Delta variant

China sounds Covid-19 alarm as Delta variant spreads to 18 provinces (The Tribune: 20210802)


More than 300 domestic cases were detected in 10 days

The highly contagious Delta variant of the Covid-19 has raised major concerns in China as it spread to 18 provinces with fresh cases emerging in capital Beijing on Sunday.

At least 18 provinces in China have sounded alarm about Covid-19 as more than 300 domestic cases were detected in 10 days, posing great challenges to the country as it deals with the worst epidemic in months, official media reported.

At least 27 cities in 18 provinces reported more than 300 confirmed cases in recent days, including Beijing, Jiangsu, and Sichuan, state-run Global Times reported on Sunday.

The number of medium and high-risk regions across the country rose to 95 on Sunday, of which 91 are medium-risk regions and four are high-risk regions, including Dehong Prefecture of Yunnan, Nanjing of Jiangsu, and Zhengzhou of Henan, the report said.

Capital city Beijing reported two new Covid-19 confirmed and one asymptomatic cases on Sunday, a spokesperson said at a press briefing.

The three are all family members who returned from Zhangjiajie, a tourist destination in South China's Hunan Province with recent outbreaks.

The Beijing Centre for Disease Control (CDC) tested the confirmed patients on Thursday and the result shows they all contracted the contagious Delta variant.
People, vehicles, airlines, and trains from regions with reported Covid-19 infections are being restricted from entering Beijing, Beijing municipal government said on Sunday.

The Chinese CDC compared the cases with the cases in Nanjing and found that they were on the same infection chain, official media reported.

This wave of domestic outbreaks started with the infections of cleaners from Nanjing's Lukou International Airport, later it spread to more local people and other provinces after shared travel experiences in tourist destination in Zhangjiajie, Central China's Hunan Province.

On Saturday over 11,000 tourists were found to have visited Zhangjiajie. After the outbreak, all the tourist spots there were shut down and all the tourists were asked to undergo Covid-19 tests before leaving the area.

Zhong Nanshan, China's top respiratory disease specialist expressed grave concern over the latest outbreak in Zhangjiajie.

Zhong said Nanjing as a big city is doing a good job in epidemic prevention and control but whether the epidemic in Zhangjiajie will further spread within the smaller city is still unknown.

COVID PANDEMIC

541 die in 24 hours as India records 41,831 new Covid-19 cases (The Tribune: 20210802)


Tally reaches 3,16,55,824; death toll climbs to 4,24,351 with 541 daily fatalities

541 die in 24 hours as India records 41,831 new Covid-19 cases

A health worker collects swab sample for Covid-19 test at KR market in Bengaluru. PTI

India saw a single-day rise of 41,831 new Covid-19 cases, taking the tally to 3,16,55,824, while the cumulative vaccine doses administered in the country has crossed 47 crore, according to Union Health Ministry data updated on Sunday.

The death toll climbed to 4,24,351 with 541 daily fatalities.

Registering an increase for the fifth consecutive day, the active cases have climbed to 4,10,952 and comprises 1.30 per cent of the total infections, while the national Covid-19 recovery rate was recorded at 97.36 per cent, the data updated at 8 am showed.
An increase of 2,032 Covid cases has been recorded in the total number Covid-19 caseload in a span of 24 hours.

Also, 17,89,472 tests were conducted on Saturday, taking the cumulative tests conducted so far for detection of Covid-19 in the country to 46,82,16,510, while the daily positivity rate was recorded at 2.34 per cent.

Weekly positivity rate was recorded at 2.42 per cent, according to the health ministry.

The number of people who have recuperated from the disease surged to 3,08,20,521, while the case fatality rate stands at 1.34 per cent, the data stated.

Cumulative vaccine doses administered so far has reached 47.02 crore under the nationwide vaccination drive.

India’s Covid-19 tally had crossed the 20-lakh mark on August 7, 30 lakh on August 23, 40 lakh on September 5 and 50 lakh on September 16.

It went past 60 lakh on September 28, 70 lakh on October 11, crossed 80 lakh on October 29, 90 lakh on November 20 and surpassed the one-crore mark on December 19.

India crossed the grim milestone of two crore on May 4 and 3 crore on June 23.

The 541 new fatalities include 225 from Maharashtra and 80 from Kerala and 68 from Odisha.

A total of 4,24,351 deaths have been reported so far in the country, including 1,32,791 from Maharashtra, 36,562 from Karnataka, 34,076 from Tamil Nadu, 25,053 from Delhi, 22,756 from Uttar Pradesh, 18,136 from West Bengal and 16,293 from Punjab.

**Food and Nutrition**

**Effective dietary rules to help control blood glucose in diabetics (The Indian Express: 20210802)**


Lifestyle intervention can only do as much and patients usually require effective medical therapies to optimise risk factor control in diabetes, said Dr Vishal Gupta.

It is seen that the average adult in India consumes approximately 58 grams of sugar daily, said Dr Vishal Gupta. (Source: Pixabay)

The goal of medical nutrition therapy in type 2 diabetes mellitus is to regulate the amount of carbohydrate, cholesterol and salt consumption to help optimise glycemic control, lipid...
(cholesterol) and blood pressure control. Lifestyle intervention can only do as much and patients always require effective medical therapies to optimise risk factor control in diabetes, said Dr Vishal Gupta, director of VG-Advantage diabetes thyroid and endocrine Centre, Mumbai, and consultant endocrinologist at Breach Candy Hospital and Research Centre, Mumbai.

Monitor daily calorie intake

For the normal weighted diabetic with BMI 18-23kg/m2, the aim is to maintain the body weight by consulting an average of 1,200–1,500 kcal per day for women, and 1,500–1,800 kcal for men. In order to lose weight, one must consume a 500–750 kcal/day energy deficit dietary plan, said Dr Gupta, who is also the author of Beyond Type 2 Diabetes Mellitus.

Focus on the intake of carbohydrates from vegetables, legumes, fruits, dairy products, and whole grains. Strongly discourage the diabetic patient or minimise the consumption of refined carbohydrates such as white flour, white rice, “low-fat” or “non-fat” food products with high amounts of refined grains, table sugar and sugar-sweetened beverages like soft drinks, he mentioned.

The WHO recommends that sugar intake be reduced to 5 per cent of the total calorie intake which is 25 grams of sugar per day for an average-sized person. It is seen that the average adult in India consumes approximately 58 grams of sugar daily.

Also Read | How many servings of fruits a day can lower risk of type 2 diabetes?

Diabetes Effective rules to help control blood glucose in diabetes. (Source:Pixabay)

Monitor the quality of carbohydrate consumed

Glycemic index (GI) refers to the quantitative assessment of the post-meal blood glucose response of certain foods, which is expressed as a percentage. So higher the glycemic index, greater is its ability to raise the patients’ blood glucose.

Foods with a GI score over 70 are referred to as high glycemic, which is fast release of carbohydrate and higher post-meal blood glucose response. Foods with a GI score of 55 or less are referred to as low glycemic which help in slow release of carbohydrate and lower post-meal blood response. For example, white rice has a GI close to 93 as do commonly consumed biscuits versus brown rice which has a GI of 50.

Dietary fibers can be described as any non-digestible carbohydrates that cannot be broken down in the upper food tract, thus helping reduce the GI of foods.

For examples, soluble dietary fibre in fruits, berries, certain vegetables i.e., pectins from guava, carrots; beans, lentils; nuts; germ fraction from oat and barley products, and psyllium. Insoluble dietary fibre include whole grain and bran products; skins of fruit; cucumbers, tomatoes; hull of grains; brown rice; legumes; nuts, almonds. “High dietary fibre intake has shown to result
in a 20–30 per cent decrease in future risk of type 2 diabetes and lower the post-meal glucose excursion,” said Dr Gupta.

Protein ingestion has appeared to stimulate insulin secretion and cause a decrease in post-meal glycemic response. When dietary protein (e.g. leucine) is ingested along with glucose, it helps in reducing the post-meal glycemic response by 50 per cent.

Similarly, the co-ingestion of soya protein along with rice has shown to reduce the post-meal blood glucose response. With regards to protein intake in diabetic patients without diabetic kidney, the average daily protein intake can be up to 1–1.5 gm/kg bodyweight per day or 15–20 per cent of the total calories. Whereas, for those with diabetic kidney disease, the aim should be to restrict the daily allowance of protein to 0.8 gm/kg bodyweight per day.

Monitor the method of cooking

Dr Gupta explained that potatoes generally have one of the highest GI values of any food. Baking a potato may offer an advantage over boiling as it involves less cooking of its internal part, thereby helping to reduce the digestibility of potato.

“The average GI of canned potatoes is almost 36 per cent less as the preservation method that involves placing foods in jars or similar containers and heating them to a temperature that destroys microorganisms which spoils the food. Canning of starch-rich foods such as potatoes could decrease the GI. Cooling can also lower the GI of the food as it helps reform the crystalline structure of the carbohydrate known as ‘Retrogradation’ thereby reducing the GI,” he said.

For example, pasta cooked hot and fresh has a high GI but upon refrigeration or cooling and consuming the next day, the GI reduces substantially. Cooking Indian basmati rice in a microwave oven compared to a rice cooker lowered the GI by 20.4 per cent, he mentioned.

However, the problem that remains despite all these different cooking methods is the absolute increased carbohydrate consumed by the average Indian diabetic.

Efforts must be taken to improve health-related outcomes, especially in India, and from the evidence it is clear, that by limiting both total carbohydrate intake and foods with high GI, not only weight but also all indices of metabolic health can be improved, he stressed.
Covid fatalities drop to 2 in July

55 patients died in June; GMCH turns coronavirus-free(The Tribune: 20210802)


Two deaths took place in the UT in the month of July due to Covid-19, which is the lowest since the pandemic struck the region.

Chandigarh: The city on Saturday reported one new case of Covid-19 and one death. A total of five patients were cured of the disease in the past 24 hours. TNS

One case in Panchkula

Panchkula: The district on Saturday saw just one fresh case of Covid-19, taking the tally to 30,640. With no fresh fatality, the toll remained at 376. TNS

Mohali: Four new cases of Covid-19 were detected while six patients were cured in the district in the past 24 hours. Among the new cases, two were from Mohali and one each from Dhakoli and Kharar. TNS

What’s more? The last Covid-19 patient at the Government Medical College and Hospital (GMCH), Sector 32, was discharged today and the hospital is Covid-free as of now.

Dr Jasbinder Kaur, Director, GMCH-32, said, “This is for the first time that there is not even a single Covid patient admitted to our hospital. There was always an influx of Covid patients in our hospital. No patient was occupying the ICU ventilator bed for quite some time but today, the last patient was discharged. There is no Covid patient as of now and we are very happy about it. Hope it stays the same.”

From witnessing 5,901 cases in the second week of May, the weekly cases have dropped to 38 last week. The positivity rate in July dropped to 0.6 per cent from 2.7 per cent last month. Only 283 persons contracted Covid-19 in Chandigarh this month, while it was 1,624 cases in June.

In the past one week, 0.3 per cent of samples tested positive. For every lakh people in Chandigarh, 51,946 samples were tested and 5,255 out of every lakh people have tested positive for the virus.

Dr Amandeep Kang, Director, Health Services, UT, said, “This is the result of vaccination that Chandigarh has recorded such low fatalities this month. Around 83 per cent of the population has got the first dose. We need to maintain these statistics by wearing masks and maintaining social distance till we completely eradicate Covid from our lives.”
Food fortification

New study calls for restraint in ‘unnecessary’ food fortification (The Hindu: 20210802)


There is a need for “extreme caution” in implementing food fortification to address micronutrient deficiencies in India and attention must be paid to the consequences of excess intake when such schemes are offered along with food supplements, a new paper has argued.

The report makes a case for improving dietary diversity instead.

The paper is authored by Dr. Anura V. Kurpad, St. John’s National Academy of Health Sciences, Bengaluru; Dr. H.P.S. Sachdev, Senior Consultant in Pediatrics and Clinical Epidemiology at Bhartia Institute of Science & Research, New Delhi, among others.

It examines the issue of food fortification by looking into iron fortification for fighting anaemia. The paper comes at a time the government is implementing a pilot programme across 15 States for iron fortified rice under the public distribution system (PDS), following which, it is likely to decide on extending the programme nationwide.

The study argues that there is under-estimating of haemoglobin (Hb) and over-estimating of anaemia in the country primarily due to three factors — use of inappropriate Hb cut-offs; adoption of finger prick or capillary blood sampling method instead of venous blood sampling; and inflated daily nutrient requirement for iron, which has recently been revised downwards.

It cites a recent paper published in The Lancet on Hb thresholds in the country to highlight that Hb cut-off to define anaemia in Indian children and adolescents could be lower than the present World Health Organization (WHO) Hb cut-off, bringing down anaemia prevalence to 11% from the current 30%.

The paper also alludes to the difference in anaemia prevalence in two surveys to raise questions about the methodology for blood sampling — the National Family Health Survey 4, which used the finger prick method for blood sampling and found 56% of children between 1-to-4 years to be anaemic, while the Comprehensive National Nutritional Survey 2018, which used the venous method, found this to be at 41%.

Thirdly, the authors argue that policymakers have relied on older daily nutrient requirement (RDA) numbers, which were almost double and have since been revised by the Indian Council
of Medical Research and National Institute of Nutrition in 2020. For example, the requirement for an adolescent girl or boy was 30 mg per day as per the old norms, which now stand halved.

“Is there an Indian diet that can meet these requirements? Indeed, there is. You don’t need to fortify to meet the requirements of 15-18 mg of iron per day in the Indian diet,” Dr. Kurpad explained in a webinar.

The authors have also cautioned against layering new interventions such as fortification of rice with iron on top of existing programmes such as those that give iron supplements to beneficiaries at anganwadis.

“There is a need for restraint in considering unnecessary fortification. We need to consider whether we truly have an iron deficient diet, or is it that we are not absorbing that iron, or is it that there are many other factors involved in anaemia? Just putting more and more into the diet places a part of the population at risk of exceeding the tolerable upper limit of intake at which adverse events begin to occur,” says Dr. Kurpad.

**Mixed-vaccine**

**Covid-19 | CMC Vellore to conduct mixed-vaccine trial (The Hindu: 20210802)**


DCGI nod is significant given shortage of Covaxin.

The Drug Controller General of India (DCGI) has approved a clinical trial, to be conducted by the Christian Medical College, Vellore, to evaluate if a mixed vaccine combination can work as opposed to the current policy of both doses being the same vaccine.

India has administered 45.6 crore vaccine doses so far of which nearly 88% are Covishield. With limited supplies of Covaxin, a mixed dose regime may help cover a supply shortfall.

“After detailed deliberation, the committee recommended for grant of permission for conduct of the Phase IV clinical trial,” said the minutes of the meeting that were made public on Friday, though details of the trial were not.

A Phase 4 trial is intended to study the effects of treatment or medical product once it has been licensed for public use. In this case, because both Covaxin and Covishield have been approved under emergency use authorisation, the trial is expected to investigate a range of questions, including whether combining vaccines elicits a different level of antibodies to the virus, whether a combination may be more effective against variants and if such a regime would be safe.
“Safety, immunogenicity and reactivity are among the main questions that we will be investigating,” said Dr. Jacob John, of the Christian Medical College, Vellore and one of the investigators of the trial. He said that those participating in the trial would be a mix of health workers and people in the community and said that 500-600 volunteers would be potentially available.

Many other countries have experimented with having different vaccines in trial mode most, prominently the Com-Cov clinical trial in the United Kingdom, which mixed Pfizer with AstraZeneca, and the Spanish CombivacS trial which again tested the same vaccine combination. Provinces in Canada have allowed vaccines to be mixed and matched. While the effectiveness of these combinations is not proven, experts said safety was unlikely to be a major concern, though it would take a very large pool of volunteers to establish it either way.

“There have been different vaccines for whooping cough,” said T. Jacob John, epidemiologist and formerly with the CMC Vellore. “ In the case of the coronavirus vaccines, they are all aimed at the spike protein so it’s unlikely safety would be a major concern as these aspects have been evaluated earlier. However when mixing vaccines, it’s the specific research questions being asked that matter.”

On Friday, the makers of the Sputnik V vaccine, also available in limited quantities in India, reported that a trial on 50 volunteers in Azerbaijan, who received the Russian vaccine and AstraZeneca had proven to have “a high safety profile” and no serious adverse events.

Covaxin and Covishield, while aimed at the spike protein, are made differently. Covishield is genes of the spike protein wrapped in a weakened adenovirus, that transports these genes into the body’s cells where it’s machinery makes more such spike protein, invoking an immune response. Covaxin is an inactivated sSARS-CoV2 virus —a more traditional method of manufacture — that exposes a non-replicating part of the virus to the body’s immune system. Current evidence suggests that both successfully elicit significant antibody levels but are affected differently by virus variants.

**COVID-19**

**Clubbed together for comfort during COVID-19, here’s the rise of ‘unlabelled virtual wards’ on social media (The Hindu: 20210802)**


Representative image of a woman in COVID-19 isolation, wearing a mask, and using her smartphone | Photo Credit: Deepak Sethi for Getty Images/iStockPhoto
Audio drop-in apps like Clubhouse and Spotify Greenroom are seeing spontaneous rooms of COVID-positive people, helping each other through quarantine virtually.

A cough. A sniffle. A bit of Prateek Kuhad can be heard in the background, amid an ongoing conversation about the new season of Rick and Morty. This is the scene in an unlabelled Clubhouse Room for people currently fighting COVID-19 and seeking virtual comfort.

(Subscribe to our Today's Cache newsletter for a quick snapshot of top 5 tech stories. Click here to subscribe for free.)

A week after Priyanka Gantala* tested positive for Coronavirus in the third week of July, she felt her spirits dampen with umpteen incoming texts and calls enquiring about her symptoms, medication, her pain and other depressing topics.

“While I understood my friends and colleagues are worried, I wanted to interact for a bit with people who could bring in some lighthearted banter but also know what it is like to be emotionally isolated,” she says over the phone from her home in Mumbai.

So Priyanka and a friend of hers in Bengaluru, who also tested positive, got on a call. They enjoyed it so much, it lasted for four hours. “We had a bet (laughs), if we mention the words ‘COVID’ or ‘Corona’ or something along those lines, we had to do a dare assigned by the other person. But it never came to that; we were just happy to talk about anything else,” says Priyanka.

A couple of days later, she was browsing the app Clubhouse, and saw how sessions of meditation and ambient noises offered a lot of comfort to many unconnected strangers around the world. She wanted to do the same, at least at a smaller scale.

Read More | Community-led online radio meets live-streaming across Clubhouse and Twitter Spaces

So on Sunday, July 25, Priyanka kicked off a random room assigned to no Club and invited a few people she knew had tested positive recently. “It started with just four people,” she recalls, “I had a few former college-mates living in Italy, Canada and Australia join. We talked about pop culture, travel plans and our childhoods. One person, a budding musician in Cape Town, played us their mixtape. Another then suggested a sing-along and realised it was a bad idea, given all our voices were terrible (laughs) from being ill.”

In two hours, the group had gained 50-odd more people who were also ill. “Some had colds, not even COVID. But the concept still applied,” she says. “And we also had people present who were in good health but offered support by treating it like a regular room.”

Remarkably, the group had a more powerful impact when nothing was said at all. Maybe there was a cough or two, in the Room of then-70 people, but the silence was a special, comforting balm. “Some silences lasted for two to three hours,” she recalls, “and we welcomed that.”
It is worth noting other similar platforms have started such group sessions. Some groups on Spotify’s Greenroom have opened up spaces where COVID-positive people in isolation can listen to new bands or enjoy ambient noises. Facebook Rooms, has also been a popular space for these pop-up spaces, but they tend to be more organised and kept within known circles. And for many, Twitter Spaces still feels too public.

Anonymity for intimacy

Did Priyanka consider making this a permanent Club with members? She responds, “My friends and I thought long and hard about this, but we wanted this to be a random set of Rooms because people are wary of their Clubhouse data showing that they’re part of a Room for COVID-positive people. Plus, when people see a COVID type of Club on the app, it is assumed medical advice will be given and we do not do that. You don’t need a calendar invite, just a link which would have been shared through WhatsApp or other private message means, rather than social media.”

“I am definitely not the first to do this,” she insists, adding she has since seen — thanks to her evolved Clubhouse algorithm — a few other unlabelled Rooms. And when she dropped in, she realised they were similar to the one she created.

This was hardly a surprise. She says, “The loneliness during this time wreaks havoc on mental health. Sometimes, a stranger on the Internet can actually solve your problem! Clearly, especially during quarantine, media is still social.

**Covishield (Hindustan: 20210802)**

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कोविशील्ड की पहली डोज आज से फिर लगेगी

85 नए संक्रमित जिले, एक की गौत

वायरस पर वार

कटेट डोज टीका लगाना जा पुछा वैक्सीन में

लाख लोग पहली डोज लगा दे नहीं करेंगे सरकार

लेकिन कोविशील्ड की पहली डोज आज से फिर लगेगी। सरकार ने राज्यसभा में वैक्सीन की कमी के

लाखों को सामने रुकने वाले क्षेत्रों से न्यायहीन हो जाएगा। यह नए संक्रमित जिलों में कोविशील्ड की पहली डोज आज से फिर लगेगी।

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Health Care Services ((Hindustan: 20210802)

https://epaper.livehindustan.com/imageview_958339_85939452_4_1_02-08-2021_3_i_1_sf.html
एक्स में चार महीने बाद किडनी प्रत्यारोपण शुरू

नई दिल्ली| हेमवती जेंदन राजौदा

एस में किडनी प्रत्यारोपण के लिए लंबा ईंतजार कर रहे मरीजों के लिए अन्तर्ह्वक है। एस में चार महीने बाद किडनी प्रत्यारोपण की सुविधा फिर से शुरू हो गई है। अस्पताल के नेफ्रोलॉजी विभाग के प्रमुख प्रोफेसर संजय अग्रवाल ने बताया कि उनके विभाग ने किडनी प्रत्यारोपण शुरू कर दिया है।

प्रोफेसर अग्रवाल ने कहा कि अब हर हप्ते कम से कम दो लोगों का प्रत्यारोपण किया जा रहा है। इसी सप्ताह दो लोगों का प्रत्यारोपण किया गया है। कोरोना संक्रमण को देखते हुए अस्पताल में काफी एहतियत बनती जा रही है। किडनी प्रत्यारोपण करने वालों मरीज प्रतिरोधक शक्ति कम करने वाली दवाएं लेते हैं, जिससे इन्हें संक्रमण से गंभीर रूप से बीमार होने का खतरा अधिक होता है। किडनी प्रत्यारोपण के लिए अस्पताल ने खास एसओई अपनाई है। इसके तहत पहले कोरोना जांच की जाती है। प्रत्यारोपण करने वाली टीम को सुरक्षा के सारे उपकरण दिए जाते हैं। डायलिसिस रूम या आईसीयू में किसी को भी बीमा नीटिया किट के अंदर जाने की इजाजत नहीं होती। दरअसल, अस्पताल में संक्रमण की दूसरी लहर के बाद अप्रैल से अंग प्रत्यारोपण बंद पड़े थे।