Air pollution

Ready to impose complete lockdown to control air pollution, AAP govt tells SC (The Tribune: 202101115)


The Delhi government tells the top court that such a step, however, will be meaningful if it is implemented across the NCR areas in neighbouring states

Ready to impose complete lockdown to control air pollution, AAP govt tells SC

Photo for representation purposes. PTI

Ahead of the hearing on air pollution in Delhi-NCR, the AAP government has told the Supreme Court that it is ready to take steps like complete lockdown to control air pollution.

The Delhi government has told the top court that such a step, however, would be meaningful if it is implemented across the NCR areas in neighbouring states.

"GNCTD (Government of National Capital Territory of Delhi) is ready to take steps like complete lockdown to control the local emissions. However, such a step would be meaningful if it is implemented across the NCR areas in neighbouring states. Given Delhi’s compact size, a lockdown would have limited impact on the air quality regime.

"This issue would need to be addressed at the level of airshed involving NCR areas. In view of the above, we are ready to consider this step if the same is mandated for the entire NCR areas by the Government of India or by the Commission for Air Quality Management in National Capital Region and adjoining areas," an affidavit filed by the Delhi government said.
The affidavit was submitted in response to a plea filed by environmental activist Aditya Dubey and law student Aman Banka, who sought directions to provide stubble-removing machines to small and marginal farmers for free.

Terming the rise in air pollution in Delhi-NCR an "emergency" situation, the apex court on Saturday suggested clamping a lockdown in the national capital as it asked the Centre and the Delhi government to take immediate measures to improve the air quality.

The court had said the situation of pollution is so bad that people are wearing masks inside their houses.

It had said there are other reasons for pollution such as vehicular emissions, firecrackers and dust, and singling out stubble burning is not the solution.

The apex court had also expressed concern that schools in the city had opened and children were being exposed to severe pollution conditions. PTI

**Global Covid**

**Global Covid caseload tops 252 million (The Tribune: 202101115)**


In terms of infections, India follows in the second place with 34,414,186 cases and Brazil third with 21,939,196 infections.

The global coronavirus caseload has topped 252.4 million, while the deaths have surged to more than 5.08 million and vaccinations soared to over 7.41 billion, according to the Johns Hopkins University.

In its latest update on Saturday morning, the University's Centre for Systems Science and Engineering (CSSE) revealed that the current global caseload, death toll and the total number of vaccine doses administered stood at 252,445,139, 5,087,398 and 7,412,265,893, respectively.

The US continues to be the worst-hit country with the world's highest number of cases and deaths at 46,976,314 and 761,715, according to the CSSE.

In terms of infections, India follows in the second place with 34,414,186 cases and Brazil third with 21,939,196 infections.

The other worst countries with over 3 million cases are the UK (9,534,544), Russia (8,843,238), Turkey (8,365,929), France (7,362,807), Iran (6,027,269), Argentina (5,302,445), Spain (5,042,803), Colombia (5,024,263), Italy (4,835,435), Germany (4,974,433), Indonesia
(4,249,758), Mexico (3,834,815), Ukraine (3,328,934) and Poland (3,175,769), the CSSE figures showed.

Nations with a death toll of over 100,000 are Brazil (610,491), India (462,690), Mexico (290,374), Russia (248,203), Peru (200,532), Indonesia (143,608), the UK (143,116), Italy (132,618), Colombia (127,680), Iran (127,918), France (119,069) and Argentina (116,209).

IANS

**Covid resurges**

**Covid resurges in Europe(The Tribune: 202101115)**


WITH the number of daily Covid-19 infections soaring to new heights and hospitals under stress to deal with severe cases, Europe has, like in the first wave, become the epicentre of the fourth wave. - File photo

WITH the number of daily Covid-19 infections soaring to new heights and hospitals under stress to deal with severe cases, Europe has, like in the first wave, become the epicentre of the fourth wave. Accounting for over 60 per cent of the new caseload globally, the continent is currently grappling with one million new patients every three days. Leading the countries badly hit is Germany as Thursday marked a record daily high of 50,000 new cases — more than that witnessed at any other time. Propelling the resurgence is the cumulative effect of a number of factors. Vaccine resistance — one-third of the Germans are sceptical — is seen to be the major driving force as a majority of the hospitalised patients comprise the anti-vaxxers who also have underlying comorbidity. Aided by the rising non-adherence to the Covid-appropriate protocol, the waning effect of the inoculation over time and the onset of winter, the novel coronavirus is having a field day as it ravages the region in its more contagious variant form.

Battling the new wave, Germany has stepped up testing and treatment along with making proof of vaccination or recovery from infection mandatory for entry to public places. To stem the tide and contain the rapidly worsening health situation, the Netherlands has imposed a partial lockdown and other countries are also mulling some unpopular Covid curbs.

In short, the virulent virus is very much around and the way around it are the same old regulations as have been emphasised upon by medical experts and governments ever since the pandemic broke out two years ago. The spike in Europe (incidentally, Britain has bucked the trend) holds a potent lesson for the rest of the world: don’t yet lower the guard or become complacent. The dictum applies more so to developing countries like India. If the public health infrastructure in the well-equipped West is feeling the strain, their coping mechanisms will crumble faster. With more and more borders opening for travel, work and studies, ensuring Covid-preventive measures assumes more significance — for our own collective good.
Delhi’s pollution

Delhi’s pollution action plan stuck in fine print and protocol, needs relook (Hindustan Times: 20210115)

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

Delhi’s ordeal in the grip of severe-plus air pollution extended over 30 consecutive hours Saturday morning, when the Supreme Court stepped in, suggesting a two-day lockdown for the choking city.

While a call on lockdown is yet to be taken, curbs such as physically shutting schools (however, online classes will continue) and stopping construction activities that were announced by the Delhi government later on Saturday are already mandated in the Supreme Court-approved Graded Response Action Plan (Grap). But the administrative intervention remained stuck in protocols and the fine print.

Delhi has been experiencing another seasonal chokehold since Diwali, and under the Grap protocol, authorities can declare an air emergency and impose these curbs mandated under the severe-plus band of air quality only when PM2.5 levels cross 300 µg/m3 or PM10 levels cross 500 µg/m3 (which is fivefold above the standard) and stay there for at least 48 hours.

Experts said these protocols need a relook to make pollution control measures pre-emptive and not reactive as they are now. The mechanism for implementation as well as enforcement needs rapid capacity-building, not just in Delhi but also across the National Capital Region, backed equally by strong administrative and political will.

Late intervention

Officials involved in the enforcement of pollution-control measures said they have been on track with the implementation of Grap. However, they agreed that the Commission for Air Quality Management (CAQM), which is tasked with implementing Grap, and other agencies calling the shots could be more sensitive to the gravity of the pollution crisis in the national capital, rather than being stuck in the technicalities of the plan.

“On November 6, the PM 2.5 levels and PM 10 levels slipped into the severe-plus levels. However, the very next day, it briefly came below that threshold. So, technically, the CAQM and CPCB were not liable to introduce the severe-plus measures, even though the pollution
continued to be at hazardous levels and was forecast to get worse. How is PM 2.5 exposure of 299ug/m3 any better than 300ug/m3? But we are stuck in technicalities,” said an official who asked not to be named.

Anumita Roychowdhury, executive director (research and advocacy), Centre for Science and Environment (CSE), said Grap is only a guiding document and the agencies responsible to implement it are allowed to take additional measures to control the rising pollution.

“Since after Diwali, apart from two days, Delhi has been recording severe days. What are the authorities waiting for? Grap is a guiding document and it also explicitly mentions under the severe-plus measures that the administration can call in any steps other than that mentioned in the action plan to control the dangerous pollution levels. The administration needs to use its discretion and not use Grap as an excuse to not do anything. Grap measures should be automatically enforced,” Roychowdhury said.

Forecast-based response

Experts said that under Grap, the agencies need to respond to forecasted levels of air pollution as opposed to observing what happens over the course of two days and then taking a call.

Delhi currently has two forecasting systems, the Decision Support System developed by Indian Institute of Tropical Meteorology and Union ministry of earth science’ Early Warning System, both of which provide air quality forecasts, which could be used to make advance decisions.

“There are multiple sources of air pollution forecasts, including from the Indian Institute of Tropical Meteorology, available now. There is a clear case for Grap to rely on these forecasts to proactively initiate short-term emergency responses, instead of the current reactive approach,” said Santosh Harish, fellow at Centre for Policy Research.

Beijing’s colour-coded emergency response system, for instance, is an air quality index (AQI) forecast-based action plan rather than a reactive action plan such as Delhi’s.

The “particulate matter approach” taken by Grap itself needs a relook, said environmental lawyer Ritwick Dutta. An an analysis of Grap by the Legal Initiative for Forest and Environment (LIFE), an outfit founded by Dutta, states that Grap does not consider all air pollutants, but only particulate matters such as PM2.5 and PM10. Even if the level of pollutants such as SO2 or NOX increases – which are a part of AQI index monitoring -- Grap does not come into effect.

“Even if Grap is implemented in full, it only looks at levels of PM 2.5 and PM 10, but does not look into quality of air as such. So you can have very high levels of other pollutants (in the air) and still have very good grap implementation. Therefore, by nature, Grap is faulty,” Dutta said.

Weak, haphazard enforcement
The post-Diwali smog over northern India is a well-established phenomenon. Yet, each season, pollution mitigation is conducted haphazardly even as Grap marks out each step of enforcement and responsibilities of the agencies involved.

But compliance cannot be ensured without capacity building and administrative will. A case in point is the recent directions to municipal agencies to increase the parking fee, and to transport agencies to implement differential rates in public transport to encourage off-peak travel. Both directions have not been enforced.

“Grap says deploy extra buses when pollution levels peak. But where are the extra buses? Where are the extra drivers? It is not like a fire service where we have vehicles waiting on standby. Similarly, parking rates have to go up four times when pollution peaks to very poor levels. But where is the mechanism to charge more? Traffic congestion has to be reduced, but are instructions given to Delhi Police that they are not supposed to put barricades during peak pollution times?” asked Dutta.

Need year-round approach

Delhi’s baseline pollution -- from vehicle emissions, construction activities, waste burning -- is high all through the year. During the non-winter months, Delhi sees some relatively cleaner days due to the favourable weather conditions, although freak build-ups such as the dust storm in summer lead to pollution spikes. After monsoon withdrawal, when the wind patterns change and the temperature starts to dip, stubble burning in Punjab and Haryana, coupled with local emissions, lead to a massive pollution spike. On Diwali, blatant violation of government’s ban on burning of firecrackers pushed air quality into severe zone a day after the festival.

Recognising this, Grap was designed to be a year-long exercise to check polluting activities even when the air is moderately clean. For instance, for ‘moderate to poor’ days, Grap directs municipal and road-owning agencies to stop garbage burning, impose heavy fines for non-compliance, conduct mechanised sweeping on busy streets, sprinkle water on unpaved roads every two days and stringently enforce rules for dust control at construction sites.

Unfortunately, much of this exercise has been reduced to a calendar event to be observed when winter pollution peaks. Making efforts to control particulate matter during the onset of winter serves no effective purpose, said Dutta.

Santosh Harish said, “Ultimately, emergency responses are only a last-ditch effort to reduce exposures to a small extent. Several of these wintertime local actions on waste burning and construction dust need to be implemented year-round to be well understood and complied with, instead of being episodic actions.”

Time to upgrade Grap

Notified in 2017, Grap was to end the problem of multiplicity of agencies in Delhi and NCR towns so that they could be made answerable to an overarching body— then, the Environment
Pollution (Prevention and Control) Authority that was assigned the task of implementing the Grap and submit action-taken reports to the Supreme Court. Through a Union government ordinance last year, the Epca was dissolved and replaced by the 20-member Commission for Air Quality Management in Delhi-NCR and adjoining areas, which is now in charge of Grap.

“What we knew back then about Delhi’s pollution sources is not what we know now. After 2017, we had a detailed source apportionment study by TERI, which gave us clarity on local and external sources. So, we cannot brace this document blindly and say that we are only going to enforce what is written in black and white because the scenario has changed and we must also revise the document accordingly,” said a senior government official who was formerly deputed with the Delhi Pollution Control Committee.

Dutta stresses the need to take pollution action plans beyond cities. “We blame stubble burning in Punjab and Haryana for pollution peaks in Delhi. The reason for that is that the focus is on cities, not states. Today, only 122 cities have been counted as non-attainment cities and their pollution action plans are limited to them. The National Clean Air Programme very clearly requires each state to prepare its own state action plan by 2020. Not a single state has done that,” he said.

“The non-attainment cities have been identified based on a study of 370 cities, not 4,000 cities that we have in India. According to us, the data should be of 4,000 cities, plus rural areas. Only then you will come to know the extent of pollution levels and what needs to be done,” he added.

**World Diabetes Day**

**World Diabetes Day: Importance of controlling blood pressure in diabetics** *(The Indian Express: 202101115)*


For diabetics, a lower BP may provide greater protection against stroke, making it imperative to regularly monitor blood pressure along with checking blood sugar levels and making lifestyle changes, says a doctor

diabetes, living with diabetes, diabetes and blood pressure, high blood pressure and diabetes, diabetics, how to manage high blood pressure in diabetics, world diabetes day, indian express news

Diabetes causes damage to the small blood vessels in the body and stiffens their walls leading to high blood pressure. (Photo: Getty/Thinkstock)

Around the world, diabetes has become a common health issue. Among the complications of diabetes, the risk of developing high blood pressure is twice as likely. In fact, diabetes and high
blood pressure often go together, and are referred to as the ‘Vicious Twins’, says Dr Sujoy Ghosh, professor, department of endocrinology, Institute of Post Graduate Medical Education & Research, Kolkata.

The doctor explains that in type-2 diabetes, there is insulin resistance that causes sugar to build up in the blood. This stimulates the production of more insulin which, in turn, causes the body to retain salt and fluids, thereby increasing the risk of developing high blood pressure.

ALSO READ | Expert suggests ways to manage diabetes among the younger generation

“Another factor is that over time, diabetes causes damage to the small blood vessels in the body and stiffens their walls leading to high blood pressure. When both high blood pressure and type-2 diabetes are present, there is a higher risk of a heart attack or stroke as also other complications such as kidney disease and retinopathy. Hence, it is important to control the high blood pressure as well as the blood sugar,” Dr Ghosh warns.

He adds that for diabetics, a lower BP may provide greater protection against stroke, making it imperative to regularly monitor blood pressure along with checking blood sugar levels and making lifestyle changes. “While it would be advisable to get blood pressure checked at a doctor’s clinic, it may not be practically feasible on a regular basis. Just as one can keep track of one’s blood sugar at home using compact blood glucose meters, there are digital BP monitors available that allow one to easily measure blood pressure at home.”

ALSO READ | Diabetes Awareness Month: What is hypoglycemia and how can it be managed?

The doctor says there are some practical steps to take to ensure the BP is in check and that the readings come out accurate:

diabetes, living with diabetes, diabetes and blood pressure, high blood pressure and diabetes, diabetics, how to manage high blood pressure in diabetics, world diabetes day, indian express news

Use a BP cuff of the correct size and position it correctly on the bare arm above the elbow. (Photo: Getty/Thinkstock)

– Measuring blood pressure at the same time under the same conditions every day.
– Sitting calmly for five minutes prior to measuring.
– Not smoking, eating, exercising or drinking tea, coffee or any caffeinated drinks at least half an hour prior to taking the reading.
– Ensuring the bladder is empty, since a full bladder can exaggerate the readings.
– Using a BP cuff of the correct size and positioning it correctly on the bare arm above the elbow and securing it tightly.
– Sitting up posture with legs uncrossed and feet flat on the floor with arms supported at the level of the heart. And, no movement during the measurement.
– One should also take three readings with the average of the last two measurements considered as the blood pressure reading.

“These simple measures can go a long way in ensuring accurate BP measurement at home. Since the pandemic has led to a rise in telemedicine, home measurement of BP is important for physicians to effectively treat high blood pressure. Together, with regular blood sugar monitoring, this will ensure correct treatment for both diabetes and high blood pressure,” the doctor concludes.

**Yoga and Physical Fitness (The Asian Age: 20210115)**

Ayush ministry organises fusion yoga show on IITF inaugural day

AGE CORRESPONDENT
NEW DELHI, NOV. 14

Live performance of Fusion Yoga by practitioners from Morarji Desai National Institute of Yoga, free medical consultation by experts of various Ayush streams and display of various food items that promote nutrition and good health were the major attractions at the pavilion of the Ministry of Ayush on the first day of the India International Trade Fair at Pragati Maidan on Sunday.

The activities at the pavilion revolved around the theme of ‘Holistic health, Nutritious Diet’, which the Ayush Ministry propagates through various Indian traditional medicine systems. Various institutes and research bodies of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy streams have set up their counters at the Ministry’s pavilion in hall number 10 of Pragati Maidan to make people aware of how they can maintain good health through nutritious foods and good dietary habits available under the AyUSH system.

The visitors were given medicinal plants with the focus on Giloy, a herb with multiple health benefits. The visitors were taught how they can refresh and re-energise themselves at their workplaces in just five minutes by practising the Yoga protocol mentioned in the Y-Break mobile application.

A new set of ready-to-cook nutraceuticals-based items that provide necessary dietary support to the patients of diabetes, obesity, chronic pains, and anemia among others have also been displayed at the Ministry of Ayush’s pavilion.

Packed in powder form, these recipes have been developed by the research scholars of All India Institute of Ayurveda (AIIA) under Mahabhaishajya, a proposed food start up of the institute. These recipes include candy, an appetizer, flour and a laddoo among others. The packets have the method of preparation and the health benefits mentioned on them.

The visitors were also given Murabba-e Amla, Harira, Unani Kahwa and Halwa Gheekar to taste at the counter of Unani stream, Bhringraj Chocolate at Siddha counter apart from Roasted gram and black sesame laddoos and nutritious cookies.
Covid-19 vaccine

IMA pushes for Covid-19 vaccine for all diabetes patients (The Hindu: 202101115)


Greater Chennai Corporation health workers test diabetes level before administering COVID-19 vaccine to beneficiaries | Photo Credit: VELANKANNI RAJ B

Association launches campaign for early detection, mitigation of diabetes complications

The Indian Medical Association (IMA) on Sunday demanded COVID-19 vaccination for all diabetes patients, including a booster dose, if needed. The association launched a campaign for early detection and mitigation of diabetes complications.

Also Read: Diabetics want physician’s assurance on taking vaccine: study

The campaign, launched on the occasion of World Diabetes Day, will run for 10 days and aims to reach one billion people, the IMA said in a release. As part of the campaign, the IMA has joined hands with the Association of Physicians of India and other organisations.

The IMA says that millions of people with diabetes do not have access to the kind of care they need and that patients often require continuous care and support to avoid complications.

To make insulin accessible, the IMA’s State and local branches will set up special centres, the statement said.

The World Diabetes Day logo — a blue circle — will be depicted by blue light and blue balloons during the campaign at all IMA branches.

Special sessions

Also, special sessions will be organised during the week at ‘blue corners’ to make people aware of diabetes and complications caused by it, the statement said.

Also Read: Study sheds light on intensity of COVID-19 in type-2 diabetics

“In India, more than 77 million adults are living with diabetes and researchers predict that this will increase to 134 million by 2045. World Diabetes Day became an official United Nations Day in 2006 with the passage of the United Nations Resolution 61/225. It is held every year on November 14 to mark the birthday of Sir Frederick Banting, who co-discovered insulin along
with Charles Best in 1922. The theme for World Diabetes Day 2021-23 is access to diabetes care,” said the association.

City lifestyle

According to a 2021 review, people who live in cities and metropolitan areas in India are more likely to develop diabetes than ever before. “This is due in part to a city lifestyle that is marked by sedentary, stress, junk food, smoking, and liquor consumption. All these factors lead to an increase in a person’s body mass index (BMI) — a major risk factor in causing diabetes,” the statement said.

Overall, women have a higher risk of developing diabetes than men, but as both groups get older, the risk decreases, the IMA said.

Although diabetes figures are high, researchers estimate that 57% of cases remain undiagnosed. This is particularly concerning, as the risk of serious complications increases when people do not take medication to control their blood sugar, it added.

The IMA campaign includes holding programmes in both urban and rural areas to promote detection of hidden and pre-diabetes cases.

Diabetic foot

It also spoke about the diabetic foot, terming it a dreaded complication, and saying that 80% of amputations of leg in India are due to this condition.

The association said such complications are preventable if proper care is given. To improve dietary habits of the patients, the IMA has joined hands with the Food Safety Department of the Government of India and propagated an ‘Eat Right campaign’. Under it, the IMA is organising a one-day training programme to teach the trainers in each State with the help of FSSAI, so that they can coach people on diet in their respective States.

**Post-COVID carelessness**

**Post-COVID carelessness can harm the heart: cardiologists (The Hindu: 202101115)**


Moderation and continuing prescribed medication and contacting your doctor in case of an emergency are important, according to the doctors. File | Photo Credit: Pichumani K
‘Viral diseases are known to act as a trigger for heart attacks in pre-disposed persons’

While data on heart attacks following COVID is absent in India, cardiologists who have taken care of post-COVID cardiac issues in patients this past year suggest that people should avoid very severe exercise or unaccustomed extreme physical exertion for a period of three-four months after recovery from COVID. Moderation and continuing prescribed medication and contacting your doctor in case of an emergency are important, according to the doctors, who add that lifestyle changes protect persons against heart attacks in the long run.

“COVID is a new disease and we are still learning,” said G. Karthikeyan Professor of Cardiology, All India Institute of Medical Sciences, Delhi. He said that COVID did cause fewer admissions in hospital emergencies and discontinuing of medication also occurred among the patients.

“While there isn’t enough data to establish a direct link with post COVID and heart attacks, viral diseases are known to act as a trigger for heart attacks in pre-disposed persons,” said Dr. Karthikeyan. He added that continuing medicines, giving adequate time for recovery and consulting the doctor in case of emergency are vital safeguards.

Prof. (Dr.) Ashok Seth, Chairman Fortis Escorts Heart Institute and Chairman Fortis Healthcare Medical Council, explained that COVID causes heart problems irrespective of the severity of the COVID infection.

He said that Coronavirus causes inflammation in the arteries supplying blood to heart muscle along with an increase in blood clotting leading to sudden blocking of these arteries and heart attack. “Furthermore, inflammation and infection of heart muscle called myocarditis leads to weakening of heart pumping and heart failure. The virus can also affect the conduction system of the heart making the heart beat very fast or very slow, all these conditions can continue for many weeks after recovery from COVID and rarely can be life threatening,” he said.

Dr. Seth added that patients who have recovered from COVID, especially those who had severe COVID should not ignore any symptoms of breathlessness, chest pain or palpitations during the recovery period and should see their doctor at least once.

Stating that COVID infection does increase the blood clotting tendency which increases the risk of all diseases such as heart attack, stroke, deep vein thrombosis etc, Dr. Rakesh Rai Sapra, director and senior consultant of Cardiology, QRG Super Speciality Hospital Faridabad said that this risk is not life-long. “This risk is there primarily during COVID infection and for some period (1-2 months) after the infection. That is why blood thinners are given during that period to reduce the risk,” he added.

Speaking about an alleged recent spurt in young deaths due to heart attack, Dr. Sapra said that the increased predisposition of India for the development of heart disease is partly due to genetic predisposition and largely due to bad lifestyle which includes increased preference of junk food, sedentary lifestyle, increasing smoking habit and increasing mental stress.
The way out he suggests is aggressive modification of lifestyle including choosing the right type of food (increasing fruit and vegetables intake and reducing fatty food intake, especially the fried food and bakery products), doing regular (30-40 minutes daily) exercises, quitting smoking and learning to manage mental stress by yoga and meditation.

Meanwhile, explaining why COVID has no connection with young age and stating that it is mainly an inflammatory state, Dr. Ashish Agarwal, director-Dept. of Cardiology, Aakash Healthcare, Dwarka, said that COVID isn’t the reason for creating fresh blockages. “COVID makes the underlying blockages of the people unstable and it further leads to heart attack. COVID itself increases the blood flow in the body and that increases the chances of clot formation. So, if the clot is in an artery, it causes a heart attack. And, if the clot is in the artery of the lung then there is pulmonary embolism. That’s why most of the COVID patients have been given blood thinner injection on a regular basis,” he explained.

Stating that the purpose of vaccination is either to combat COVID infection or reduce the severity of the infection, Dr. Agarwal said that the most common reason for sudden death is cardiac arrest. “There could be many reasons behind it and the reasons also vary depending upon the age. Most common reason of cardiac arrest in the 35-40 age group is heart attack only. Heart attack in younger patients has always been there in India but the issue got hyped because of the death of few celebrities. We Indians have developed this coronary heart disease a decade earlier. It’s because of the genetic disposition, and immunity has got no connection with heart attack. Immunity is needed to combat infection,” he said.

Doctors also add that they are witnessing a fear in young patients about the sudden death due to heart attacks. “But, at the same time there is also an inertia of not taking medicines. Most of the young patients, who died, either they smoked heavily, had uncontrolled sugar, were hypertensive and had a family history of cardiac issues as well. We tell patients about their underlying conditions but they aren’t ready to take medicines. People feel until and unless they don’t have severe health conditions they won’t take. If you have a history of cardiac arrest, have a healthy lifestyle,” he said.

**TB patients**

**TB patients got unhindered support despite pandemic constraints: MoS Health (The Hindu: 202101115)**


MoS for Health and Family Welfare Dr. Bharati Pravin Pawar. File | Photo Credit: KAMAL NARANG
Efforts made by NTEP led to significant improvements in time-to-diagnosis, treatment adherence and outcomes, Bharati Pravin Pawar said.

Despite the COVID-19 pandemic, India has managed to scale up access to free rapid molecular diagnostics and treatment for tuberculosis while financial and nutritional support to affected patients continued without any hindrance, Union Minister of State for Health Bharati Pravin Pawar said on Tuesday.

Efforts made by the National Tuberculosis Elimination Programme (NTEP) led to significant improvements in time-to-diagnosis, treatment adherence and outcomes, Ms. Pawar said as she chaired the brainstorming session on “Strategies for Ending TB by 2025”, a Health Ministry statement said.

Reiterating Prime Minister Narendra Modi’s commitment to eliminate TB in India by 2025, five years ahead of the Sustainable Development Goals (SDGs) target of 2030, Ms. Pawar said, “We have a mere 37 months before the deadline to end TB in the country. We need to shift gears and come up with innovative solutions to make up for the setbacks due to COVID-19 and move beyond.” As proper diagnosis and prompt treatment are key to TB elimination, the NTEP is working towards accelerating universal TB care coverage and preventive services in the country.

TB preventive treatment has been prioritised under the pillar of “Prevent” in the National Strategic Plan to End TB, Ms. Pawar said

Scaling up TB preventive treatment and at the same time decentralising it to bring services closer to patients, are of utmost importance to break the chain of transmission and breakdown of those with TB infection into full-blown TB disease, she said.

Highlighting the Union government’s efforts for TB eradication, she added, “TB has now been made an essential part of Comprehensive Primary Health Care and is integrated with Ayushman Bharat scheme. Our aim is to detect cases early and prevent the emergence of new cases of TB by expanding TB care through engagement of various stakeholders, including the community. The nationwide ‘TB Mukt Bharat Abhiyan’ has been launched in this regard.” Mentioning the introduction of newer anti-TB drugs, newer regimens and programmes, Ms. Pawar appreciated the research and development efforts to combat TB.

The session focussed on five pillars – improving case detection, improving treatment adherence, evolving ways to converge with other social welfare programmes, utilising and refining private sector engagement and finally integration of NTEP within our health system for accelerating TB eradication in the country, the statement said.

**Lung function**

*Lung function hit by stubble burning: study (The Hindu: 202101115)*
Over 3,000 persons tracked in two-phase study across six villages in Punjab

Pollution from stubble burning significantly reduced lung function and was particularly harmful to women in rural Punjab, says one of the largest studies of its kind in India, correlating the effect of air pollution on health.

The study was conducted in six villages of Patiala, Punjab and spanned two phases: The first was in October 2018 and again the following summer from March to April 2019 and the second phase was undertaken in the same villages during late Oct-Nov, 2018. The latter is the period when crop burning peaks and the two timeframes were considered to measure the change in air quality during both periods. Close to 3,600 participants, from 10-60 years of age were included in the study.

While the links between particulate matter pollution and respiratory health are widely documented, there have been limited studies in India that have clearly linked the impact of poor air on lung health.

High PM2.5 levels

It emerged from the study that the concentrations of PM2.5, the category of unburnt carbon particles considered most harmful to respiratory health, was found to increase more than twice between the two phases, from 100 g/m3 to 250 g/m3. Incidentally these are around 10-15 times the WHO prescribed air quality standards though the permissible standards by India’s Central Pollution Control Board (CPCB) are higher.

More symptoms

During the crop residue burning period, a two to three-fold increase was noted in most of the respiratory symptoms including wheezing, breathlessness on exertion, cough in morning, cough at night, skin rashes, runny nose or itchiness of eyes etc. across all age groups (10-60 years). The highest number of respiratory complaints were reported by the elderly population (>40-60) and the lowest in the younger age group (>10-18) during crop burning period, the study’s authors note.

There was decline in lung function with increase in PM2.5 concentration across all age groups even after controlling for several other exposure variables, such the influence of cooking fuel, ventilation, distance from road etc. The authors reported a 10-14% decline in lung function in men and nearly 15-18% decline in women across all age categories.
The study, authored by researchers at The Energy Resources Institute (TERI), Delhi has contributions from experts from All India Institute of Medical Sciences (AIIMS), Delhi, and the Punjab Agricultural University. The findings, which have not been peer reviewed as yet, appear on the website of the CPCB, which has supported the study.

Covishild
कोविशील्ड लगा चुके तो बूटर खुराक जरूरी नहीं (Hindustan: 202101115)

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वयस्कों को जायडस टीका
देश में जायडस कैडिला का टीका जायकोव-डी अभी सिर्फ वयस्कों को लगेगा। सरकार इसे टीकाकरण अभियान में शामिल करने की मांग भी दे चुकी है। व्योरा

नई दिल्ली | एजेंसी
कोरोना टीका कोवीशील्ड की पहली और दूसरी खुराक के बीच जिन्होंने 12 हफ्तों का अंतर रखा था, उनमें बेहतर इम्यून सिस्टम तैयार हुआ है। सीरो सव के मुताबिक, इससे इन लोगों को तुरंत बूटर डोज की जस्ता नहीं है।

विशेषज्ञों ने डोज के बीच के अंतर कम करने की संभावना से इनकार किया है। सूचना के मुताबिक, रिपोर्ट को विचार के लिए स्वास्थ्य मंत्रालय को सौंपा जाएगा। बता दे कि इस टीके के दोनों डोज के बीच के अंतर को दो बार बदल चुकी है। 22 मार्च को 4-6 हफ्ते से बढ़ाकर 6-8 हफ्ते किया। फिर 13 मई को 12-16 हफ्ते कर दिया।