New strain

New strain more transmissible, no room for complacency: PGI Director (The Tribune: 20210226)


New strain more transmissible, no room for complacency: PGI Director

The new strain of coronavirus being observed in India is far more transmissible, leaving no room for any lackadaisical approach. This was stated by Prof Jagat Ram, Director, PGI, while addressing 400 healthcare workers who participated at an open house session held here today.

With the cases again surging in some states, including Punjab, an overall downward trend in the country does not necessarily guarantee a continued and consistent decline in cases.

The PGI Director said, “This clearly indicates that Covid-19 is very much here and has not gone away as is generally being presumed. So, the threat of getting infected is very much real even now, considering the vulnerability of the healthcare workers,” said Prof Ram as he stressed the urgency for the healthcare workers to go ahead with vaccination.

Prof AK Gupta, Medical Superintendent, said, “We work in a scientific institution and we trust the information that does not have any scientific evidence. It rather looks a little strange. So, let us believe in medical science and be safe ourselves and save others as well.”

Deliberating on the prevalent myths and misconceptions regarding the vaccine, Kumar Gaurav Dhawan, Deputy Director (Administration), said, “All of us have elder and ailing relatives and young children in our families, so why be a potential source of infection to those for whom we care the most.”

Prof Surinder S Pandav, chairman, Covid-19 vaccination committee, stated, “Rumours are being spread on the social media about the efficacy of vaccines. It seems that healthcare
workers are hesitating to get inoculated as they might have been influenced by the social media.”

Pankaj Malhotra said of over 4,000 healthcare workers inoculated so far, only two became positive for the virus. They were already in the incubation period, he added.

**Fatality rate**

**Punjab health officials worried over case fatality rate (The Tribune: 20210226)**


With people in Punjab throwing safety norms to the wind, it is no news that the state has been topping the Covid fatality rate in the country.

The trend has left the health officials in the spot as no other state is near Punjab’s 3.23 Case Fatality Rate (CFR). The distant second is Maharashtra where CFR is 2.5 per cent, followed by Sikkim (2.2).

Punjab’s CFR is more than double the national average of 1.45. It has emerged as such a big worry that even CM Capt Amarinder expressed concern over the trend. Even neighbouring states are performing much better than Punjab. In Haryana CFR is 1.1 per cent, Himachal Pradesh J&K and Chandigarh 1.6 per cent each.

Punjab has been continuously figuring on top for the past more than four months. The health officials say that it is because the number of cases had witnessed a sudden dip in January.

But independent experts say the number of high deaths is because of high prevalence of co-morbidities. “Punjab has the highest number of patients with co-morbidities. It is a well established fact that Punjab has the highest number of patients suffering with communicable diseases. So the number of casualties will be more,” said Dr JS Thakur of PGI’s School of Public Health.

**Vaccination (Hindustan Times: 20210226)**

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

A new vaccination push: Some FAQs The Union health ministry on Wednesday announced a significant opening up of the country’s vaccination drive, with the roll-out for the general
public being moved up from the previously estimated window of mid-March to March 1. The development comes at a time when the country appears to be on the brink of a second wave of infections. While the government is still working on the details of the opening up, a look at what we know so far and what we don’t:
The government can consider vaccinating all those over 45 years of age.

The decision to open up about 20,000 private hospitals across India from March 1 — in addition to about 10,000 government sites — to vaccinate people older than 60 years and those above 45 years with comorbidities will at once increase the number of vaccination sites. Roping in the private sector to support the government programme of vaccinating about 270 million people belonging to the two high-risk priority groups can surely speed up vaccination coverage. At 13 million at the end of six weeks since the vaccination programme began, only a little over a third of health-care and frontline workers have been covered. With the average uptake per session only about 35%, beginning the second phase of the programme could increase this percentage. Even if CoWIN platform glitches and a decline in daily cases are partly responsible for low uptake, the hesitancy to available vaccines among health-care workers, who are one of the most informed and also at greater risk of infection, cannot be overlooked. Whether the elderly and those above 45 with comorbidities will behave strikingly different or take a cue from health-care workers and prefer to wait before queuing up for a vaccine remains to be seen.

Crucial to increasing vaccine uptake in private hospitals will be the cost of vaccination, especially when it is available for free at government sites. At a time when vaccine uptake has been low even when offered for free, the only way to increase coverage is by making it easy for people desiring to get vaccinated to have one. While the intent to quickly protect people with comorbidities above 45 years who are at greater risk of progressing to a severe form of the disease or even death is commendable, the insistence on documentary evidence for vaccination should be reviewed if the uptake remains below the desired level. One in three adults in India has hypertension but only about half are even aware of it. It is one in 10 in the case of diabetes; awareness is about 50%. The trend is the same for a few other diseases that make a person eligible for a vaccine. With just over 21% of the population above 45 as per the 2011 Census data, the government can consider vaccinating anyone above that age who comes to a site. Similarly, insisting on prior registration on the CoWIN platform will further worsen inequities; vaccinating people who walk in without registration must be allowed. That less than 10% of people have opted for Covaxin nationally is proof that vaccine uptake is directly related to availability of trial data. The government can still win back trust and improve vaccine coverage by quickly making all vaccine trial data public. Also, timely resolution by the national
committee, of serious adverse events and deaths following vaccination and sharing the details will surely inspire public confidence in the vaccines.

**Coronavirus**

**Coronavirus | Large real world study confirms Pfizer COVID-19 vaccine 94% effective (The Hindu: 20210226)**


The study finds out that people who received their second dose of the vaccine had a 92% lower chance of getting any form of infection at all compared to those who were unvaccinated.

The Pfizer COVID-19 vaccine has proven 94% effective in a study involving 1.2 million people in Israel, the first peer-reviewed real world research confirming the power of mass immunization campaigns to bring the pandemic to a close.

The paper, which was published in the New England Journal of Medicine on Wednesday, also demonstrated there is likely a strong protective benefit against infection, a crucial element in breaking onward transmission.

"The fact that the vaccines worked so well in the real world... really does suggest that if the nations of the world can find the will, we now have the means to end COVID-19 forever," said Ben Neuman, a virologist from Texas A&M University who was not involved in the research.

The experiment was carried out between December 20 2020 and February 1, 2021 -- a period when a newer variant first identified in Britain was rampant in Israel, making the vaccine's performance all the more impressive.

Also read: Coronavirus | WHO clears Pfizer-BioNTech COVID-19 vaccine for emergency use

Around 1.2 million people were divided into equal groups of vaccinated and unvaccinated.

Each vaccinated participant was matched to an unvaccinated "control" person of similar age, sex, geographic, medical and other characteristics.

Lead author Noam Barda, head of epidemiology and research at the Clalit Research Institute, told AFP the matching process was highly robust.

An elderly Ultra-Orthodox Jewish man from a particular neighborhood with a particular set of comorbidities and flu vaccination history would be matched for another person fitting that precise profile, for example.
The researchers then recorded outcomes at days 14-20 after the first of the two doses and day seven or more after the second.

The efficacy against symptomatic infections was 57% between 14-20 days after the first dose, but rose to 94% in seven days after the second dose -- very close to the 95% achieved during Phase 3 clinical trials.

People who received second doses were also highly protected against hospitalization and death -- though the precise numbers here are less significant and had a wider statistical range because of the relatively lower number of cases.

The study also found people who received their second dose had a 92% lower chance of getting any form of infection at all compared to those who were unvaccinated.

While this finding was considered encouraging, the researchers and outside experts said it needs more confirming evidence.

That's because the participants weren't being systematically tested at regular intervals; rather, they were getting a test when they wanted one.

The authors attempted to correct for this with statistical methods but the result is still likely imperfect.

"Unless you are testing everyone all the time, this will miss some infections," said Natalie Dean, a biostatistician at the University of Florida.

She added she was certain there was a strong protective benefit, but "nailing down this number more precisely will require specialized study designs with frequent testing."

**Vaccine (Hindustan: 20210226)**

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इजाजत में पहले टीका वाले परीक्षण में दावा, पहली खुलासे के बाद 57% प्रतिशत क्षमता पैदा हुई
कोरोना टीकों में फाइजर 94% प्रभावी
सतर्कता: कोरोना के केस बढ़ते ही रेड जोन में इजाफा

नई दिल्ली | वरिष्ठ संवाददाता

कई राज्यों में कोरोना के मामलों में बढ़ोतरी के बाद दिल्ली में भी एहतियातन कदम उठाए जा रहे हैं। दिल्ली में पिछले तीन दिन में कोरोना के मामलों में मामूली इजाफा होने पर करीब एक महीने बाद कंटेनमेंट जोन की संख्या बढ़ने लगी है। पिछले तीन दिन से रोजाना कंटेनमेंट जोन बढ़ाई जा रही है।

तीन दिन में 13 कंटेनमेंट जोन बढ़ाए गए हैं। दिल्ली में गुरुवार तक कुल 644 कंटेनमेंट जोन हो गए हैं। कोरोना के नए मुरीज मिलने पर ऐसे इलाकों को कंटेनमेंट जोन घोषित किया जा रहा है, जहां आबादी का घनत्व अधिक है।

कंटेनमेंट जोन में निगरानी बढ़ाई गई: स्वास्थ्य विभाग ने पिछले कुछ दिनों से कंटेनमेंट जोन वाले इलाकों में निगरानी बढ़ा दी है। इन इलाकों में बेरिकेडिंग की जा रही है। लोगों को भी जोच के लिए कहा जा रहा है, ऐसे में मास्क पहनने को लेकर लोगों का विरोध भी ज्ञेलना पड़ रहा है। मास्क न पहनने पर जुर्माना लगाने पर विरोध ज्ञेलना पड़ रहा है।