Public health

Urgent need to scale up public health, social measures to curtail spread of omicron, says WHO (The Tribune: 202101220)

Countries can and must prevent the spread of omicron with proven health and social measures, Regional Director, WHO South-East Asia Region, Poonam Khetrapal Singh, says.

With seven countries in the South-East Asia Region confirming cases of new Covid variant omicron, the World Health Organisation on Saturday stressed on urgent scale up of public health and social measures to curtail its further spread.

Countries can and must prevent the spread of omicron with proven health and social measures, Regional Director, WHO South-East Asia Region, Poonam Khetrapal Singh, said.

"Our focus must continue to protect the least protected and those at high risk,” she said in a statement.

The overall threat posed by omicron largely depends on three key questions – its transmissibility; how well the vaccines and prior SARS-CoV-2 infection protect against it, and how virulent the variant is as compared to other variants.

"From what we know so far, omicron appears to spread faster than the delta variant which has been attributed to the surge in cases across the world in the last several months," Singh said.

Emerging data from South Africa suggest increased risk of re-infection with omicron, she said, adding that there is still limited data on the clinical severity associated with omicron.

Further information is needed to fully understand the clinical picture of those infected with omicron, she said.

“We expect more information in the coming weeks. Omicron should not be dismissed as mild,” Singh said, adding that even if it does cause less severe disease, the sheer number of cases could once again overwhelm health systems.
Hence, health care capacity including ICU beds, oxygen availability, adequate health care staff and surge capacity need to be reviewed and strengthened at all levels, she stressed.

“We must continue to do it all. Protect yourself and protect each other. Get vaccinated, wear a mask, keep a distance, open windows, clean your hands and cough and sneeze safely. Continue to take all precautions even after taking vaccine doses,” Singh said.

On the impact of the new variant on vaccines, she said preliminary data suggest that vaccines may likely have reduced effectiveness against infections by the omicron variant.

However, studies are under way to better understand the extent to which omicron may evade vaccine and/or infection derived immunity and the extent to which current vaccines continue to protect against severe disease and death associated with omicron, she said.

Globally, the pandemic is driven by the delta variant, against which vaccines continue to provide a robust level of protection from severe disease, hospitalisation, and death. Hence, efforts to scale up vaccination coverage must continue, the WHO official said.

“Vaccines are an important tool in our fight against the pandemic, but, as we know, vaccines alone will not get any country out of this pandemic. We must scale up vaccination and at the same time implement public health and social measures, which have proven critical to limiting transmission of Covid and reducing deaths,” Singh said. PTI

**Child Marriage Act,**

**Raising girls' age to marry (The Tribune: 202101220)**


A push directed to improving health of mother, child

Raising the legal age of marriage for women is a step forward, but it will not suffice to address the multi-pronged and complex realities still breeding on the ground. Photo for representation only.

Bringing the girls on a par with the boys, the Union Cabinet’s ‘I do’ to the proposal of increasing the minimum lawful age of marriage for women from 18 years to 21 years is pregnant with possibilities that can fulfil many other vows not kept by the governments over the years. The foremost door opened by suitably amending the Prohibition of Child Marriage Act, Special Marriage Act and the Hindu Marriage Act is one of increasing the chances of girls going on to finish their higher studies. And education — of both men and women — is the bedrock of progressive social reforms. It is the most potent tool for ridding society of its scourges as it empowers women with an awareness and ability to stand up against suppressive practices, abuse and patriarchy perpetuated through the ages.
At 18, a girl generally just about clears her Class XII exams and is barely equipped with skillsets that can bring in meaningful employment and financial independence. The three more years thus gained would enable her to acquire better academic or vocational expertise and broaden her mental horizon to encompass the harsh practicalities of life. Consequently, with a career goal in mind, she is more likely to make a better informed decision on the all-important and life-altering matter of marriage. A bride entering the marital home armed with a professional skillset and empowered with knowledge has a direct bearing on child-bearing and long-term family health and, in turn, of society. It fosters a financial and health consciousness that is much needed to achieve the goals of reducing maternal and child mortality rates, as also combating issues of malnutrition and other pesky health indices.

However, crucial to attaining these ambitious objectives is the strengthening of the ecosystem of schools, colleges, security and transportation that engenders education at the last mile. A universal legal framework must be considered to cover the varying practices among different religious groups over marriage. Raising the legal age of marriage for women is a step forward, but it will not suffice to address the multi-pronged and complex realities still breeding on the ground.

**Vaccinations**

**No surge in cases, but a lag in full vaccinations (The Hindustan Times: 202101220)**

By Abhishek Jha

Over 150 cases of the Omicron variant of Sars-CoV-2 have so far been detected in India. However, unlike the surge in cases seen in South Africa after the detection of the more transmissible variant, there is no surge in India currently. Except, India’s population is about 20 times that of South Africa. Is it the case that there are local outbreaks happening in India? More importantly, how protected is India should an outbreak happen? Apart from transmissibility, the Omicron virus is also proving to be more resistant to vaccines than its predecessors. This means at least two doses of a Covid-19 vaccine, if not an additional booster, might turn out to be a necessary tool in keeping the share of severe cases low and reducing hospitalisations if there is an outbreak. Here are four charts that explain how India is doing on these fronts.
Currently, there is no surge in cases and positivity rates even at the district level.

District-wise COVID-19 cases have increased since the lockdown.

<table>
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<tr>
<th>District</th>
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<td>A</td>
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<tr>
<td>D</td>
<td>90</td>
<td>120</td>
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Ratio of new cases to past cases

- District A: 1.5
- District B: 1.2
- District C: 1.4
- District D: 1.3

Severe cases in districts include:

- District A: 50
- District B: 40
- District C: 60
- District D: 55

A chart showing the share of people covered with at least one dose of COVID-19 vaccine.

- Adults: 2020-2025
- Children: 2025-2030

Breakdown of people vaccinated:

- District A: 70%
- District B: 80%
- District C: 90%
- District D: 85%

No vaccines have been distributed so far.

[Map showing vaccination coverage by district]
Delhi recorded over 100 fresh cases of the coronavirus disease (Covid-19) for the first time in nearly six months on Sunday, as state authorities added 107 infections to the state’s tally, with experts urging residents to exercise caution and up their guard amid concerns over the Omicron variant.
The Capital recorded one Covid-19 death in Sunday’s bulletin, the first fatality in 11 days and the third so far this month. The test positivity rate also climbed to 0.17%, the highest in 180 days.

Meanwhile, a Delhi Disaster Management Authority (DDMA) meeting is scheduled to be held on Monday where the city’s infection situation will be reviewed, especially in light of the 22 Omicron variant cases that have been recorded in the Capital so far.

The city last reported at least 100 cases on June 29, showed state health documents, when Delhi logged 101 Covid-19 infections. However, the city last added more cases on June 25, when the health department added 115 infections. The test positivity rate last exceeded Sunday’s figure on June 22, when the number touched 0.20%.

Between mid-May and June, the city’s fourth wave of infections was subsiding after a record spiral of cases and deaths.

In the nearly six months since then, the city’s Covid-19 daily caseload has been in the double-digits and at record lows – largely due to widespread antibody prevalence after the fourth wave of infections as well as a strong rate of vaccinations.

To be sure, Delhi’s seven-day average of cases is still on the lower end of the spectrum, with the city adding an average of 68 fresh cases every day over the past week, according to numbers from the state government’s records.

The vaccine coverage in the city too has been widespread, with most of the city’s adults covered with the first dose, of whom over 10 million have been completely inoculated, showed data from the central CoWin dashboard.

Experts, however, said residents should be vigilant to prevent a resurgence of the infection.

Dr SP Byotra, senior consultant at Sir Ganga Ram Hospital and chairman of its department of medicine, said: “People should be vigilant about distancing and masking in public places, otherwise the city may once again see a rise in the number of cases around February.”

However, Dr Byotra said that since a large number of the city’s residents are now vaccinated, unlike during the second wave, the symptoms of infections may be milder.

“Irrespective of whether the cases belong to Delta or Omicron variants, we should ensure that discipline in terms of Covid-appropriate behaviour is observed and no laxity is allowed,” he added.

The Delhi government’s spokesperson did not comment on the rise in Covid-19 cases.

Meanwhile, the DDMA meeting on Monday will be held through video conferencing and Lieutenant Governor Anil Baijal will preside over the meeting.

Chief minister Arvind Kejriwal is the DDMA vice-chair, and will also be present at the meeting.

The authority will discuss the increasing number of Omicron cases in Delhi and the current Covid-19 situation will be reviewed in the meeting, as per the notification.

State health minister Satyendar Jain, NITI Aayog member VK Paul and Delhi chief secretary Vijay Dev and other senior officers of the state’s health department will be present in the meeting.
K S James, U S Mishra write: It helps understand the trends but is not a substitute for a total population enumeration.

The use of sex ratio trends to make a case for the progress India has made on gender justice and women’s empowerment is not entirely wrong.

The findings of the recently released NFHS-5 on population and health indicators have received extensive attention. The finding that there are 1,020 women for 1,000 men, an improvement over the last round of survey, has led to a wide-ranging conversation. One of the reasons for such extraordinary attention is the absence of Census 2021 to gauge sex ratio trends. The finding, of course, has implications for a range of other issues, especially those related to gender equality — they carry pointers for those wishing to gauge the success of government programmes that aim to remove gender-based discrimination. Some have also questioned the data. It is important to state that the correct interpretation of data has been lacking in both these cases.

At the outset, it is important to remember that an indicator like the sex ratio of a surveyed population can never be a replacement for the population sex ratio obtained in a complete enumeration — the Census, for instance — that includes population beyond the household. Household surveys will not capture the population living in institutions — these have more men than women. The household-based approach of the NFHS might leave out male migrants — though there are possibilities of them getting included in their place of destination if they live in a household. The sex ratio, characteristics, and composition of a surveyed population are often compared to the Census figures to justify the representational aspects of the survey. But, these sets of figures are by no means comparable.

At the same time, trends in the household sex ratio can be compared over a period. Given its huge sample size, perhaps the world’s largest household survey, (over 6,36,699 households), the NFHS has better reliability than any other national survey. The NFHS-5 results indicate an improvement over the last four years from 991 women in 2015-16 to 1,020 women in 2019-21 for every 1,000 men. This is also indicative of the fact that the life expectancy of women has improved considerably over the period in India. According to the latest data, for 2014-18, women live 2.5 years more than men. Nationally representative household surveys like the second round of the Indian Human Development Survey (IHDS) shows a similar trend — 1,004 women for 1,000 men in 2011-12, an improvement over the first round. IHDS sample size, though, is 7 per cent of that of the NFHS.
Thus, the use of sex ratio trends to make a case for the progress India has made on gender justice and women’s empowerment is not entirely wrong. While this ratio may not be a sole indicator of gender balance, there can be no denying the fact that the gender divide in many areas has narrowed. That women’s share in population is getting balanced also owes to the reduced sex differential in early age mortality, and progress in several women-centric indicators captured in the survey. Importantly, reading the sex ratio of a population scientifically goes beyond an aggregate analysis but also involves understanding age-specific patterns that convey gender imbalance at the ground level.

Considering the overwhelming anxiety over the reported sex ratio of a surveyed population, it is pertinent to clarify the limitation of generalisations, and caution against drawing firm conclusions while also showing how these surveys help understand certain trends. First, a population sex ratio based on a surveyed population may not always be a replacement for the sex ratio obtained in a complete enumeration. Second, the progress in sex ratio as evidenced by the comparison between the last and the latest round of NFHS clearly conveys the improving sex ratio situation in the country. The design of the NFHS, explicated in all final reports that are in the public domain, clearly indicates its representativeness. There is no reason for any misgiving on the ability of NFHS to provide household representativeness. Third, the systematic progress in sex ratio is a welcome trend despite the limitation of generalisation. While a balanced sex ratio is ideal, this may not ipso facto imply the wide range of conclusions that have become part of the discourse on the reported sex ratio. In fact, a favourable sex ratio was reported for a few of the states in NFHS 4 as well which was also not in keeping with the gender-based developmental indicators. Finally, though it is perhaps premature to confirm a balanced sex ratio in India, the NFHS results do indicate progress towards that end.

**Omicron variant**

**Omicron variant possibly less severe, says study (The Tribune: 202101220)**


A new study has shown possible less severity of the Omicron variant even though researchers have cautioned that more data was needed to unravel the potentialities of the variant that has spread to over 91 nations.

Count crosses 150
Omicron count rose to 151 after M’rashtra reported six new cases, while an NRI and a boy, who arrived in Gujarat from the UK, tested positive.

It more upper respiratory tract infection than pneumonia.

He said the researchers tested how well antibodies from vaccinated individuals neutralised Omicron versus Delta. “We found Omicron was poorly neutralised after two doses of mRNA or ad vectored vaccine compared to Delta, but that the third dose of (mRNA) rescued this at an early time point. In summary, this work suggests that Omicron does appear to have become more immune evasive, but that properties associated with disease progression may be attenuated to some extent. The significant growth of Omicron nevertheless represents a major public health challenge,” Gupta said, signalling possible low severity of Omicron.

Anurag Agarwal, Director, CSIR-Institute of Genomics and Integrative Biology, said Omicron may need more receptor density to infect and cause less cell-cell infusion.

COVID-19 pandemic

Pfizer says pandemic could extend to 2024, vaccine data for younger children delayed (The Tribune: 202101220)


Company’s forecast came after the emergence of Omicron variant, which has more than 50 mutations compared with the original version of virus

Pfizer says pandemic could extend to 2024, vaccine data for younger children delayed

Photo for representational purpose only. AP/PTI file

Pfizer Inc on Friday forecast that the COVID-19 pandemic would not be behind us until 2024 and said a lower-dose version of its vaccine for 2- to 4-year-olds generated a weaker immune response than expected, potentially delaying authorization.

Pfizer Chief Scientific Officer Mikael Dolsten said in a presentation to investors that the company expects some regions to continue to see pandemic levels of COVID-19 cases over the next year or two. Other countries will transition to “endemic” with low, manageable caseloads during that same time period.

By 2024, the disease should be endemic around the globe, the company projected.
“When and how exactly this happens will depend on evolution of the disease, how effectively society deploys vaccines and treatments, and equitable distribution to places where vaccination rates are low,” Dolsten said. “The emergence of new variants could also impact how the pandemic continues to play out.”

Pfizer developed its COVID-19 vaccine with Germany’s BioNTech SE, and currently expects it to generate revenue of $31 billion next year. It plans to make 4 billion shots next year.

The drugmaker also has an experimental antiviral pill called Paxlovid which reduced hospitalizations and deaths in high-risk individuals by nearly 90% in a clinical trial.

Three analysts estimate sales of $15 billion to $25 billion for it next year, according to IBES data from Refinitiv.

Pfizer’s forecast came after the emergence of the Omicron variant last month, which has more than 50 mutations compared with the original version of the virus. That has reduced the effectiveness of two doses of the vaccine against infection, and spurred fear of rapid spread around the globe.

Prior to the Omicron variant, top U.S. disease doctor Anthony Fauci forecast the pandemic would end in 2022 in the United States.

The Pfizer vaccine is authorized in the United States for people age 5 and older. But it said on Friday that its study in children between the ages of 2 and 4 who were given two 3-microgram doses of the vaccine found it did not create the same immune response that a larger dose of the vaccine had in older children.

The 3-microgram dose did generate a similar immune response in children aged 6 to 24 months, the company said.

The company said it will now test a three-dose course in both age groups, as well as in older children. It had previously expected data from 2- to 4-year-olds this year, but said it did not expect the delay would meaningfully change plans to file for emergency use authorization in the second quarter of 2022.

Pfizer and BioNTech have also been developing a version of their vaccine tailored to combat the quick-spreading Omicron variant, although they have not decided whether it will be needed. They expect to start a clinical trial for the updated vaccine in January, Pfizer executives said.

Variant-specific shots, if needed, could boost sales in 2022.

The highly-transmissible Omicron variant of the coronavirus has been detected in over 77 countries and has spread to about one-third of U.S. states.

The vaccine was around 95% effective in the adult clinical trial, but Pfizer has said that immunity wanes some months after the second dose. Early data suggests that three doses of the shot may be necessary to protect against the Omicron variant. Reuters
**New coronavirus infections**

**Daily rise in new coronavirus infections recorded below 15,000 for 51 consecutive days (The Tribune: 202101220)**


Active Covid cases in country decline to 84,565

Daily rise in new coronavirus infections recorded below 15,000 for 51 consecutive days

Photo for representation purposes.

India logged 7,145 new coronavirus infections taking the total tally of Covid cases to 3,47,33,194, while the active cases declined to 84,565, according to the Union health ministry data updated on Saturday.

The death toll climbed to 4,77,158 with 289 more fatalities, according to the data updated at 8 am.

The daily rise in new coronavirus infections has been recorded below 15,000 for the last 51 days now.

The active cases comprise 0.24 per cent of the total infections, the lowest since March 2020, while the national Covid recovery rate was recorded at 98.38 per cent, the highest since March 2020, the health ministry said.

A decline of 1,850 cases has been recorded in the active Covid caseload in a span of 24 hours.

The daily positivity rate was recorded at 0.57 per cent. It has been less than 2 per cent for last 75 days. The weekly positivity rate was recorded at 0.62 per cent. It has been below 1 per cent for the last 34 days, according to the health ministry.

The number of people who have recuperated from the disease surged to 3,41,71,471, while the case fatality rate was recorded at 1.37 per cent.

The cumulative doses administered in the country so far under the nationwide Covid vaccination drive has exceeded 136.66 crore.

The 289 new fatalities include 243 from Kerala and 12 from Maharashtra.

Kerala has been reconciling its Covid fatalities for the last few days. Therefore, the death toll of the state is high.
A total of 4,77,158 deaths have been reported so far in the country, including 1,41,329 from Maharashtra, 44,189 from Kerala, 38,282 from Karnataka, 36,667 from Tamil Nadu, 25,100 from Delhi, 22,915 from Uttar Pradesh and 19,652 from West Bengal. PTI

**Omicron Alert (The Asian Age: 202101220)**

Omicron alert: Give jabs to kids, supply boosters

A new wave of infections in India caused by the latest Covid variant Omicron is inevitable. At a time when European countries are bringing back restrictions and even lockdowns in the face of a rampaging strain of the SARS-CoV-2 virus, India’s shoddy testing regime at international airports is likely to only delay the spread. It is entirely up to the people to take precautions to stave off the Omicron variant. They have already been given advisories like keeping New Year gatherings to the minimum and follow all protocols to guard against the pandemic.

The government, advised by epidemiologists and doctors, has done its fair bit though the vaccination programme would have to pick up considerable pace if it is to cover the entire adult population with two jabs as it has thus far managed to get only about 56 percent double jabbed while 87 percent of the eligible people have had one dose. The matter of opening up the programme to children between the ages of 15 and 18 has itself been hanging fire, which fate is also shared by authorisation for ‘booster’ shots.

It is paradoxical that while the world’s biggest vaccine manufacturer is letting its capacity go idle in India for want of orders, epidemiologists are still debating over opening up the jabs programme for kids and boosters for all. Surely, funds cannot be the constraint here. It is the duty of the central government to provide all it can to protect the population, a necessity even greater than helping refloat the economy further with stimulus. In the face of a highly transmissible variant that has been seen to double cases in the UK and other nations in under three days, no expense should be spared. It is debatable whether the Omicron wave will be less intense in India because of higher seroprevalence here and whether the disease will continue to be mild even when it affects older and more vulnerable people. The medical infrastructure would have to be cranked up to start preparing for a breakout that could become severe as it picks up pace like the earliest variants did to overwhelm the healthcare system, particularly in the second wave in early 2021 when shortage of medical oxygen proved fatal.

We know from experience that lockdowns achieve little except damaging the economy and dragging down people’s morale. Complacency, which has set in with a progressive drop in Covid-19 cases since the height of the pandemic when four lakh infections a day were being reported and 4,000 deaths a day were the average, must be fought. People’s cooperation is vital here as the cost of getting infected is very high for individuals. The unvaccinated must understand that mortality rates among them will be far higher.

To prepare rather than panic is the best indicated course. There isn’t sufficient data yet to suggest the Omicron could be the mild variant that will send the Delta packing and in its global spread reduce the disease to endemic. A sense of urgency to prepare for the worst is needed now lest the pandemic provide a rerun of the horrors of India’s second wave, the true cost of which had been grossly underreported as corpses floated in the Ganga and crematoriums creaked to cope.
Focus must be on creating social awareness about women’s reproductive health and rights

Good intent does not guarantee favourable outcomes. Coercive laws without wide societal support often fail to deliver even when their statement of objects and reasons aims for the larger public good. Within days of the Union Cabinet approving a proposal to raise the age of marriage for women from 18 to 21 years, the same age as for men, the Government listed it for legislative business in Parliament this week. If passed, various personal and faith-based laws which govern marriages in India now, including The Hindu Marriage Act, 1955, the Special Marriage Act, 1954, and the Prohibition of Child Marriage Act, 2006, will have to be amended.

In her Budget speech last year, Finance Nirmala Sitharaman had announced that the Government would set up a task force to look into the age of a girl entering motherhood with an aim to lower maternal mortality rates, improve nutrition levels as well as ensure opportunities to women to pursue higher education and careers. With these targets in mind, a panel headed by former Samata Party chief Jaya Jaitly was set up in June last year. The panel submitted its report in December 2020. Though the objective looks good on paper, merely raising the age of marriage without creating social awareness and improving access to health care is unlikely to benefit the community it wants to serve: young women not yet financially independent, who are unable to exercise their rights and freedoms while still under the yoke of familial and societal pressures.

According to Ms. Jaitly, raising the age of marriage is one of its recommendations, which include a strong campaign to reform patriarchal mindsets, and improved access to education. As per the National Family Health Survey (2019-2021), 23.3% of women aged 20-24 years married before 18, which shows that the Prohibition of Child Marriage Act, 2006, has not been wholly successful in preventing child marriages, especially among the poor. Women’s rights activists point out that parents often use this Act to punish their daughters who marry against their wishes or elope to evade forced marriages, domestic abuse, and lack of education facilities. Hence, within a patriarchal setting, it is more likely that the change in the age limit will increase parents’ authority over young adults. A good, but not easy, way to achieve the stated objective is to take steps to counsel girls on early pregnancies, and provide them the network to improve their health. The focus must be on creating social awareness about women’s sexual and reproductive health and rights, and ensuring girls are not forced to drop out of school or college. Laws cannot be a short cut in the path to social reform.
Testing, sequencing strategy

Is testing, sequencing strategy used missing Omicron? (The Hindu: 202101220)

https://www.thehindu.com/sci-tech/science/is-testing-sequencing-strategy-used-missing-omicron/article37986745.ece

There would have been a surge in cases if the variant is already present in India as Omicron spreads two to three times faster than Delta.

Over 100 Omicron variant cases have been detected so far in 11 States in India. Except for one case of a medical doctor in Bengaluru who has been confirmed to be infected with the Omicron variant, the remaining have been detected in international passengers arriving in India and their contacts.

A November 30, 2021 circular from the health ministry clearly mentions that effective December 1, all passengers arriving from specified “at-risk” countries will be required to undergo an RT-PCR test on arrival. And random testing is to be done on 2% of the total flight passengers arriving from other countries. Incidentally, the at-risk countries list has not been updated since the circular was sent on November 30; it includes only Europe, the U.K. and 11 other countries.

Omicron Infection (Hindustan: 2021012020)

महाराष्ट्र में छह, गुजरात में चार और संक्रमितमिले ● विदेश से लौटने वाले तीन लोगों में पुष्टि में ओमीक्रोन के मामले 150 पार

https://epaper.livehindustan.com/
बंगलुरु में रेलवे स्टेशन पर रविवार को कोविड की जांच करती सुरक्षाकर्मी। • प्रेट्र

संक्रमण के 7,081 नए मरीज मिले
नई दिल्ली। देश में एक दिन में कोरोना के 7,081 नए मामले सामने आने से संक्रमण के कुल मामलों की संख्या 3,47,40,275 हो गई है, जबकि सक्रिय मरीजों की संख्या कम होकर 83,913 रह गई है, जो पिछले 570 दिन में सबसे कम है।

केंद्रीय स्वास्थ्य मंत्रालय के अनुसार, महामारी से 264 और मरीजों की मौत के बाद मृत्यु संख्या बढ़कर 4,77,422 हो गई है। संक्रमण के दैनिक मामले बढ़ते रहते हैं, जबकि मरीजों की मौत के संया कम होकर 83,913 आई है, जो पिछले 570 दिन में सबसे कम है।

उच्च मामलों के अनुसार, महामारी से 264 मरीजों की मौत के संया बढ़कर 4,77,422 हो गई है। संक्रमण के कुल मामलों का 0.24 प्रतिशत है, जो पिछले 52 दिन से 15,000 से कम हुई है।

केंद्रीय स्वास्थ्य मंत्रालय के अनुसार, नए मामलों का 0.24 प्रतिशत है, जो पिछले 52 दिन से 15,000 से कम हुई है।

नई दिल्ली। एजसी

देश में कोरोना के ओमीक्रोन वेरिएंट का कहर बढ़ता ही जा रहा है। रववार को भी ओमीक्रोन के दस नए मामले सामने आए हैं। इनमें महाराष्ट्र के छह और गुजरात के चार मामले शामिल हैं। इससे ओमीक्रोन से संक्रमित होने वालों की कुल संख्या 153 हो गई है।

महाराष्ट्र में ओमीक्रोन के छह नए मामलों की पुष्टि हुई है। इनमें से चार मामले मुंबई एयरपोर्ट से आए जांच में सामने आए हैं। वहीं पुणे और पिंपरी चिंचवाड़ में एक-एक ओमीक्रोन संक्रमित मिले हैं। जबकि राजकोट में 63 नए मामले बने हुए हैं।

महाराष्ट्र में ओमीक्रोन के छह नए मामलों की पुष्टि हुई है। इनमें से चार मामले मुंबई एयरपोर्ट पर हुए जांच में सामने आए हैं। वहीं पुणे और पिंपरी चिंचवाड़ में एक-एक ओमीक्रोन संक्रमित मिले हैं। गुजरात के राजकोट में 63 साल का व्यक्ति ओमीक्रोन से संक्रमित मिला है। वहाँ एक तुर्की, एक बांग्लादेशी और एक अफ्रीका से आया है। इनमें से 45 नए मामले बने हुए हैं।

सबसे ज्यादा महाराष्ट्र में

सबसे ज्यादा 54 मामले महाराष्ट्र में देश में सबसे ज्यादा 54 ओमीक्रोन संक्रमित फिलहाल महाराष्ट्र में हैं। वहीं दिल्ली में 22, राजस्थान में 17, कर्नाटक में 14, तेलंगाना में 20, गुजरात में 11, केरल में 11, आंध्र प्रदेश में 1, चंडीगढ़ में 1 मामला मिला।

Coronavirus Cases (Hindustan: 2021012020)
चित्रा: राजधानी में छह महीने बाद कोरोना के सर्वाधिक मामले

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दिल्ली में ओमीक्रोन की दस्तक के बाद से फिर से कोरोना के मामले बढ़ने लगे हैं। रविवार को कोरोना छह महीने बाद 107 नए मरीज मिले जबकि दस दिन बाद कोरोना से एक मरीज की मौत भी दर्ज की गई। इसके साथ ही संक्रिय मरीजों की संख्या भी 500 को पार कर गई है। चित्रा की बात है कि संक्रमण दर में भी इजाफा दर्ज किया जा रहा है।

स्वास्थ्य विभाग की ओर से जारी आंकड़ों के मुताबिक, कोरोना के 100 से अधिक मामले इससे पहले 29 जून को दर्ज किए गए थे। उस दिन 101 नए मरीज मिले थे लेकिन बीते एक हफ्ते में तीन गुना बढ़ोतरी देखने को मिल रही है। उधर, नौ दिसंबर को संक्रिय मरीजों की संख्या 400 से कम थी जो अब दस दिन बाद बढ़कर 540 हो गई है। इनमें से 225 मरीजों का घर पर उपचार जारी है जबकि 208 मरीज अस्पतालों में भर्ती हैं। संक्रमण दर भी बढ़ रही है। हफ्तेबार पहले जो संक्रमण दर 0.06 थी, वह अब 0.17 फीसदी तक पहुंच गई है। यह बढ़त मामूली है पर ट्रेंड चित्रा बढ़ रहा है। हालात देखते हुए दिल्ली आपदा प्रबंधन प्राधिकरण ने सोमवार को बैठक बुलाई है। उधर, देश में ओमीक्रोन के मामले 151 तक पहुंच गए हैं। अमेरिका सरकार के चिकित्सा सलाहकार एंथनी फाउची ने कहा कि दोनों टीका ने चुके लोग भी ओमीक्रोन सेस्युअरित नहीं हैं।