Fertility

How does yoga help males and females boost fertility? (The Indian Express: 20210708)


Yoga is one approach to improve fertility and achieve better results when undergoing treatment. It is more than just a physical workout.

Yoga help males and females boost fertility, boost fertility by Yoga, how to boost fertility by Yoga, boost fertility in men by Yoga, boost fertility in women by Yoga, how to boost fertility in women by Yoga, how to boost fertility in men by Yoga. Yoga can help men and women by boosting fertility.

Infertility is a problem of global proportions and has been recognised as a public health issue worldwide. If the couple is not able to conceive, it takes a major toll on their mental and physical health.

There are many factors responsible for infertility and besides pursuing treatment under the guidance of the doctor, there are many risk factors that can be negated by adopting a certain lifestyle. It has been well-documented that lifestyle factors, including age when starting a family, nutrition, weight management, exercise, psychological stress, cigarette smoking, recreational and prescription drug use, alcohol and caffeine consumption, environmental and occupational exposures to chemicals, preventive care and other behaviours are modifiable and may impact fertility.

Couples who wish to get good results should adopt healthy eating habits, avoid any kind of addiction, maintain an ideal weight and keep the stress at bay.

Integrating yoga with modern science for enhanced benefits
Yoga practice is one way of improving fertility and getting a better outcome while undergoing fertility treatment. Yoga is very useful for preserving and maintaining one’s physical and mental health and also for spiritual evolution. More than physical exercise, it has a meditative and spiritual core.

The practice of meditation and relaxation can help increase the clarity of mind, diminishes anxiety, maintain healthy body chemistry. (Photo: Canva)

How does Yoga help?

Yoga boosts the functioning of the reproductive system. There are certain yoga asanas and postures that especially target the reproductive organs and pelvic area. These asanas increase blood circulation and hence improves the vitality of these organs.

Researches have shown that yoga modulates the hypothalamic-pituitary gonadal axis, balances hormonal profile, reduces the stress level and improves the overall quality of life. Alteration in brain waves (basically an increase in alpha wave) and decrease in serum cortisol level was observed during yoga therapy.

Why is it so important to treat stress in infertility?

Following stress, the endocrine system releases stress-related hormones such as cortisol and adrenaline. LH levels are decreased and hence ovulation is disrupted.

Increased cortisol levels have been found to be strongly associated with miscarriages.

Increased implantation rate is also noted along with lowering of adrenaline level.

Chronically stressed women produce less GnRH hormone while preventing ovulation by starting a cascade of hormonally related changes.

Benefits of yoga in women

Yoga asanas to follow :

Uttanasana (standing forward bend)

Malasana (Squat or garland pose)

Janu shirasana (head to knee forward bend)

Supta baddha konasana (reclining bound angle)

Baddha Konasana (butterfly pose)

Setu bandhasanas (bridge pose)

Paschimttoasnasa (seated forward bend)

Hastapadasanas (standing forward bend)
Salamba Sarvangasanas (supported shoulder stand)

Salamba Shirshasanas (supported headstand)

Kapalbhati pranayama

Bhramri pranayama (Bee breath)

Nadishodhan pranayams (alternate nostril breathing)

Studies have shown that YOGA could decrease distress in women before they started their first IVF cycle. In women who become pregnant via IVF, yoga decreases stress, anxiety and labour pain and increases delivery confidence.

Regular exercise of 30 min per day including asanas, pranayama and meditation help PCOD patients to lose weight and manage stress which ultimately stabilizes the normal function of the hypothalamic-pituitary-ovarian axis. Losing weight also helps in decreasing insulin resistance in these patients and it also helps in making cycle ovulatory. Loss of 5 to 10% of excess body fat leads to tremendous improvement in the hormonal profile.

It helps in regulating blood pressure and metabolism.

The practice of meditation and relaxation can help increase the clarity of mind, diminishes anxiety, maintain healthy body chemistry and improve their resilience and patience to undergo the rigours of infertility treatment.

In pregnancy, YOGA is found to

Reduce hypertensive related pregnancies

Improves foetal outcome

Increase infant birth weight

Decrease intrauterine growth retardation

Reduce the rate of assisted vaginal deliveries.

Studies have shown that the sperm count, sperm motility and prostate secretions showed improvement in men who practice YOGA.

Obesity adversely affects spermatogenesis. It is secondary to altered hormone change, i.e. reduced testosterone levels and also due to increased scrotal fat there is elevated testicular temperature leading to decreased spermatogenesis. Yoga helps these men to lose weight and regularise hormonal profile and hence improves spermatogenesis.

Researchers have indicated that yoga could improve immune system disorders, intravaginal ejaculation time and decrease sexual dysfunction.

Yoga could help regulate endocrine glands and the autonomic nervous system.
Mula bandh (root bond pose) was found to be correlated with relieving involuntary excessive ejaculation, preventing inguinal hernia, regulating testosterone and improving sexual desires.

Studies have shown that there are findings of decreased markers of oxidative stress, affecting the DNA integrity of the sperms in men practising YOGA.

It delays ageing.

Yoga helps to treat mild erectile dysfunction by reducing stress and anxiety.

It is good for prostate health as well.

The reviewed studies provide evidence that yoga can help couples overcome infertility and improve ART success rate by reducing anxiety and depression, decreasing stress, regulating hormonal secretions, improving the quality of life and increasing the fertility rate. One should adopt Yoga as it brings harmony in all walks of life.

**Vaccine doses**

*Covishield makes for lion’s share of vaccine doses in TS (The Hindu: 20210708)*


Shots administered as per vaccine stock supplied to State, says senior official

Of the 1.19 crore COVID vaccine doses administered in Telangana so far, a whopping 80.13% were of Covishield. In absolute numbers, a total of 1,19,92,231 doses have been given to beneficiaries and of those, 96.10 lakh doses were of Covishield, 23.28 lakh of Covaxin and 53,172 of Sputnik, which arrived in the State just a fortnight ago.

Director of Public Health G. Srinivasa Rao said the doses are administered as per the vaccine stock supplied to the State.

According to the details on vaccine coverage in the State till July 7 as provided by senior Health officials, males constituted a majority of beneficiaries. As against 62.38 lakh males, 57.39 lakh females and 2,201 others have taken the jab thus far.
There are minor differences in the tally of doses under various categories since the data was collated at different points of Wednesday.

COVID-19 vaccination begun in the State from January 16. Initially, healthcare workers were given the jab, followed by frontline workers such as employees in Greater Hyderabad Municipal Corporation and police personnel. Later, it was extended to the general public according to age group, starting with senior citizens and high-risk categories.

Till July 7 evening, data showed that 1.01 crore persons have received the first dose and 17.92 lakh the second dose.

The State government has also vaccinated people belonging to the high-risk groups such as vendors of vegetables, fruits, meat, shopkeepers, and others who have high exposure to people. Dr Srinivasa Rao said that around 37 lakh beneficiaries in these categories were given the jab.

Vaccine coverage

Among the 33 districts of the State, the highest coverage of vaccination was in the three urban districts — 26.60 lakh jabs in Hyderabad followed by 15.55 lakh in Rangareddy, and 15.06 lakh in Medchal-Malkajgiri.

The lowest of 58,425 doses were administered in Narayanpet, followed by 73,357 in Kumaram Bheem Asifabad district, and 81,844 in Jogulamba Gadwal districts.

Dr Srinivasa Rao said that the coverage is more in urban districts as per their strategy. “The chances of epidemic outbreaks are more in places with dense population, hence higher coverage in urban districts,” he said.

**Cases of vascular issues high in post-COVID patients**

Cases of vascular issues high in post-COVID patients, say doctors (The Hindu: 20210708)


Cumulative count: In RGGGH’s post-COVID clinic, 182 patients with vascular complications have been treated in both waves.

Early detection and timely medical treatment can help prevent complications

A number of patients who had undergone treatment for COVID-19 are being diagnosed with vascular complications at the post-COVID clinic of the Rajiv Gandhi Government Hospital (RGGGH). Though this was a cause for concern, doctors said that proper follow-up, early detection of symptoms and timely medical help would prevent complications.
Vascular complications in patients during the post-COVID period were not new. According to doctors, there were patients who developed vascular complications in the first wave too. But now, the cases were slightly more in a shorter duration, and severity was high with more involvement of the arteries.

Multiple symptoms

E. Theranirajan, Dean of RGGGH, said around 2,500 people had been attended to by the post-COVID clinic till now. “We are receiving many patients with vascular complications. If we miss the symptoms early, it will lead to complications. We have seen patients with limb ischemia, mesenteric artery occlusion presenting as acute abdominal pain and pulmonary embolism,” he added.

In the post-COVID clinic, the hospital has received 182 patients with vascular complications. “We have seen vascular complications in both waves. While there were 90 patients in the first wave during the one-year period, we have seen 92 patients in the last few months of the second wave. The severity is more. In the first wave, we had more patients with clots in their veins compared to the second wave — a condition called deep vein thrombosis. Now, we are seeing more involvement of the arteries,” N. Sritharan, professor and director of the Institute of Vascular Surgery, RGGGH, said.

He added that in the post-COVID period, any swelling in the legs and severe pain should not be ignored. The pain would be unbearable, and as a result, persons would not be able to sleep. This means that they need to get immediate medical help, he said.

Lack of awareness

“There is no awareness among patients and some of them ignore the early symptoms. Some come to the hospital in advanced stages, in which there is discolouration of skin or gangrene. The first six hours of symptoms are crucial as we need to restore blood circulation,” he explained.

Dr. Sritharan added that they were able to save the legs of many patients as they were better prepared to tackle emergencies. “We now have a better understanding of the disease process, and the treatment protocols have evolved. We have set up a separate ward for patients with vascular complications. Postgraduates of the department monitor patients round-the-clock. This has helped in better treatment outcomes,” he said.

Dr. Theranirajan said a few patients, who had undergone renal transplant, had developed nephropathy as a result of vascular complications. “Apart from vascular complications, we are seeing patients with neurological complications and myocardial infarction in the post-COVID period. Myocardial infarction seems to be predominant in a number of them,” he said.

This was why doctors stressed on the need for patients to come for a review after 28 days, he said, adding: “At the post-COVID clinic, they can consult with doctors of various specialities and get tested as per their symptoms. We check for rhythm disturbances, lipid profile and
fibrosis in the lungs. In case of symptoms of vascular complications, a Doppler Study is done. It is important to exclude symptoms and undergo a complete medical check-up,” he said.

AIDS warriors

Remembering the contributions of our AIDS warriors (The Hindu: 20210708)

https://www.thehindu.com/society/indias-aids-warriors/article35049164.ece?homepage=true

As the world observes 40 years of the HIV/AIDS epidemic, we talk to India’s pioneering activists and advocates who have not stopped spreading awareness about the disease even in these COVID-19 pandemic times.

From being in denial mode in 1986 to reversing the incidence of HIV/AIDS by an impressive margin by 2012, India fought the battle against one of the longest — and ongoing — epidemics with the active participation of the people.

For a conservative society like India’s, it took 15 years of hard work, arguments, discussions and planning to roll out a uniform AIDS control programme. When drugs, treatment and cure were unavailable, prevention was the mainstay.

Former Union Health Secretary, K Sujatha Rao, who served as Director-General of the National AIDS Control Organisation (NACO) from 2006-2009 and was instrumental in herding India's efforts in fighting AIDS, recalls how in a first, representatives of high risk groups and civil society leaders were invited to every meeting with experts to advise on how to check the spread of the disease.

“It received massive global funding and political support that made collection of evidence-based data, mapping, contact origin and tracing of the virus possible. In this huge exercise, the real heroes were the community leaders, activists and volunteers who effectively reached out to target populations,” she says.

Here, we speak to some of them.

Mona Mishra, UNDP South-Pacific Consultant on AIDS

Remembering the contributions of our AIDS warriors

For someone like Mona Mishra, who in 2009 lost her husband, Ramesh (he was haemophilic and got infected with HIV in the early 1990s following blood transfusion), and 12 years later, lost her father to the Coronavirus, anger and aggression perhaps come naturally. Fighting despair and frustration, she remains as committed as ever to make HIV history.
In the early days of the HIV epidemic in India, few people knew anything about the Human Immuno-deficiency Virus (HIV) and the rights of People Living with HIV/AIDS (PLHA). Mona, a young filmmaker then, went about making films on real life stories to challenge discrimination and educate people how the virus could be transmitted.

Mona met and started working with Ramesh in 1995, when doctors had little experience and the Anti-Retroviral Therapy (ART) drugs were neither free nor available easily in India. The couple would get them from their friends in the US and the side effects that included nausea, vomiting, upset stomach, hallucinations took a toll on both, the patient and the caregiver. They established the first support group, Positive Life, and travelled the country with their films on HIV.

“Initially, we did not know how to take our work forward. There was no audience for our films but we realised the imperative need to educate people on how the virus could be prevented from spreading. We started by meeting small groups across sections — doctors, lawyers, University students, housewives, drug users, sex workers, pregnant women, and blood donors to arrest their fear about the disease,” recalls Mona.

“That was the time when due to the stigma and ignorance, people were afraid of people and not the virus,” she says, “and we decided to talk about the disease openly instead of just being silent observers of the Government’s role.”

Progression of HIV response turned remarkable after more than a decade of the first batch of eight cases reported from Madras in 1986. Many more activists like her were able to vociferously advocate for not just treatment of the infected but also their right to live with dignity. They were able to fearlessly tell the Government how to run the show.

Over the years, Mona who joined the UN in the late 90s, kept pushing for long-term perspectives that included reaching out to the most vulnerable groups and ensure proper implementation of safety measures. She brought field experience and ideas to ensure the inclusion of everyone who is at risk — especially transgender individuals, sex workers, drug abusers and men who have sex with men — as they are historically under-represented in medical research and encounter barriers accessing quality healthcare.

“We have to continue working with the young population, who have grown up without information about AIDS because the disease prevention campaigns of the yesteryears have disappeared due to a lack of commensurate funds. The focus has shifted to treatment now,” she says.

Dr. Sunil Solomon, Associate Professor of Medicine, Johns Hopkins University

Remembering the contributions of our AIDS warriorsAs the son of the famous “AIDS doctor of Chennai, Suniti Solomon”, Sunil grew up on dining table conversations around public health. Five years after the world’s first AIDS case was reported in the US in June 1981, his mother, who was a physician and microbiologist, randomly tested 100 blood samples of female sex workers in Chennai. When eight of them tested positive, she sent the samples to the
Division of Infectious Diseases, Johns Hopkins University (JHU), Baltimore, for re-testing. The results marked the first HIV documentation in India.

“Accompanying my mother on her work in the later years, I often wondered how the poor can afford treatment when they fall sick and especially if it is a long drawn disease, such as AIDS.” It drew him to public health and he returned to JHU as an epidemiologist when AIDS cases were peaking in India in the late 90s.

Sunil was quick to understand it was not just about HIV but the way our health system is designed to treat only one disease. Through the YR Gaitonde Centre for AIDS Research and Foundation his mother established and he chairs now, he integrated different disciplines to provide succour to PLHA who require social support and help in dealing with depression and mental health issues.

Sunil says that a holistic HIV prevention programme is needed to improve overall health awareness among high risk populations. “Advocacy needs to be ascertained if we want the multi-pronged approach to HIV infection successfully in place,” he says.

Since a majority of the people either fail to get diagnosed or fall out of the treatment plan unless it is a matter of life and death, Sunil strives to deliver healthcare services at the doorstep through his foundation’s work. “Public health strategies do not change but in this age of social media, we need to change our education campaigns. If we educate masses to move beyond their traditional thinking and priorities, the HIV infrastructure can be pulled out of its slackness and utilised effectively,” he says.

HIV has no symptoms but you pick up other diseases easily when the virus suppresses your immunity and as a result people remain undiagnosed for long. The pioneers of the AIDS movement diligently questioned the politicians and the bureaucrats to mainstream the disease by empowering communities. “My mother always told me, at least try to make treatment easier and save those who break free from barriers and come to you seeking medical care,” he says.

Dr. S Sundararaman, physician and public health strategist, Chennai

Remembering the contributions of our AIDS warriors

The day Dr S Sundararaman was on his way to pay the fees for his admission to Madras Medical College back in the Seventies, his uncle asked him a pertinent question: whether he wanted to be a doctor or a healer?

A decade later, he had his answer. When gynaecologists in Chennai refused and he stepped in to deliver India’s first baby born of HIV-positive parents, he understood how he can help heal people with HIV. “I am more of an instigator who goes around convincing people about the seriousness of an issue,” he says, introspecting.

From the first batch of HIV-infected individuals, when the 20-year-old pregnant woman delivered a baby boy on December 16 and died subsequently, the toddler, who was named after Sundararaman, was adopted by a couple in New Zealand when he was two years old.
Those days, HIV-infected people were kept in a Government home so that they could not spread the disease. It was a difficult time because people did not understand the virus other than the sexual connotation attached to it. The Government fought the battle on morality believing Western culture was alien to India and so AIDS could not come here; condom was not a part of public language and awareness campaigns on risks of unprotected sex were not allowed on prime-time TV.

“It was a perfect example of dichotomy where people did not want to confront the issues of multiple-partners and sex for transaction yet the State sought to ban prostitution without knowing where to find the practitioners of the trade,” says Sundararaman.

The way to deal with fear and trauma is to talk about it and find ways to heal, says Sundararaman, who established the AIDS Research Foundation of India in 1988. People started queuing up outside his clinic increasing his responsibility, he says, and lot of women came to the forefront to launch HIV-awareness and prevention related initiatives because they sensed that for a majority of the women, it was about life after HIV-infection whereas for men it was sex after HIV.

“The social movement for responsible behaviour around HIV has to keep going, or else no will bother about it,” he says.

Moderna (The Asian Age: 20210708)

Study: Pfizer, Moderna vax cut 91% virus risk

Washington, July 7: People who receive Covid-19 vaccines by Pfizer and Moderna are up to 91 percent less likely to develop the disease, according to a US study which also suggests that the preventives reduce the severity of symptoms and duration in those who still get an infection. The research, published in the New England Journal of Medicine on June 30, is among the first to show the benefits of mRNA vaccines even among those who experience breakthrough infections — testing positive after immunisation.

The mRNA vaccines by Pfizer and Moderna contain genetic instructions for our cells to make the spike protein of the SARS-CoV-2, which the virus uses to infect and enter the human cells.

Our immune system then builds an immune response against the spike protein, and learns how to fight off the Coronavirus if we encounter it in future.

“One of the unique things about this study is that it measured the secondary benefits of the vaccines,” said study co-author Sarang Yoon, an assistant professor at the University of Utah, US. The study was designed to measure the risks and rates of infection among those on the front lines of the pandemic — doctors, nurses, and first responders.

“These are the people who are getting exposure to the virus day in and day out, and the vaccine protected them against getting the disease. Those who unfortunately got COVID-19 despite being vaccinated were still better off than those who didn’t,” he added.

CDC says Delta is dominant variant

Houston, July 7: The highly contagious Delta variant has become the dominant Coronavirus strain in the US, accounting for more than 51 percent of Covid infections in the country, according to new data released by the Centre for Disease Control and Prevention.

The variant, also known as B.1.617.2, was first detected in India in December and is spreading quickly across the globe. In some parts of America, the Delta strain accounts for more than 80 percent of new infections, including some Midwestern states like Missouri, Kansas and Iowa. It is already causing 74.3 percent of infections in Western states, including Utah and Colorado, and 59.3 percent in Southern states like Texas, Louisiana, Arkansas and Oklahoma, according to CDC estimates.

New Covid infections with the Delta variant now account for 51.7 percent of the infections. The B.1.1.7 or Alpha variant makes up for 28.7 percent cases after remaining a dominant variant for months, the data said.

NEW COVID infections with the Delta variant now account for 51.7 percent of the infections. The B.1.1.7 or Alpha variant makes up for 28.7 percent cases.
Covid vaccine doses

Over 1.67 crore Covid vaccine doses still available with states, private hospitals: Centre (The Tribune: 20210708)

Over 37.43 crore vaccine doses have been provided to states and UTs so far through all sources

Photo for representation only. Tribune file

More than 1.67 crore balance and unutilised Covid vaccine doses are still available with the states, UTs and private hospitals to be administered, the Union Health Ministry said on Wednesday.

Over 37.43 crore vaccine doses have been provided to states and UTs so far through all sources and a further 48,65,110 doses are in the pipeline, it said.

Of this, the total consumption including wastage is 35,75,98,947 doses, the ministry said.

The new phase of universalisation of Covid vaccination commenced on June 21. PTI

Recoveries continue to outnumber new Covid cases

Recoveries continue to outnumber new Covid cases for 55th consecutive day (The Tribune: 20210708)

43,733 new cases, 930 more deaths reported

Photo for representation only. Tribune file

India added 43,733 new cases of coronavirus taking the total infection tally to 3,06,63,665, while the active cases further declined to 4,59,920, according to the Union Health Ministry data updated on Wednesday.
The death toll climbed to 4,04,211 with 930 daily fatalities.

The active cases have further declined to 4,59,920 and comprise 1.5 per cent of the total infections, while the national Covid recovery rate has improved to 97.18 per cent, the data updated at 8 am showed.

Also, 19,07,216 tests were conducted on Tuesday taking the total cumulative tests conducted so far for detection of Covid in the country to 42,33,32,097.

The daily positivity rate was recorded at 2.29 per cent. It has been less than three per cent for 16 consecutive days, the ministry said, adding the weekly positivity rate has declined to 2.39 per cent.

Recoveries continue to outnumber daily new cases for the 55th consecutive day. The number of people who have recuperated from the disease surged to 2,97,99,534, while the case fatality rate stands at 1.32 per cent, the data stated.

The ministry said the cumulative vaccine doses administered so far had reached 36.13 crore under the Nationwide Vaccination Drive.

The 930 new fatalities include 395 from Maharashtra, 142 from Kerala and 92 from Karnataka.

A total of 4,04,211 deaths have been reported so far in the country, including 1,23,531 from Maharashtra, 35,526 from Karnataka, 33,132 from Tamil Nadu, 25,001 from Delhi, 22,656 from Uttar Pradesh, 17,834 from West Bengal and 16,131 from Punjab. PTI

Crowding at hill stations scary, says ICMR chief

Crowding at hill stations scary, says ICMR chief (The Tribune: 20210708)


With daily Covid-19 cases falling to 34,703, the government on Tuesday flagged “frightening laxity” on part of the people and said the timing and scale of the third wave would depend on collective behaviour.

Reacting to pictures of overcrowded hill stations, shopping areas and other public places, ICMR Director General Balram Bhargava said the frames were “frightening”. He said there were still 73 districts in 14 states, including Himachal’s Kinnaur, where positivity rate was over 10 per cent.
He advised restrictions in these districts, some of which “are still in the middle of the second wave”. The official data showed that 80 per cent new cases concentrated in 90 districts, signalling localised infection.

**Pollution (Hindustan: 20210708)**

[Link to article]

---

**Corona Infection**

देश में 24 घंटे में मिले 45,892 नए कोरोना संक्रमित, 817 की हुई मौत; केंद्रीय स्वास्थ्य मंत्रालय ने जारी किया आंकड़ा (Dainik Jagran: 20210708)

[Link to article]

वर्ष 2019 के अंत में चीन से कोरोना संक्रमण की शुरुआत हुई जिससे अब तक भारत में कुल पॉजिटिव मामलों का आंकड़ा 30709557 हो गया है और मरने वालों की कुल संख्या 405028 है।
नई दिल्ली, एनएसआई। देश में बीते 24 घंटों के दौरान 45,892 नए केस सामने आए और 817 संक्रमितों की मौत हो गई। यह आंकड़ा अज सुबह केंद्रीय स्वास्थ्य मंत्रालय की ओर से जारी किया गया है। वहीं इस दौरान देश भर में कोरोना वैक्सीनेशन का आंकड़ा 33,81,671 है। इस साल के जनवरी माह से देशभर में कोरोना वैक्सीनेशन का अभियान शुरू किया गया जिसके तहत अब तक कुल 36,48,47,549 खुराकें दी जा चुकी हैं।

भारत में अब तक कुल कोरोना संक्रमितों का आंकड़ा 3,07,09,557 है और इस महामारी की चपेट में आकर दम लगाने वालों की संख्या 4,05,028 है। पिछले दिनों देश ने कोविड-19 महामारी की दूसरी लहर का प्रकोप झेला और अब इससे उबरने के संकेत मिल रहे हैं। हालांकि इस घातक वायरस के नए-नए वैरिएंट आने के साथ ही तीसरी लहर को लेकर संभावनाएं जताई जा रहीं हैं।

मंत्रालय के अनुसार, अभी देश में कोरोना के कुल सक्रिय मामलों का आंकड़ा 4,60,704 है वहीं अब तक स्वस्थ होने वाले लोगों की संख्या 2,98,43,825 है। मौजूदा सक्रिय मामले कुल संक्रमण के मामलों का 1.5 फीसद है। वहीं देश में संक्रमण का रिकवरी रेट 97.18 फीसद है। हर दिन आने वाले संक्रमण के दर की बात करने तौर पर मंत्रालय के अनुसार यह 2.42 फीसद है। स्वास्थ्य मंत्रालय की ओर से इस बात पर जोर दिया गया है कि 70 फीसद मौतें कोरोना के बीमारों या वैक्सीनिएशन के दौरान हुई।

पिछले साल 7 अगस्त को देश में संक्रमण का आंकड़ा 20 लाख के पार चला गया था। इसके बाद संक्रमण का आंकड़ा 12 अगस्त को 30 लाख के पार, 5 सितंबर को 40 लाख, 16 सितंबर को 50 लाख, 28 सितंबर को 60 लाख, 11 अक्टूबर को 70 लाख, 29 अक्टूबर को 80 लाख, 20 नवंबर को 90 लाख और 19 दिसंबर को 1 करोड़ के पार चला गया। इस साल 4 मई को 2 करोड़ और 23 जून को 3 करोड़ के पार हो गया।

Coronavirus Patient (Hindustan: 20210708)

https://epaper.livehindustan.com/imageview_908982_88037590_4_1_08-07-2021_2_i_1_sf.html
राजधानी में दो महीने बाद कोरोना के सक्रिय मरीज बढ़े

रिपोर्ट

दिल्ली में बुधवार को 60 दिन बाद सक्रिय मरीजों की संख्या बढ़ी है। बुधवार को दिल्ली में 858 सक्रिय मरीज हो गए, एक दिन पहले 833 सक्रिय मरीज थे। बुधवार को 93 नए मामले सामने आए। वहीं 64 मरीजों को छुट्टी दी गई, साथ ही चार मरीजों ने कोरोना के कारण दम तोड़ दिया।

दिल्ली में कोरोना से अभी तक 1434780 मरीज संक्रमित हो चुके हैं। इनमें से 1408917 मरीज ठीक हो गए, जबकि 25005 मरीजों ने कोरोना को तोड़ा।

• कोरोना संक्रमण के 93 नए मामले सामने आए
• 64 मरीज स्वस्थ हुए जबकि चार मरीजों की मौत हो गई

के कारण दम तोड़ दिया। दिल्ली में कोरोना से मृत्युदर 1.74 फीसदी है। दिल्ली में मंगलवार को कोरोना की जांच के लिए 78582 टेस्ट हुए जिसमें 0.12 फीसदी मरीज संक्रमित पाए गए। अस्पतालों में 489 मरीज और होम आइसोलेशन में 265 मरीज भर्ती हैं।

Virus (Hindustan: 20210708)

रहें सतर्क! 55 दिन बाद रिकवर होने वालों से ज्यादा मिले कोरोना के नए केस, एक्टिव केसों में भी इजाफा (Hindustan: 20210708)

कोरोना वायरस के मामलों में बीते करीब दो महीने से लगातार जारी गिरावट अब कम होती दिख रही है। बीते 24 घंटे में देश भर में कोरोना संक्रमण के 45,892 नए केस मिले हैं। वहीं इस अवधि में 44,291 लोग रिकवर हुए हैं। 55 दिनों के बाद यह पहला मौका है, जब कोरोना के नए मामलों की संख्या रिकवर होने वाले लोगों से अधिक है। यही नहीं पिछले एक दिन में कोरोना के चलते 817 लोगों की मौत हुई है। यही नहीं बुधवार की तुलना में एक्टिव केसों की संख्या में भी इजाफा हुआ है। तब 4.59 लाख एक्टिव केस देश भर में थे, जो अब बढ़कर 4.60 लाख के पार हो गए हैं।

फिर से देश में कोरोना के कुल सक्रिय मामलों की संख्या 4,60,704 है। देश में लगे अब तक कुल केसों के मुकाबले एक्टिव केसों की संख्या 1.50 फीसदी है। अब तक देश में 3.07 करोड़ लोग कोरोना से संक्रमित हुए हैं, जिनमें से 2.98 करोड़ लोगों ने वायरस को मात दी है। पिछले एक दिन में ही 44,291 लोग रिकवर हुए हैं। हालांकि ऐसा 55 दिन बाद हुआ है, जब रिकवर होने वालों की संख्या एक्टिव मामलों की तुलना में कम हुई है। यह चिंताओं को बढ़ाने वाली बात है। हालांकि अब भी कोरोना का रिकवरी रेट देश में 97.18 परसेंट बना हुआ है।

वीकली पोजिटिविटी रेट की बात करने तो यह लगातार 5 फीसदी से कम रहते हुए फिलहाल 2.37% है। डेली पोजिटिविटी रेट भी लगातार 17 दिनों से 3 फीसदी से कम बना हुआ है। देश में टीकाकरण की तेज रफ्तार और राज्यों की ओर से लागू की गई पाबंदियों के चलते बीते कुछ सप्ताहों में तेजी से कोरोना के केसों में कमी देखने को मिली थी। लेकिन अब इसमें एक बार फिर से इजाफा होना चिंता की वजह है। हालांकि अब भी नए केसों की संख्या प्रतिदिन 50,000 के बैंचमार्क से नीचे है, लेकिन सतर्कता बनाए रखना जरूरी है।

WHO

WHO ने कहा- कोरोना महामारी के खतरनाक मोड़ पर दुनिया, वैश्विक मौत का आंकड़ा 40 लाख के पार (Dainik Jagran: 20210708)


डब्ल्युआयसीओ के प्रमुख टेक्नस अध्यानों धेरेवेरस (Tedros Adhanom Ghebreyesus) ने कहा है कि दुनिया कोरोना महामारी के खतरनाक मोड़ पर है। इसको लेकर आगाह किया गया है। उन्होंने कहा कि 40 लाख का आंकड़ा मौतों की वास्तविक संख्या से कम है।
जिनेवा, एएनआई। दुनियाभर में फंसे कोरोना वायरस महामारी से जान मंगवाने वालों का आंकड़ा 40 लाख के पार पहुंच गया है। बुधवार को दुनिया के सभी देशों को मिलाकर कोरोना के मौत का आंकड़ा 40 लाख के ऊपर चला गया। अब तक दुनियाभर में 18 करोड़ से अधिक की आबादी कोरोना संक्रमण की चपेट में आ चुकी है। हालांकि, भारत समेत कई देशों में कोरोना के मामले कम हो रहे हैं लेकिन अभी भी दुनियाभर में कोरोना के एक करोड़ से भी ज्यादा एक्टिव केस मौजूद हैं जो की चिंता का बात है। दुनिया भर में कोरोना वायरस के नए-नए वैरिएंट के सामने आने से चिंताएं और बढ़ गई हैं।

इस बीच, विश्व स्वास्थ्य संगठन (डब्ल्यूएसडीओ) ने कोरोना से 40 लाख मौतों पर अपना बयान जारी किया है। विश्व स्वास्थ्य संगठन (डब्ल्यूएसडीओ) के प्रमुख टेड्रेस घेनरस ने बुधवार को कहा कि इस महामारी में दुनिया एक खतरनाक स्थिति में है। दुनिया में कोरोना से अबतक 40 लाख से अधिक लोगों की मौत हो चुकी है। उन्होंने कहा कि कुछ देश जहां कोरोना के खिलाफ टीकाकरण तेज नहीं हुआ है वहाँ लोग ये समझने में असमर्थ के कारण इलाज नहीं मिल रहा है। इसके साथ ही कम टीकाकरण वाले देशों में कोरोना के मामलों में फिर से तेज आने लगा है। बुधवार को COVID-19 पर मीडिया ब्रिफिंग में बोलते हुए टेड्रेस ने कहा दुनिया इस महामारी के एक खतरनाक बिंदु पर है।

डब्ल्यूएसडीओ के प्रमुख टेड्रेस अध्यालोम घेनरस ने कहा, दुनिया कोरोना महामारी के खतरनाक मौड पर है। उन्होंने कहा कि 40 लाख का आंकड़ा मौतों की वास्तविक संख्या से कम है। इस दौरान उन्होंने वैक्सीन और सुरक्षा उपकरणों की जमाखोरी कर रहे अमेरिका के मौलिक बात लेकर उन्होंने कहा कि वे ऐसे काम कर रहे हैं जो कम महामारी पहले ही खत्म हो चुकी है। दुनिया का हर कोने में बहुत से देशों में तेजी से बढ़ते वायरस के वैरिएंट और कम टीकाकरण के कारण मामलों और अस्पताल में भर्ती होने में तेजी शीघ्र चढ़ जा रही है। टेड्रेस ने कहा कि अमेरिका, एशिया और यूरोप आमरिका के कुछ हिस्सों में ऑक्सीजन की कमी, डिलाइ और अपर्याप्त सुविधा की वजह से मौत की लहर चल रही है।

अमेरिका, भारत और ब्राजील में सबसे ज्यादा केस

दुनियाभर के सबसे ज्यादा कोरोना प्रभावित देशों की बात की जाए तो अमेरिका, भारत और ब्राजील में सबसे ज्यादा मामले मिले हैं। अमेरिका में कोरोना संक्रमण के मामलों की संख्या करीब साढ़े तीन करोड़ पहुंच गई हैं और कोरोना से होने वाली मौतों का आंकड़ा 45 लाख से ज्यादा है। भारत में कोरोना केस के पार पहुंच गए हैं और मौत का आंकड़ा चार लाख के पार पहुंच गया है। ब्राजील में कोरोना के केस देख करोड़ से ज्यादा हो गए हैं और इससे मौतों का आंकड़ा सवा लाख से ज्यादा है। इन तीनों देशों में दुनिया के अधिक से ज्यादा कोरोना मरीज हैं।
गलती से भी खाली पेट न खाएं ये 5 चीज़ें, पड़ सकते हैं बीमार! (Dainik Jagran: 20210708)

ब्रेकफास्ट में हेल्दी चीजों का सेवन करने की कोशिश करें। हालांकि होता यह है कि हम में से कम लोग सुबह के नाश्ते को सीरियसली से पाते हैं। सुबह या तो लोग सिर्फ चाय/कॉफी पी लेते हैं या फिर भागादौड़ी में कुछ भी खा लेते हैं।

नई दिल्ली, लाइफस्टाइल डेक। Eating Empty Stomach: अक्सर आपने एक्सपर्ट्स की सलाह सुनी होगी कि सुबह का नाश्ता जल्दी उठकर करना चाहिए। ऐसा इसलिए क्योंकि रात के खाने के बाद आपके पेट को लंबे समय तक खाली रखना पड़ता है।

इसलिए यह भी सलाह दी जाती है कि ब्रेकफास्ट में हेल्दी चीजों का सेवन करने की कोशिश करें। हालांकि, होता यह है कि हम में से कम लोग सुबह के नाश्ते को सीरियसली से पाते हैं। आमतौर पर सुबह या तो लोग सिर्फ चाय/कॉफी पी लेते हैं या फिर भागादौड़ी में कुछ भी खा लेते हैं।

असल में सुबह का नाश्ता हमारी सेहत के लिए बेहतर महत्वपूर्ण होता है। इसलिए कई ऐसी चीज़ें हैं जो आपको खाली पेट नहीं खानी चाहिए, क्योंकि इससे आपके पाचन से संबंधित दिक्कतें हो सकती हैं। तो आए जाने कि सुबह कया न खाएं?

1. चाय/कॉफी: ज्यादातर लोग अपनी सुबह की शुरुआत चाय या फिर कॉफी के साथ करना पसंद करते हैं। उन्हें खाली पेट चाय या कॉफी की ऐसी आदत पड़ जाती है कि इसके बिना उनके लिए दिन की शुरुआत मुश्किल हो जाती है। लेकिन क्या आप जानते हैं कि खाली पेट चाय या कॉफी पीने से सेहत को नुकसान पहुंचता है। इससे गैस या एसिडिटी की शिकायत शुरु हो सकती है, इसलिए इसके साथ हमेशा बिस्किट या ब्रेड जैसी कोई चीज़ भी ज़रूर खाएं।

2. अमरूद: आमतौर पर एक्सपर्ट्स सुबह खाली पेट नाश्ते में फल खाने पर ज़ोर देते हैं। लेकिन ऐसे फल भी हैं, जिन्हें खाली पेट खाने से बचना चाहिए। विटामिन-सी भरपूर अमरूद को वैसे तो पाचन के लिए अच्छा माना जाता है, लेकिन इसे सुबह खाली पेट खाने से पेट दर्द भी हो सकता है।
3. सेबः ऐसा ही दूसरा फल है सेब, जिसे खाली पेट खाने से बचना चाहिए। सेब में भरपूर मात्रा में मौजूद विटामिन-ए, बी, सी, कैल्शियम, पोटेशियम और एंटीऑक्सीडेंट्स होते हैं, जो आपके शरीर को कई तरह से फायदा पहुँचाते हैं। लेकिन सेब को सुबह-सुबह खाली पेट खा लेने से नुकसान भी पहुंच सकता है।

हाथ में कप लिए दूसरे हाथ से पेट पकड़े महिला
कब्ज की समस्या दूर करने के साथ हाजिमे को रखेंगी दुस्स्त, किचन में मौजूद ये नेचुरल चीज़े
यह भी पढ़े

4. दही: दही खासतौर पर गर्मियों में शरीर को ठंडक पहुंचाने का काम करता है। इसमें मौजूद गुड बैकटीरिया सेहत के लिए फायदेमंद होते हैं, लेकिन दही को भी सुबह खाली पेट खाने से नुकसान पहुंच सकता है।

5. टमाटर: टमाटर को भी खाली पेट खाने से बचना चाहिए। ऐसा इसलिए क्योंकि इसकी तासीर गर्मी होती है, जो पेट में या सीने में जलन की समस्या पैदा कर सकते हैं, खासतौर पर गर्मी के मौसम में।