on Thursday.

“The paradox is that countries across the globe are asking us for access to the vaccines while a section of our own is fomenting misinformation and doubts for narrow political ends,” he added.

He assured people that the vaccines were absolutely safe.

“All eminent doctors of well-known hospitals have taken the vaccine and praised the exercise for its desired end. The elimination of polio and smallpox was made possible by large-scale immunisation,” he said.

To be sure, while the data from the international trials of the AstraZeneca/Oxford vaccine (Covishield is the Indian version of this) suggests that it prevents transmission, this requires more research before it can be established. No such data is available for Covaxin.

Former Union health secretary K Sujatha Rao also said the initial period after a vaccine’s launch was usually tough, and required efforts to convince people to take the preventive shot.

“It was a task for us to ensure people accepted vaccines, during the initial period of launch of the universal immunisation programme. We had to launch massive door-to-door information,
education, and communication campaigns along with our development partners at that time to create awareness among people. It was by no means an easy task at the beginning but gradually picked up.”

**Combat vaccine hesitancy**

**Whatever it takes: On govt. powers to combat vaccine hesitancy (The Hindu: 20210122)**

[https://www.thehindu.com/opinion/editorial/whatever-it-takes-on-govt-powers-to-combat-vaccine-hesitancy/article33603615.ece](https://www.thehindu.com/opinion/editorial/whatever-it-takes-on-govt-powers-to-combat-vaccine-hesitancy/article33603615.ece)

The government must do all within its powers to combat vaccine hesitancy

Faith in entities is often an act of personal commitment not amenable to falsification, but trust in a scientific process can be established with confidence-building measures and full disclosure of all relevant data. Any mass campaign that involves voluntary effort on the part of the public can succeed only when transparency and open communication channels are the tools of choice. If the poor rate of uptake of the COVID-19 vaccine in most of the States in the country is any indication, the government has not taken the people of the country along, in what is a purely voluntary exercise, but one vested with great power to retard the pace of the epidemic. For instance, Tamil Nadu, a State perceived to be largely health literate, and relatively well-equipped with health infrastructure, achieved only over 16% of its targeted coverage on the launch day. On the second day of vaccination, the compliance further dropped; in some States, vaccination was suspended. A marked favouring of the Covishield vaccine over Covaxin was also noticed in multiple States.

**Alzheimer's**

**Strange hyperactivation in brain can be early sign of Alzheimer's (New Kerala: 20210122)**


A research led by psychology and neuroscience professor of the University of Montreal highlights that abnormally hyperactive areas in the brain may help better predict the onset of Alzheimer's disease
In the study, the team led by Universite de Montreal psychology professor Sylvie Belleville, found hyperactivation in certain brain areas in people not yet diagnosed with Alzheimer's but who were worried about their memory and who exhibited risk factors for the disease.

The findings which were published in Alzheimer's and Dementia Diagnosis, Assessment and Disease Monitoring marks an important milestone in this research area, as the hyperactivation of regions susceptible to Alzheimer's as shown by functional magnetic resonance imaging (fMRI), was observed in people with no clinical symptoms and before the onset of cognitive impairments detected with standardized tests.

"This study indicates that abnormal activation in these areas may be observed many years before diagnosis," said Belleville.

Alzheimer's disease is progressive and may emerge in the brain 20 to 30 years before diagnosis. It is therefore very important to pinpoint biomarkers -- that is, physical and detectable signs of the disease -- and to better understand the initial effects on the brain. Hyperactivation could therefore represent one of the first signs of Alzheimer's disease, according to the researchers.

The team observed that, as the disease progresses, neuronal activation follows an inverse U-shape trajectory. Indeed, activation in certain areas of the brain in the early stages of Alzheimer's may significantly increase before the neuronal loss that is caused by the disease leads to a clear decrease in inactivation.

"This form may characterize the underlying pathological process and help doctors determine the stage of the disease. When combined with other indicators such as blood work and cognitive tests, this type of neuroimaging investigation could help with possible earlier detection," explained Corriveau Lecavalier, the study's first author.

For their study, the team used data from the Consortium for the Early Identification of Alzheimer's Disease to study brain activation in groups of individuals at a high risk of developing Alzheimer's disease who had performed a memory task while being scanned with fMRI.

One group consisted of 28 individuals who were concerned about their memory but who did not show cognitive impairments on traditional clinical tests. The other group included 26 individuals with mild cognitive impairments.

The researchers found that the individuals in the first group, or those with memory complaints but who did not show objective cognitive impairments, had abnormally high levels of activation in multiple key regions of the brain affected by Alzheimer's disease.

Individuals with mild cognitive impairments, who are considered to be at a more advanced stage of the disease, tended to show decreased activation in these brain regions.
Heart health

Study suggests being fat linked with worse heart health even in people who exercise (New Kerala: 20210122)


Sophia Antipolis [France], December 22: Physical activity does not undo the negative effects of excess body weight on heart health, suggest the findings of a large study.

The study was published in the European Journal of Preventive Cardiology, a journal of the European Society of Cardiology (ESC).

"One cannot be 'fat but healthy'," said study author Dr Alejandro Lucia of the European University, Madrid, Spain. "This was the first nationwide analysis to show that being regularly active is not likely to eliminate the detrimental health effects of excess body fat. Our findings refute the notion that a physically active lifestyle can completely negate the deleterious effects of overweight and obesity."

There is some evidence that fitness might mitigate the negative effects of excess body weight on heart health. It has been suggested that in adults and children, being "fat but fit" might be associated with similar cardiovascular health to being "thin but unfit". Dr. Lucia said "This has led to controversial proposals for health policies to prioritise physical activity and fitness above weight loss. Our study sought to clarify the links between activity, body weight, and heart health."

The study used data from 527,662 working adults insured by a large occupational risk prevention company in Spain. The average age of participants was 42 years and 32% were women.

Participants were categorised as normal weight (body mass index [BMI] 20.0-24.9 kg/m2), overweight (BMI 25.0-29.9 kg/m2), or obese (BMI 30.0 kg/m2 or above). Additionally, they were grouped by activity level 1) regularly active, defined as doing the minimum recommended for adults by the World Health Organization2 (WHO); 2) insufficiently active (some moderate to vigorous physical activity every week but less than the WHO minimum); 3) inactive (no exercise). Cardiovascular health was determined according to three major risk factors for heart attack and stroke, namely diabetes, high cholesterol, and high blood pressure.

Approximately 42% of participants were normal weight, 41% were overweight, and 18% were obese. The majority were inactive (63.5%), while 12.3% were insufficiently active, and 24.2% were regularly active. Some 30% had high cholesterol, 15% had high blood pressure, and 3% had diabetes.
The researchers investigated the associations between each BMI and activity group and the three risk factors. At all BMI levels, any activity (whether it met the WHO minimum or not) was linked with a lower likelihood of diabetes, high blood pressure or high cholesterol compared to no exercise at all. Dr. Lucia said "This tells us that everyone, irrespective of their body weight, should be physically active to safeguard their health."

At all weights, the odds of diabetes and hypertension decreased as physical activity rose. "More activity is better, so walking 30 minutes per day is better than walking 15 minutes a day," he said.

However, overweight and obese participants were at greater cardiovascular risk than their peers with normal weight, irrespective of activity levels. As an example, compared to inactive normal-weight individuals, active obese people were approximately twice as likely to have high cholesterol, four times more likely to have diabetes, and five times more likely to have high blood pressure. Dr. Lucia said "Exercise does not seem to compensate for the negative effects of excess weight. This finding was also observed overall in both men and women when they were analysed separately."

He concluded "Fighting obesity and inactivity is equally important; it should be a joint battle. Weight loss should remain a primary target for health policies together with promoting active lifestyles."

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**Pandemic guidelines**

**Social influence matters when it comes to following pandemic guidelines**

*(New Kerala: 20210122)*

New research published in the British Journal of Psychology indicates that social influence has a large impact on people's adherence to COVID-19 guidelines.

In the analysis of information from 6,674 people in 114 countries, investigators found that people distanced most when they thought their close social circle did. Such social influence mattered more than whether people thought that distancing was the right thing to do.

The findings suggest that to achieve behavioral change during crises, policymakers must emphasize shared values and harness the social influence of close friends and family.

"We saw that people didn't simply follow the rules if they felt vulnerable or were personally convinced. Instead, this uncertain and threatening environment highlighted the crucial role of social influence," said lead author Bahar Tuncgenc, PhD, of the University of Nottingham, in the UK.
"Most diligent followers of the guidelines were those whose friends and family also followed the rules. We also saw that people who were particularly bonded to their country were more likely to stick to lockdown rules--the country was like family in this way, someone you were willing to stick your neck out for," added Tuncgenc.

Tuncgenc noted that efforts to improve adherence to COVID-19 guidelines might include the use of social apps, similar to social-based exercise apps, that tell people whether their close friends are enrolled for vaccination.

Using social media to demonstrate to friends that you are following the rules, rather than expressing disapproval of people who aren't following them, could also be an impactful approach. In addition, public messages by trusted figures could emphasize collectivistic values, such as working for the benefit of loved ones and the community.

**Coronavirus (Hindustan: 20210122)**

[Link](https://epaper.livehindustan.com/imageview_588747_84829196_4_1_22-01-2021_3_i_1_sf.html)
स्वास्थ्यकर्मियों ने गुरुवार को टीकाकरण में बढ़तवाद किया हिस्सा, 24 में दिखा मामूली दुःखभाव

उत्साह: चौथे दिन 73% ने लगवाया टीका

स्वास्थ्य विभाग ने बताया कि, चौथा दिन 73.35% स्वास्थ्य कर्मियों के अनुसार टीकाकरण में भाग लिया। इसमें 848 टीकायात हुए।

Health Carte Services (Hindustan: 20210122)
https://epaper.livehindustan.com/imageview_588749_84824590_4_1_22-01-2021_5_i_1_sf.html
कई केंद्रों ने 100 लोगों के टीकाकरण का लक्ष्य समय से पहले पूरा किया

जनिपाल अस्पताल : 106 लोगों को टीका लगाया
हालांकि सिस्टम में कोई भी अरुंधति नहीं थी, जो 106 लोगों को टीका लगाने के लिए लक्ष्य समय से पहले आकर टीका लगाया था। जनिपाल अस्पताल में इस प्रकार के आकर तरीके का लगाया गया।

अकाश अस्पताल : साढ़े तीन बजे ही अभियान पूरा
हालांकि सिस्टम में कोई भी अरुंधति नहीं थी, जो 100 लोगों को टीका लगाने के लिए लक्ष्य समय से पहले आकर टीका लगाया था। अकाश अस्पताल में इस प्रकार के आकर तरीके का लगाया गया।

लोकनायक अस्पताल : तोड़ा अपना फिल्ड टीकां
हालांकि सिस्टम में कोई भी अरुंधति नहीं थी, जो 100 लोगों को टीका लगाने के लिए लक्ष्य समय से पहले आकर टीका लगाया था। लोकनायक अस्पताल में इस प्रकार के आकर तरीके का लगाया गया।

कोरोना वायरस का केस बढ़ाए गए। दिल्ली के राज्य केंड्र संस्थान में निर्देशक और विशिष्ट डिप्टी के सब लोग को 100 लोगों को टीका लगाया था।

इससे एक दिन पहले यहां सिर्फ 21 लोगों को ही टीका लगाया था। दिल्ली राज्य केंड्र संस्थान में निर्देशक और विशिष्ट डिप्टी के पहले बाद 'गूढ़वार अस्पताल में 30 लोगों को टीका लगाया था।