Fresh Covid cases

Punjab, 5 other states account for over 85 per cent of fresh Covid cases (The Tribune: 20210305)


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Punjab, 5 other states account for over 85 per cent of fresh Covid cases

People wait for their turn to receive a dose of COVID-19 vaccine, during a countrywide inoculation drive, at Nesco Covid centre, in Mumbai. PTI Photo

Maharashtra, Kerala, Punjab, Tamil Nadu, Gujarat and Karnataka continue to report a surge in daily new Covid cases, accounting for 85.51 per cent of fresh cases, the Union Health ministry said on Thursday.

A total of 17,407 new infections have been registered in a day.

Maharashtra has reported the highest daily new cases at 9,855. This is the highest number recorded in the state since October 18 when 10,259 new cases were reported.

It is followed by Kerala with 2,765 while Punjab reported 772 new cases. The total number of cases with the UK, South Africa and Brazil variants of SARS-CoV-2 in the country as on date has reached 242, the ministry said.

India's total Covid active caseload has reached 1,73,413 comprising 1.55 per cent of India's total cases.

"Maharashtra, Gujarat, Punjab and Madhya Pradesh are showing a rise in active cases," the ministry said.
Showcasing the change in active cases for states and UTs in a span of 24 hours, the ministry said Kerala, Uttar Pradesh, Jharkhand, Bihar and Assam witnessed a reduction in the active cases in 24 hours.

However, Maharashtra, Punjab, Rajasthan, Chhattisgarh, Madhya Pradesh, Haryana and Gujarat displayed a rise in active cases during the same time period, it said.

India's cumulative recovered cases are following a steadily rising trajectory and have surged to 1,08,26,075.

More than 1.66 crore vaccine doses have been administered through 3,23,064 sessions, as per the provisional report till Thursday 7 am.

These include 67,90,808 health care workers (HCWs 1st dose), 28,72,725 HCWs (2nd dose), 58,03,856 front line workers (FLWs 1st dose) and 4,202 FLWs (2nd Dose), 1,43,759 beneficiaries aged more than 45 years with specific co-morbidities (1st dose) and 10,00,698 beneficiaries aged more than 60 years.

As on day 47 of the vaccination drive (March 3), nearly 10 lakh vaccine doses were given. Of these, 8,31,590 beneficiaries were vaccinated across 10,849 sessions for 1st dose (HCWs and FLWs) and 1,62,862 HCWs and FLWs received 2nd dose of vaccine.

Besides, 89 deaths were reported in a span of 24 hours.

Six states account for 88.76 per cent of the new deaths. Maharashtra saw the maximum casualties (42). Kerala follows with 15 daily deaths and Punjab reported 12 deaths in the last 24 hours.

Twenty-three states and UTs have not reported any Covid deaths in the last 24 hours. These are Madhya Pradesh, Haryana, Rajasthan, Jammu and Kashmir, Odisha, Uttar Pradesh, Himachal Pradesh, Goa, Uttarakhand, Jharkhand, Puducherry, Assam, Lakshadweep, Nagaland, Sikkim, Ladakh, Tripura, Andaman Nicobar Islands, Manipur, Mizoram, Meghalaya, Daman and Diu and Dadra and Nagar Haveli and Arunachal Pradesh. PTI

**Phase 2 of vaccination drive**

**Phase 2 of vaccination drive stuck in first gearRajasthan leads the way among states but vaccine uptake still far from adequate (Hindustan Times: 20210305)**

https://epaper.hindustantimes.com/Home/ArticleView
Rajasthan is the runaway leader in the first three days of the second phase of India’s Covid-19 vaccination drive, having given doses to 5,187 per million residents, although an HT analysis of data from the first three days of the expanded drive indicates a slow start across the country.

Till Wednesday night, India vaccinated a total of 949,147 people, or 712 per million in Phase 2, which covers the most vulnerable sections of the general public. The government hopes that drafting more private hospitals to administer vaccines and keeping facilities open 24x7 will help increase the numbers. The government has previously said its ultimate target in this phase is 5 million shots a day.

Delhi, which gave shots to 1,679 people per million population in the second phase till Wednesday night, was in the second spot, while Odisha (1,283 doses per million) was third.

To be sure, the per-million metric provides an easy comparison, although a more accurate denominator is the number of people over the age of 60 and over 45 with co-morbidities – a number that wasn’t immediately available for all states and Union territories. In all, the second phase of the drive is expected to cover 270 million people.

HT collated and analysed data for India’s 20 most populated states. In the national capital, 33,259 people lined up to receive jabs in first three days of Phase 2 – an average of a little over 11,000 shots a day. In contrast, the three days before the start of the second phase, when only health care workers and front-line workers were getting jabs, the city averaged 19,176 shots a day. On average, 316,382 people have received shots every day across the country under Phase 2 — this has less than halved (653,565 doses administered per day) from the three days before the opening up of the drive.

In Bihar, the fewest people showed up to get shots in the first three days of Phase 2 — only 43 doses were administered per million residents in the state. Uttar Pradesh, with 60 shots per million, and Jharkhand (144 shots per million) accompanied it as the three worst-performing
states. Bihar and Uttar Pradesh’s numbers were also skewed by their huge populations and the significant proportion of their population under the age of 18 (they are both among India’s youngest states).

The numbers account for those vaccinated in the Phase 2 of the vaccination drive, which includes persons above 60 years of age and those who are 45 years or more and suffering from certain medical conditions. Overall, 949,147 people received shots in this category across India till Wednesday evening. On the other hand, 13 times as many (13.5 million people, or 10,118 per million population) people have received at least one shot under the first phase of the drive, which started on January 16.

Experts say there is a need to speed up the drive at least six to 10 times if the country plans to achieve its target of immunising 300 million people most at risk of exposure or death by August.

“So far we have immunised only 1% of our population, while Israel has immunised 85% and the US 23%. At the current pace, we will not be able to achieve the target even by the end of the year. We have to speed up the vaccination drive at least six to 10 times,” said Dr SK Sarin, director of the Institute of Liver and Biliary Sciences, who headed the Delhi government’s first committee on managing Covid-19 infections.

The first phase of the drive, which is still on, included health care and front-line workers. Of these, 6.8 million health care workers were administered at least one dose of the vaccine, while 2.8 million received both doses till Wednesday. Overall, a total of 16.3 million doses of vaccines have been administered across the country as of Wednesday – the 47th day of India’s vaccination campaign.

The Union government, which was releasing daily vaccination bulletins that listed the break-up of state-wise figures for the first phase of the inoculation drive, has not done so in the first three days of Phase 2. In the absence of official data at the national level, HT’s vaccination data was collated numbers from respective state governments.

With the threat of mutant variants of Sars-CoV-2 and some parts of the country witnessing an uptick in cases, director of Centre of Cellular and Molecular Biology Dr Rakesh Mishra agreed that the drive needs to pick pace. “The vaccination drive needs to be sped up to reach as many as possible as more and more vaccines become available,” he said.

“I think, if we need to achieve our target we need to have vaccination in more places, we have to open it up in a manner that those who are willing to take the vaccine are allowed to come rather than calling people and them not turning up,” said Dr Randeep Guleria, director, All India Institute of Medical Sciences. He said that people in the high risk group residing in regions seeing a spurt in infections should be immunised quickly “as it will help in decreasing the mortality and hospitalisations.”

An editorial in HT recently called for more vaccines to be approved, that their sales in the open market be allowed, and that the drive be opened to anyone wanting to be vaccinated.

Dr Sarin said it’s also important to make sure everyone living in regions such as Maharashtra seeing a surge in cases should be immunised on priority basis.

There were teething troubles reported on the first day of the drive’s Phase 2. These issues appeared to be largely sorted by the second and third day, with very few problems reported.

“In the beginning there could have been issues as we are trying to vaccinate one-sixth of humanity, but it will all get streamlined as days progress. In fact, most issues faced on day one
have already been sorted,” said RS Sharma, chairman empowered group on Covid vaccinations.

What is left is effective messaging to be able to overcome vaccine hesitancy among masses, say experts.

“In urban centres the turnout of individuals needing vaccination is usually not a problem; it is the semi-urban and rural areas that require more focus,” said Dr MC Misra, former AIIMS director.

Dr K Srinath Reddy, founder, Public Health Foundation of India, added: “As more people get vaccinated, it builds confidence among those sitting on the fence. In a month or so it will be clear whether India will meet the target or not.”

The Centre is looking at expanding coverage in coming weeks. “We currently have the capacity to vaccinate at least double of what we are doing now per day, and in coming weeks we will be scaling up. We are aiming at vaccinating 5 million individuals on a daily basis,” said Dr NK Arora, member, National Task Force on Covid-related matters.

Conid (The Asian Age: 20210305)


Pak league put off after Covid outbreak

Karachi, March 4: The Pakistan Super League was on Thursday postponed with immediate effect after three more cricketers tested positive for Covid-19, taking the total number of cases in the T20 event to seven and prompting the cricket board to announce an inquiry into the fiasco.

Out of the seven cases, six are players while one is a support staff member.

“Following a meeting with the team owners and considering the health and wellbeing of all participants is paramount, the Pakistan Cricket Board has decided to postpone the HBL Pakistan Super League 6 with immediate effect,” the Pakistan Cricket Board (PCB) said in a statement.

“The decision was made after seven cases were reported in the competition, which had started on 20 February.”

PCB CEO Wasim Khan said an inquiry will be conducted to understand what went wrong.

“It is a great disappointment for us and we find ourselves in a situation where we question whether we can provide full protection for players as their health and well-being comes above everything else,” Wasim Khan told a press conference here.

“We looked at the option of halting proceedings for a few days but in the last few days there was huge concern even among the franchisees and players. Collectively we could have done a lot of things better and this is not a blame game but we have to look with a microscope at what went wrong and we have to provide confidence and assurance in the future to touring teams and players,” he added.

Khan said the priority of the board right now is to ensure that players are able to safely travel back to their respective destinations.

“We all had a responsibility for self policing and unfortunately we were not able to do that.”

The three players, who have tested positive most recently, were not part of the sides that featured in Wednesday’s double-header, and had been tested in the afternoon after showing symptoms.

Only 14 games could be completed in the 54-match tournament.

The PCB said it “will focus on the safe and secure passage of all participants, and arrange repeat PCR tests, vaccines and isolation facilities to the six participating sides.”

The board was apparently forced to take the decision after some of the foreign players and few local team officials expressed their concern over the situation and Australian all-rounder Dan Christian decided to fly home immediately.

— PTI
Vaccine Developer

Incentivising the Vaccine Developer (The Asian Age: 20210305)

https://indianexpress.com/article/opinion/columns/incentivising-the-vaccine-developer-7214316/

Robust IP laws will spur innovations required to deal with a pandemic

VaccineAsked what they plan to do once they get vaccinated, Sonawane says he will resume his walk in the park, call back the help, and Lata will resume going downstairs for groceries. The foreign trips will have to wait until the pandemic recedes. (Representational)

Since the beginning of time, pandemics have found their way to make a mark on human history. Though the days of the Antonine Plague in 165 AD or the medieval Black Death that took over 200 million lives are far gone, today’s global pandemic has proven to be just as terrifying.

Man’s death at tractor rally: Delhi HC asks UP police to hand over post-mortem video

Special CBI court discharges ex-OSD to Satyendar Jain

Dwarka expressway may be open before 2022 I-Day: Gadkari

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In midst of such chaos, however, pandemics have also pushed humans to ever-greater heights of science, innovation, and public health. The practice of “quarantine” for instance, or quaranta giorni, found its beginnings in the disease-ravaged coasts of Italy, where ships must drop anchor and isolate for 40 days. Nearly one year after the global pandemic changed our lives forever, we have witnessed a true breakthrough: Multiple viable vaccines have been developed, manufactured, and distributed to people.

Opinion | Indian industry has a critical role to play in Covid vaccination programme

As the race for the COVID-19 vaccine transitions into ever greater global distribution, the pall of fear brought by the pandemic promises to gradually lift. The private sector, with its unique know-how in R&D, manufacturing at scale, and logistics, will play a key role in ending this pandemic for good. But these companies cannot do so without IP protections. These laws do more than just protect years of investments and hours of research, they encourage good business practices. Let’s take, for instance, a counterfeit product developed without IP—in fact, the producer stole someone else’s IP. That producer, operating outside of this system, is not held to the same high standards of patient safety or efficacy. IP, then, helps to organise and formalise rules surrounding innovative products—ensuring that they can do the most good.
At the same time, stakeholders are rightfully concerned about ensuring widespread, efficient access to COVID-19 vaccines and treatments. The Earth’s population in 2020 was estimated to be nearly 8 billion people—no easy task, for sure. To address this challenge, some countries at the World Trade Organisation TRIPS Council have proposed overriding aspects of the global IP system to encourage greater access to vaccines and other pandemic solutions. No doubt, this proposal is well-intentioned—and attractive to countries like India, which must vaccinate more than 1 billion people. However, it is a solution in search of a problem, and disregards the role of IP laws in bringing us to the point where we can defeat this virus. The most promising vaccines, including those from Moderna, Pfizer, AstraZeneca, and others, were developed in the countries with the strongest IP systems. When such companies, with huge capital investments sunk into R&D enter markets where their research is likely to be replicated or stolen due to the absence of patent protection, it discourages them from bringing their well-researched advancements to the world. Rather than upend the global intellectual property system that enables the development of solutions, the answer for India is to embrace a proven IP model and work with other countries on that basis to become an ever-greater supplier of innovative vaccines and treatments.

IP laws enable innovations that would simply not exist without significant financial and labour investments. The advancement of an ever-improving standard of care through breakthrough innovations and incremental improvements in therapies is at the core of a modern healthcare system. Over the years, researchers have toiled to perfect these products and improve the lives of people around the world. They have succeeded—effectively decreasing the disease burden of humankind’s most life-threatening illnesses, including HIV-AIDS, cancer, and now, COVID-19. To secure as yet unmet health needs – including the next pandemic — it is vital that their ability to innovate is protected by a financial model that replenishes investments in a sustained pipeline of new research and development. Strong, transparent, reliable patent protections are a key first step. Patents are the ownership vehicle that enables investment in new capabilities and facilitates partnerships with stakeholders throughout a diverse innovation ecosystem.

India’s relationship with global IP laws dates to the country’s membership in the World Trade Organisation and the Trade-Related Aspects of Intellectual Property Rights Agreement (TRIPS). The TRIPS Agreement “sets the minimum standards of regulation of intellectual property laws by the member nations’ governments and talks about the essential features of intellectual property laws”. Countries like India, with the world’s second-largest population, must necessarily consider the implications of IP laws for both innovation and access to innovative products, such as vaccines. Fortunately, a careful look at the economics of innovation argues that strong intellectual property laws promote both. And in the long-term, mere alignment with the minimum standards of the TRIPS Agreement should be seen as a stepping stone to a more ambitious framework of TRIPS-plus rules to enable the knowledge-driven economy — the fourth industrial revolution – that Indian government and industry want to construct. To achieve that ambition, India must make a choice.

Fortunately, the trajectory that was launched with the 2016 National IPR Policy has been upwards. One recent signal of this sustained directional pivot for India was the signing of a Memorandum of Understanding between the DPIIT and the US Patent and Trademark Office.
This was the first time this workstream had been revived in a number of years, and shows India’s enthusiasm to leverage its innovative strengths to lift up its domestic economy and drive global growth. At the same time, its posturing at the WTO TRIPS Council, driven by short-term political considerations and despite the overwhelming evidence that IP is creating the availability of vaccines, has unfortunately clouded the narrative. Looking ahead, it would be a mistake to undermine the progress that has been achieved to date by reversing the very intellectual property policies that made it possible. The Indian governments have a critical role to play in delivering innovation to solve the pandemic to the global South. If it does so while reinforcing the multilateral IP architecture that has enabled a rapid and effective response to COVID-19 it will emerge as a stronger competitor than ever in the global knowledge economy.

The writer is senior Vice President, Global Innovation Policy Center, US Chamber of Commerce

**Five nutritionist-approved**

**Five nutritionist-approved ways to stay hydrated (Indian Express: 20210305)**


Count on these essential tips to ensure you are drinking enough fluids

hydration, how to stay hydrated, indianexpress.com, indianexpress, dehydration, how to avoid dehydration, best ways to stay hydrated, Tips to stay hydrated. (Source: Getty Images/Thinkstock)

It is extremely important to keep oneself hydrated at all times. But some of us may not be consuming an adequate amount of water — eight to 10 glasses per day — that is crucial for the body’s metabolic activity among other benefits.

If you too have not been having enough water or are bored of drinking plain water, here are some easy ways to help you stay hydrated, courtesy of nutritionist Munmun Ganeriwal.

“Drinking fluids is crucial to staying healthy and maintaining the function of every system in our body. Here are five best ways to stay hydrated,” she said.
Stress can impact your gut health; here’s what you need to know

The brain and the gastrointestinal tract are intimately connected to each other, as a result of which, stress directly affects the gut stress, how stress affects the body, stress management, stress and gut health, managing gut health, healthy living, indian express news

Early life stress can impact the development of the nervous system, as well as how the body reacts. (Photo: Pixabay)

When it comes to health, its foremost nemesis is stress. You will notice that of the many conditions that plague health, most are caused by stress. Unfortunately, stress has permeated our lives. Among other things, it impacts gut health and in this article, we discuss more about it.

According to Dr Nutan Desai, senior consultant-gastroenterology at Fortis Hospital, Mulund, the expression of having ‘butterflies in the stomach’ is quite apposite, because our gastrointestinal tract is sensitive to emotion. “Anger, anxiety, sadness, elation — all these feelings have a close connection with the gut. Stress is associated with changes in gut bacteria, which in turn can influence mood. Thus, emotions can influence gut function,” she explains.

The doctor says the brain and gastrointestinal tract are intimately connected to each other. While the gut has hundreds of millions of neurons (nerve cells) that can function independently and are in constant communication with the brain, stress can affect this brain-gut communication and may trigger pain, bloating, and gut discomfort. Long-term stress can cause constipation, diarrhoea, or an upset stomach, she explains.

“Early life stress can impact the development of the nervous system, as well as how the body reacts. These changes can increase the risk for gut diseases or dysfunction in the future. For instance, you may feel nauseated before giving a presentation, or feel intestinal pain during times of stress. Stress increases gut distress, and you may get a bout of diarrhoea or repeated urges to urinate during or following a stressful event.

“Stress can both delay emptying of stomach contents and speed up the passage of material through the intestines. This combination leads to abdominal pain and altered bowel habits. Additionally, acute psychological stress decreases a person’s pain threshold,” says Dr Desai.

* When stressed, individuals may eat much more or much less than usual. Eating more food, or an increase in the use of alcohol or tobacco can result in heartburn or acid reflux. Unhealthy diets may deteriorate one’s mood.

* Stress or exhaustion can also increase the severity of regularly-occurring heartburn pain.
* A rare case of spasms in the esophagus can be set off by intense stress, and can be easily mistaken for a heart attack.

* Stress may increase the amount of air that is swallowed, which increases burping, bloating and farting.

ALSO READ |How to manage stress eating while working from home

Symptoms of stress-related gut dysfunction

– Studies show that stressful life events are associated with the onset of symptoms or worsening of symptoms in several digestive conditions like inflammatory bowel disease, irritable bowel syndrome, gastroesophageal reflux disease, and peptic ulcers.

– Functional gastrointestinal disorders or FGID, which form 40 per cent of gastrointestinal cases, are worsened by stress.

**Covaxin**

**Efficacious too: On Covaxin (Indian Express: 20210305)**


The restricted emergency use approval of Covaxin should now be revised

Vaccine efficacy of 80.6% for Bharat Biotech’s Covaxin at the first interim analysis of phase-3 trials in India is indeed promising, though it took two months for the data to become available after the vaccine was approved for ‘restricted emergency use’ by the Indian drug regulator. The vaccine efficacy was measured based on symptomatic COVID-19 disease — mild, moderate or severe — two weeks after the second dose. The interim analysis undertaken at the first endpoint of 43 COVID-19 cases in the phase-3 trial carried out across 26 sites in India found 36 cases in the placebo group while only seven COVID-19 cases in the arm that received two doses of the vaccine given 28 days apart. The phase-3 trial that began last November recruited 25,800 participants, with one half receiving the vaccine and the other, a placebo. While the phase-3 trial will continue till 130 participants in both groups put together develop COVID-19 disease, another interim analysis will be carried out when there are 87 cases. Covaxin’s efficacy of 80.6% at first interim analysis is higher than AstraZeneca/Covishield vaccine efficacy of 55.1% when the second dose is administered less than six weeks after the first; in India, the second dose of Covishield is approved for four-six weeks after the first. Also, the phase-3 trial recruited 2,433 participants over the age of 60 and included 4,500 people with comorbidities. However, those with severe and/or uncontrolled comorbidities were not recruited.
As per the phase-1 data published in The Lancet Infectious Diseases and a preprint of the phase-2 trial, Covaxin appears to be safe and highly immunogenic, and has also been found to be effective against the B.1.1.7 variant first found in Britain. While Covaxin accounts for less than 10% of all COVID-19 vaccinations in India, the absolute number of vaccinations as on March 3 stands at over 1.6 crore. No deaths associated with this vaccine have been reported so far. Though the first interim analysis is based on 43 cases, which is smaller when compared with other vaccines that have been approved by other regulators, the vaccine appears safe and efficacious in phase-3 and early stages of human trials and animal studies. The Indian regulator should therefore revise the restricted emergency use approval such that Covaxin is treated on a par with Covishield and should no longer seek additional precautions in the form of signed consent before vaccination and also remove the label “clinical trial mode” from the approval; their continuation would send a wrong signal about its safety and efficacy. With a narrow window of opportunity available to vaccinate people before a second wave probably sets in or dangerous variants get established, India can ill afford to have roadblocks in the uptake of either vaccine.

Coronavirus (Hindustan: 20210305)
https://epaper.livemint.com/imageview_677454_85228028_4_1_05-03-2021_3_i_1_sf.html

Corona Infection (Hindustan: 20210305)
https://epaper.livemint.com/imageview_677455_85194942_4_1_05-03-2021_4_i_1_sf.html
कोरोना के सक्रिय मरीजों की संख्या 1700 के पार

राजधानी में कोरोना के ममलों में मार्च महीने से इजाफा जारी है। गुरुवार को, कोरोना के नए 261 मरीज मिले। इसके साथ ही कोरोना के सक्रिय मरीजों की संख्या 1700 के पार पहुंच गई। दिल्ली में कोरोना के 1701 सक्रिय मरीज है।

स्वास्थ्य विभाग द्वारा जारी बुलेटिन के अनुसार गुरुवार को कोरोना से ठीक होने वाले मरीजों की संख्या 143 रही। जबकि कोरोना के चलते एक व्यक्ति की मौत हो गई। 66,432 सैपल की जांच हुई। इसमें रैपिड एंटीजन टेस्ट से 22972 और आरटीपीसीआर से 43460 लोगों की जांच की गई। जांच संक्रमण की दर 0.39 फीसदी दर्ज हुई।

कोरोना की लेकर अब तक 12622319 सैपल की जांच हो चुकी है। होम आइसोलेशन में 870 मरीजों का उपचार जारी है। जबकि अस्पताल में कोरोना के इलाज के लिए 565 मरीज भरी हैं। अलग-अलग अस्पतालों में 5144 बेड खाली है। कंटेनर में जोन की संख्या 585 हो गई है।

Vaccination (Hindustan: 20210305)
https://epaper.livehindustan.com/imageview_677455_85207462_4_1_05-03-2021_4_i_1_sf.html
केजरीवाल बोले, बिना टीके टीका लगावाएं

उत्तराखंड में केजरी बोले गया दुनिया भर में इसके लिए डिफिनिटिव एजेंसी ने तय की है कि कोरोना वायरस के लिए टीकाकरण की जरूरत है। वे बोले कि टीकाकरण के लिए केवल टी.जी.पी के लिए नहीं, बल्कि वोटर्स के लिए भी।

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सिर्फ टीका लगाने देंगे, तो क्या ये एक पूरा लड़ाई होगी?

लंगरे में 60% से ज्यादा लोगों में टीकाकरण नहीं हो रहा, ये इसका आस्वादन है। यह एक पूरी लड़ाई होने लगी है।

केजरीवाल ने कहा कि अगर लोग टीका लेगा, तो वह हर एक लोग के लिए आपकी तरफ से एक पूरी लड़ाई होगी।

4800 तस्कर भी है जो मूल्यवान संसाय बन गए हैं, बिना टीके टीका लगावाएं।