New Cases

India records 1.95 lakh new Covid cases; active cases highest in 7 months  
(The Tribune: 20220112)

442 more deaths reported


India added 1,94,720 new coronavirus infections taking the total tally of Covid cases to 3,60,70,510 which includes 4,868 cases of omicron variant, according to the Union Health Ministry data updated on Wednesday.

The active cases increased to 9,55,319, the highest in 211 days, while the death toll climbed to 4,84,655 with 442 fresh fatalities, the data updated at 8 am stated.

Of the total 4,868 cases of omicron variant, 1,805 have recovered or migrated so far.

Maharashtra recorded the maximum number of 1,281 cases followed by Rajasthan at 645, Delhi 546, Karnataka 479 and Kerala 350.

The active cases comprise 2.65 per cent of the total infections, while the national Covid recovery rate decreased to 96.01 per cent, the ministry said.

A total of 2,11,298 coronavirus infections were reported in a single day on May 26.

An increase of 1,33,873 cases has been recorded in the active Covid caseload in a span of 24 hours.

The 442 new fatalities include 296 from Kerala and 23 from Delhi.
A total of 4,84,655 deaths have been reported so far in the country including 1,41,669 from Maharashtra, 49,776 from Kerala, 38,379 from Karnataka, 36,886 from Tamil Nadu, 25,200 from Delhi, 22,937 from Uttar Pradesh and 19,936 from West Bengal.

**HP kids shun tobacco**

**HP kids shun tobacco (The Tribune: 20220112)**


Crackdown on clandestine drug trade needed

HP kids shun tobacco

That only 1 per cent of the children in the 13-15 age group use tobacco products in Himachal Pradesh, as per the Global Youth Tobacco Survey, is testimony to the state’s sustained tobacco-control measures. It is especially commendable that the adolescent category has shown the lowest prevalence, in stark contrast to the highest figure of 58 per cent in Arunachal Pradesh and Mizoram. ‘Catching them young’ is the key to motivating people not to consume tobacco products later in life and also keep away from other harmful and addictive substances.

With the equally encouraging trend of a significant reduction in the consumption of the hazardous tobacco and smoking among adults over the years, the exemplary state is poised for a faster check on the spread of the menace that causes serious illnesses and kills lakhs of people every year. Massive awareness campaigns, warnings on cigarette labels, banning smoking in public and prohibiting the sale of tobacco products to minors and around educational institutions as well as penalties and fines imposed on the violators have majorly contributed to the effective implementation of state policies.

However, the tobacco lobby is powerful and containing it is a daunting task. The authorities need to be more vigilant in checking the smuggling of tobacco products from across the border and their sale. Reports of the border districts of Punjab being the transit points for the movement of foreign and Indian brands of cigarettes routed from Delhi point to a huge, unaccounted-for clandestine market. Reports published in The Tribune over the past few months reveal a ground reality that is disturbing as it belies official claims. The easy availability of gutkha, khaini pan masala and chewable tobacco products on the black market in areas such as lower Kangra and Palampur and a clientele — across age groups and rural-urban locations — ready to procure them at prices higher than the MRP paint a dark picture. A stringent
crackdown on the smugglers and traders by the authorities is needed to curb the illegal trade running into crores of rupees.

**Criminalising domestic rape**

**Criminalising domestic rape (The Tribune: 20220112)**


Marriage can’t be considered as lifelong consent

THE Delhi High Court, hearing a bunch of petitions seeking criminalisation of marital rape in the country, has observed that the protection provided to husbands against being booked for rape may have something to do with the ‘qualitative difference’ between marital and non-marital relationships. Noting that it was merely having an ‘open discussion’ before arriving at a judgment, a two-member Delhi HC Bench said that the ‘qualitative difference’ is that in a marriage, a spouse has an expectation and ‘to an extent a legal right’ to establish conjugal relations with the partner. ‘A husband has no business to compel. (But) the court can’t ignore what happens if we strike down the exception,’ the Bench observed, adding: ‘The husband goes to jail for 10 years if he does this even on one occasion… We need a much more incisive insight into the issue.’

Indeed, an incisive and nuanced insight is needed into the reason for providing for such an exception in the Indian Penal Code, which makes India one of around 30 countries in which marital rape is not criminalised. In 2000, the Law Commission had opposed criminalising marital rape, arguing that ‘it may amount to excessive interference with the marital relationship’. In 2013, the JS Verma Committee recommended that marital rape be criminalised, but four years later, a Parliamentary Standing Committee opposed it on the grounds that ‘the entire family system will be under great stress’ if it were criminalised.

Such reasons given against removing this exception in law seem shallow, with not adequate consideration given to the welfare of women. But the difficulty of gathering evidence regarding this offence must be acknowledged. One facet of the issue that needs to be examined is the practicality and integrity of evidence if the married couple is going through a strained relationship or a separation when their accusations against each other could be suspect. However, domestic violence is a crime that is rampant but grossly underreported, and criminality of sexual violence in a marriage must be acknowledged and marriage must not be considered as lifelong consent.
WHO

WHO body says COVID-19 vaccines may need to be updated for Omicron
(The Tribune: 20220112)


Technical group, made up of independent experts, said it would consider a change in vaccination composition and stressed that shots needed to be more effective in protecting against infection

WHO body says COVID-19 vaccines may need to be updated for Omicron

A World Health Organisation technical body said on Tuesday that current COVID-19 vaccines may need to be reworked to ensure they are effective against Omicron and future variants of the coronavirus.

The technical group, made up of independent experts, said it would consider a change in vaccination composition and stressed that shots needed to be more effective in protecting against infection.

"The composition of current COVID-19 vaccines may need to be updated to ensure that COVID-19 vaccines continue to provide WHO-recommended levels of protection against infection and disease by VOCs (variants of concern), including Omicron and future variants," the technical body, tasked with making recommendations to the WHO, said in a statement.

"COVID-19 vaccines need to...elicit immune responses that are broad, strong, and long-lasting in order to reduce the need for successive booster doses," it added.

"A vaccination strategy based on repeated booster doses of the original vaccine composition is unlikely to be appropriate or sustainable."

However, the statement stopped short of advocating an Omicron-specific vaccine at this stage, saying more research was required and urging manufacturers to share data.

It said that an updated vaccine could be aimed specifically at the dominant variant, which is currently Omicron in many places, or be a "multivalent vaccine" designed to bust several variants at once. Further recommendations will be issued when more data is available, it added.

Some vaccine makers are already developing next-generation vaccines targeting Omicron, the highly contagious variant first detected in southern Africa and Hong Kong.

On Monday, Pfizer Chief Executive Albert Bourla said a redesigned COVID-19 vaccine that specifically targets the Omicron variant would probably be needed and his company could have one ready to launch by March.
Rival Moderna Inc is also working on a vaccine candidate tailored to Omicron, but it is unlikely to be available in the next two months.

A WHO official had previously said the issue of vaccine composition required "global coordination" and should not be left to manufacturers to decide alone. Reuters

3rd wave

Is 3rd wave starting to ebb in Mumbai, Delhi? (Hindustan:20220112)

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

The earliest urban hot spots of India’s third wave of Covid-19 – Mumbai and Delhi, which were among the first regions in the country to reflect a rising trend in infections – appear to be exhibiting early signs that their infections curves may be flattening, data shows.

While key data indicators in Mumbai suggest that numbers in the city have already started peaking, Delhi is experiencing what could be the first indication that the rise of cases has slowed down.

In Mumbai, the positivity rate has started dropping. Positivity rate (the proportion of daily tests returning positive for Covid-19) is one of the first statistical measures that indicate a reversal in trend. This number has now fallen for five days in a row – the figure was 29.9% last
Thursday, 29% on Friday, 28.6% on Saturday, 28.5% on Sunday, 23% on Monday, and touched 18.8% on Tuesday.

As expected, this trend was closely followed by a drop in daily infections, which have now fallen for four consecutive days – there were 20,971 cases on Friday, 20,318 on Saturday, 19,474 on Sunday, 13,648 on Monday, and finally 11,647 on Tuesday.

In Delhi, while cases and positivity rate have not yet started declining, the rapid rise seen over the past two weeks appears to have slowed, hinting that the peak may be approaching – a factor that has been pointed out by several health experts, both government and independent.

While daily cases in the Capital more than doubled in four days from 10,665 on Wednesday to 22,751 on Sunday, cases have stayed below Sunday’s level over the two following days – there were 19,166 new cases on Monday (when fewer tests were conducted), and 21,259 on Tuesday. The rapid rise in positivity rate in Delhi has also slowed. While daily positivity rate jumped more than 11 percentage points between Wednesday (11.9%) and Sunday (23.5%), it has only increased two percentage points between Sunday and Tuesday (25.6%).

If this trend continues, these numbers may be headed to a peak in a few days, something that Delhi health officials have suspected may happen based on an analysis by a team of medical experts along with an assessment of Sutra – a mathematical model developed by scientists at IIT-Kanpur and IIT-Hyderabad to assess the peak in Covid-19 cases in India – that says that Delhi could see a peak in Covid-19 infections around January 15.

“We are expecting a peak in cases in the next day or two. But we are prepared to handle the spike in cases,” Delhi health minister Satyendar Jain said on Tuesday.

To be sure, doctors and health experts said that numbers on the ground may be higher as a lot of people have resorted to using home test kits due to milder symptoms occurring with the Omicron variant, and do not necessarily follow up with a RT-PCR test if they are positive, thereby staying off the radar. There is, however, no way to map these cases since most mild patients are recovering in home isolation.

Infectious disease expert Dr Om Srivastava, who is also a member of Maharashtra’s Covid-19 task force, said that the wide use of self-testing kits is a matter of convenience but when looked at from a public health perspective, it could present a skewed picture of the spread of infection. “The authorities should consider devising a mechanism through which reports of all self-tests are recorded,” he said.

Experts, however, said that so far the waves in Mumbai and Delhi appear to be following trends seen in Omicron waves the world over – a very rapid rise in infections that peaks just as fast, coupled with a relatively higher share of mild cases, causing fewer hospitalisations.

To be sure, they also warned that the marginal improvement in numbers witnessed over the past few days needs to become a sustained trend, and that keeping in mind the high transmissibility of the Omicron variant, the focus remains on keeping hospitalisations low.

In Mumbai, authorities said they were optimistic, but wanted to remain cautious. Suresh Kakani, additional municipal commissioner of the Brihanmumbai Municipal Corporation (BMC) said, “It looks like the cases are stabilising but we will have to wait for this week before commenting on whether we have reached the peak.”

Experts also expressed optimism about the reduced number of hospitalisations and comparatively fewer deaths so far.
Delhi government numbers show that as of Tuesday, despite a consistent rise in the cases, less than 15% of hospital beds designated for Covid-19 patients were occupied. In Mumbai, this number was under 20%. A tally of data compiled by HT from 16 regions in India showed that fewer 15% of hospital beds are occupied across the country as of Tuesday night.

And even among those hospitalised and those dying, the numbers are dominated by those who are unvaccinated. On Monday, HT reported a Delhi government analysis of deaths among Covid-19 patients in Delhi between January 5 and 9 that showed that 35 out of 46, or 76%, of the fatalities were in unvaccinated people.

“We are in comfortable situation during the third wave and are handling all symptomatic patients or those from high-risk groups. This time the demand for oxygen and ICU beds is low due to which we are in a much better situation. However, we are on alert if cases increase drastically we will have to further ensure every patient gets a bed,” BMC’s Kakani said.

Maharashtra’s health minister Rajesh Tope said that so far Oxygen requirement has not been an issue like it was in the country’s brutal second wave. “The need for oxygen has not risen a great deal. The bed occupancy has not shot up to a concerning level. However, we need to remain cautious and follow Covid-appropriate behaviour... Out of the active cases, only 2% are on oxygen support and 1% are in ICU in the state. The numbers are not such that would burden the medical infrastructure,” he said.

And like in Delhi, an overwhelming majority of medical resources such as Oxygen beds in Mumbai were currently deployed towards the unvaccinated.

On Saturday, HT reported that 96% of Covid-19 patients requiring oxygen support in Mumbai’s hospitals are unvaccinated.

Doctors and health experts have repeatedly said that considering the high transmissibility of the Omicron variant, it would be better to look beyond reported infections and towards hospitalisations instead.

“Infection-wise the on-ground reality could be 10-100 times also because a lot of people are taking home tests. But what is important is to see the hospitalisations, the requirement of oxygen and ventilators because that is a very small percentage. There is no point now looking at just case numbers because a majority of the infections are mild. If we see the trends in other countries, the rise in cases is steep because this variant is definitely more transmissible but since the infection period is also shorter, the fall is also equally fast. But we will have to wait and watch how the trends are here because taking a definitive stand,” said Dr Sumit Ray, head (department of critical care), Holy Family Hospital.

With inputs from Soumya Pillai in Delhi, and Swapnil Rawal, Mehul Thakkar and Jyoti Shelar in Mumbai
Covid-19: Which masks are most effective against Omicron?

Before putting on a mask, clean hands with an alcohol-based hand rub or soap and water, suggests WHO

As Omicron — the fastest-spreading variant of SARs-CoV-2 — continues to affect people across the globe, the importance of wearing masks and maintaining social distancing becomes even more important. But there is still confusion regarding the most effective masks against the virus and its many variants. While some people still wear cloth masks, experts say that they may prove ineffective against filtering particles.

Why are cloth masks not effective?

A research paper published in PeerJ, which analysed 20 different types of cloth masks, found that their pore sizes ranged from 80-500 micrometers as against the novel coronavirus which is about 0.12 micrometers. This meant that tiny droplets can be inhaled through the voids or gaps near the nose and cheeks.

Agreed Dr Pritam Moon, consultant physician, Wockhardt Hospital Mira Road, and said that cloth masks are effective only for larger particles. “High-filtration masks, on the other hand, can help keep Omicron at bay when compared to cloth and surgical masks,” he said.

While surgical masks are better than cloth masks, they still lack protection against the Omicron variant.

Also on masks |Effective face mask practices to reduce spread of Covid-19, including new variants

So, which mask is the best? Here’s what you need to know.

As per Dr Niranjan Patil, microbiology and molecular biology – head and biosafety officer, Metropolis Healthcare Ltd, “A cloth mask alone may not be useful. It was being prescribed in the first wave for general public because there was a shortage of N95 masks for healthcare workers and lab professionals. A three-layer surgical mask and cloth mask, when used together,
are effective instead of using them alone. As Omicron is highly transmissible, protection by cloth mask is non-existent and in fact, may contribute to its spread as it may give a false sense of security with reference to transmission and protection.”

The Ministry of Health and Family Welfare has said that N-95 mask/respirator have filter efficiency of 95 per cent or more against particulate aerosols. The mask should be provided with expiration valve, should be disposable and fit for wide range of face sizes. It should accompany certification from NIOSH or equivalent certification.

According to United States’ FDA (Food and Drug Administration), an N95 mask “is a respiratory protective device designed to achieve a very close facial fit and very efficient filtration of airborne particles”. Similarly, Centers for Disease Control and Prevention (CDC) said that KN95 masks are a cheaper alternative to N95 masks, as long as they “meet requirements similar to those set by CDC’s National Institute for Occupational Safety and Health (NIOSH) for respirators”.

fitness, outdoor fitness, outdoor fitness and weight loss, things to keep in mind when working out outdoors, indian express, indian express news Should you be using cloth masks? (Source: Getty/Thinkstock)

The Ministry’s revised guidelines for home isolation said a Covid-19 patient should, at all times, use triple layer medical mask. “They should discard mask after eight hours of use or earlier if the mask becomes wet or visibly soiled. In the event of caregiver entering the room, both caregiver and patient may preferably consider using N-95 mask.

“N95 masks will help to filter even minute particles. Do not go for a mask that has a valve as it will not help in filtering the exhaled air if one is infected and not aware of the same. If you are using a surgical mask then double masking is essential. Make sure that the mask fits the face properly,” Dr Moon said.

According to American Conference of Governmental Industrial Hygienists, N95 masks are the best when it comes to offering maximum protection against the transmission of the virus. If the infected person is not wearing a mask, it takes at least 2.5 hours to transmit the infection from one person to another person. If both are wearing N95 masks, then the virus takes 25 hours to transmit.

Also on masks |Face masks vs face shields: Here’s what you need to know

Dr Patil advised against using masks with vents or exhalation valves as they allow the unfiltered breath to escape. “Besides, people who have a condition or are taking medications that weaken their immune system may not be fully protected even if they are fully vaccinated. They should continue to take all precautions recommended for unvaccinated people, including wearing a well-fitted mask, until advised otherwise by their healthcare provider. If you are fully vaccinated, to maximise protection and prevent possible spreading of Covid-19 to others, wear a mask indoors and outdoors in public if you are in an area of substantial or high transmission,” said Dr Patil.
Wearing two masks together, N95 and a surgical mask under it, is the best way to protect yourself from the variant, said Dr Sanket Jain, pulmonologist consultant, Masina Hospital, Mumbai. “N95 mask, in particular, can be reused, as they are rated for their ability to filter a lot of dust. The mask will not get saturated even after few days of normal use, so it can be reused. After the use of N95 mask for a routine day, it is to be kept aside in a dust-free environment for two-three days and then used again. Generally, there are many washable and reusable N95 masks available in the market, which can be washed with detergent powder and properly air dried for reuse,” said Dr Jain.

What about people who can’t wear N95 due to breathing issues?

“A combination of three-layer surgical and a cloth mask is for someone with COPD, asthma or any other breathing difficulty issues who cannot wear an N95 mask,” said Dr Patil.

According to Dr Rakesh Rajpurohit, MD, consultant pulmonologist and critical care medicine at Jain Multi Specialty Hospital, Mira Road, while cloth mask won’t give complete protection, but if chosen properly and used correctly can offer some form of protection. “It should be properly washed using disinfectants. It should cover the nose and mouth completely. It should be with a nose wire, to prevent any air leaks. It should be of multiple layer, tightly woven, and of breathable fabric. One can check the fabric by holding against a source of light, if it completely blocks the light, it is suitable,” said Dr Rajpurohit.

According to WHO, here’s how you should use a mask

*Before putting on a mask, clean hands with alcohol-based hand rub or soap and water.

*Cover mouth and nose with mask and make sure there are no gaps between your face and the mask.

*Avoid touching the mask while using it; if you do, clean your hands with alcohol-based hand rub or soap and water.

*Replace the mask with a new one as soon as it is damp, and do not re-use single-use masks.

How to discard mask?
According to MoHFW, mask should be discarded after cutting them to pieces and putting in a paper bag for a minimum of 72 hours.

*Perform hand hygiene after disposal of the mask.

**Nutrition alert**

**Nutrition alert: Foods to eat before, during, and after your periods (The Indian Express:20220112)**

"Fuelling the body in the right way before, during and after menses can help not just nourish the body at this time but also manage period issues," said nutritionist Minacshi Pettukola.

Cramps, bloating, headache, and fatigue are some common issues that women experience during their periods. As such, while the body needs rest, it is also important for one to ensure that it gets proper nourishment — not just during menses, but before and after too.

Diet and nourishment can play a pertinent role in controlling period-related issues to a large extent, said nutritionist Minacshi Pettukola.

ALSO READ | Foods women should eat and avoid during their period

“All that cramping, bloating, headaches, and fatigue plus hunger are all associated with ‘that time of the month’. A woman’s body is just incredible, and what it can do and goes through month on month is just mind-blowing. Monthly changes are natural, but fuelling the body in the right way before, during and after can help not just nourish the body at this time but also manage any related issues,” she said.

**Before**

“We face lowered Follicle Stimulating Hormone (FSH) and Luteinizing Hormone (LH) with oestrogen and progesterone levels. PMS is most likely to occur during this period, and that can trigger things like bloating, cravings, irritability, fatigue, and mood swings,” she explained.

What to have: Include dark chocolate, plant proteins, essential fatty acids and fibre-rich foods such as kale, spinach, quinoa, nuts, tofu, lentils and beans. Keep yourself hydrated.

ALSO READ | Ayurvedic diet tips to ease your menstrual problems

What to avoid: Avoid over-consumption of salt as it causes water retention that can lead to feeling bloated during your period. Also, avoid too much food since it can upset your stomach and even cause acid reflux.
balanced diet, lung hlth Have a nourishing diet (Photo: Pexels)

During

This is the first day of your cycle. As such, it is imperative to maintain your energy level. Have natural relief causing foods to avoid any pain or discomfort.

What to have: Eat iron and magnesium-rich foods such as whole grains, fatty fish, dark chocolates, and yoghurt. Hot peppermint or even ginger will help reduce cramps. Stay hydrated and try to move around as much as you can (nothing too intense), she mentioned.

After

Increasing levels of oestrogen in the follicular phase trigger the release of LH, and the process of ovulation begins around the 14th day. “Nourishment is super important during this ovulation period,” she remarked.

ALSO READ |Five foods that can help alleviate PMS symptoms and period cramps

What to have: Now it’s time to load up on B vitamins, lean proteins, and calcium. Iron-rich foods like certain meats, spinach, dark leafy greens, legumes, and dairy can help.

Good carbs like oats, brown rice, fruits, fibrous veggies, lentils well as fibre-rich foods like flaxseed, oats, nuts, seeds, wholegrains and cereals. Movement and hydration are equally important again.

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👉 The above article is for information purposes only and is not intended to be a substitute for professional medical advice. Always seek the guidance of your doctor or other qualified health professional for any questions you may have regarding your health or a medical condition.
Delhi sees 23 Covid-19 fatalities, 21,259 cases

Centre assured govt Covid curbs will be imposed across NCR: CM

Positivity rate surges to 25.68%, Total number of cases 74,881

New Delhi, Jan 13: Delhi has recorded 23 Covid deaths, the highest in a day, and 21,259 fresh cases on Thursday, while the positivity rate rose to 25.68%, according to data shared by the health department here on Tuesday. The fatalities recorded in the last 24 hours are the highest since the start of the year, when the national capital recorded 22 fatalities, official data stated. It also stated that the number of cases has been on the rise since May 5, when it was at 26,72 per cent.

According to the data, of the 23 Covid deaths recorded in the last 24 hours, 22 cases were reported from the flu and four deaths were reported from communities. At the situation, the government on Monday issued an advisory to all hospitals to ensure that patients with communi-

Covid-19 Fatalities (The Asian Age:20220112)

LP(a): The silent killer

High levels of Lipoprotein(a) triple the risk of having a heart attack or stroke at an early age

Swati Sharma

Tennis legend Arthur Ashe, who had his first heart attack at age 36, was reported to have high Lp(a), as was Bob Harper, a celebrity fitness trainer who nearly died of a massive heart attack at age 32. Lp(a) is an important but often neglected heart disease risk factor. What is it and why you must measure it,

"The lipoprotein (a) test measures the levels of lipoprotein (a) in your blood. Lipoproteins are made up of proteins and fats that carry cholesterol through your bloodstream. Lipoprotein (a) is a type of LDL (bad) cholesterol. A high level of lipoprotein (a) may mean you are at risk for heart disease," says Dr N Sreenivasa Rao, Senior Consultant Cardiologist, Apollo Hospitals.

There are no specific treatments to lower lipoprotein (a).

DIAGNOSIS

A lipoprotein (a) test is used to check for risk of stroke, heart attack, or other heart diseases. It is not a routine test. It is usually only given to people who have certain risk factors, such as a family history of heart disease," says Dr Sreenivasa.

Why do I need a lipoprotein (a) test?

Dr Sreenivasa says you may need this test if you have:

- Heart disease, despite normal results on other lipid tests.
- High cholesterol, despite maintaining a healthy diet.
- A family history of heart disease, especially heart disease that started before the age of 55 in men and 65 in women.
- Other unexplained signs of heart disease.

LIFESTYLE CHANGES

Reducing the risk of cardiovascular disease is key, according to Dr P Rohith Reddy, Senior Interventional Cardiologist, Yashoda Hospitals.

Dietary and lifestyle changes can reduce LDL cholesterol, which can help lower the incidence of cardiovascular disease.

Here are some ways in which this can be done:

1. Adjusting a healthy diet
   - Eating regularly:
     - Staying physically active can lower LDL cholesterol and raise HDL cholesterol.
   - Counseling patients on heart health.

2. Exercising regularly:
   - Staying physically active can lower LDL cholesterol and raise HDL cholesterol.
   - Maintaining a healthy diet.

3. Quitting smoking:
   - Staying physically active can lower LDL cholesterol and raise HDL cholesterol.
   - Eating a healthy diet.

4. Getting enough sleep:
   - Staying physically active can lower LDL cholesterol and raise HDL cholesterol.
   - Eating a healthy diet.

TREATMENT OPTIONS

Lp(a) levels are generally unresponsive to traditional lipid-lowering drugs, such as the statins and fibrates. "Lipid is the only drug which has been shown to be effective in lowering Lp(a) levels when given in high doses (2 to 3 g/day). However, high doses of niacin can be associated with headache, flushing and liver toxicity — side effects that can lead to non-compliance, hence it has to be strictly monitored," warns Dr Rohith Reddy.

"Osteoporosis replacement therapy has shown significant decrease in Lp(a) levels particularly in those with high baseline levels, especially postmenopausal women receiving hormone replacement therapy," says Dr Reddy.

HEALTH CONDITIONS THAT MAY CAUSE HIGH Lp(a) LEVELS:

- Hypothyroidism — an underactive thyroid
- Type 1 diabetes
- Kidney disease

LOWERING Lp(a) THROUGH DIET:

- Include Omega-3 oils, nuts, olive oil and some other vegetable oils in your diet.
- Eat more vegetables, fruits, and nuts.
- Use flaxseed, which is rich in beneficial fibre and Omega-3 fatty acids.

EATING RIGHT

Dietary factors help cut the levels of Lp(a), says Dr Rohith Reddy.

- Consuming fish oils rich in Omega-3 fatty acids has shown to reduce Lp(a) levels considerably.

- Adults have an increased risk of heart attack and coronary heart disease if they have Lp(a) levels above 30 mg/dl. They may also have an increased risk of ischemic stroke if they have Lp(a) levels above 30 mg/dl.

- Those with high levels of Lp(a) should restrict intake of saturated fats and processed foods, which are high in artificial trans fats.

- Limiting alcohol intake can improve heart health.

"Your level of Lp(a) is determined by your genes and is not affected by your lifestyle or by most medications. But if your test results show a high level of Lp(a), your healthcare provider may recommend ways to reduce other risk factors that can lead to heart disease.”

— Dr N Sreenivasa Rao, Senior Consultant Cardiologist
Drug regulator, COVID-19 task force

Conflicting signals from drug regulator, COVID-19 task force (The Hindu:20220112)


On a few occasions, the national COVID-19 task force has refused to include drugs and vaccines that have been granted an EUA by the regulator

On December 28 last year, Health Minister Mansukh Mandaviya tweeted saying that in further strengthening the fight against COVID-19, the Indian drug regulator has granted emergency use approval for the antiviral drug molnupiravir. He also mentioned that molnupiravir will be manufactured by 13 generic drug manufacturers in India.

“Considering the emergency and unmet medical need in COVID-19, the SEC on December 27 recommended for grant of permission to manufacture and

Omicron epidemic

Omicron epidemic: third wave or new pandemic? (The Hindu:20220112)

https://www.thehindu.com/sci-tech/science/omicron-epidemic-third-wave-or-new-pandemic/article38190636.ece

T. Jacob JohnDhanya DharmapalanM.S. SeshadriJANUARY 08, 2022 19:57 IST

Both Delta and Omicron might co-exist, needing more vaccines in 2022

India is facing an epidemic wave of Omicron disease presenting mostly with sore throat, nasal discharge – without cough or high fever. Pneumonia is uncommon. Blood oxygen level remains normal.
Some senior citizens and those with diseases or therapies that weaken the immune system do get severe disease requiring hospitalisation. Altogether, Omicron disease is a milder version of COVID-19 with Wuhan-D614G or Alpha, Beta, Gamma and Delta variants.

‘Milder Omicron

‘Milder Omicron an evolutionary mistake,’ warns Cambridge scientist (The Hindu:20220112)


The reduced severity of Omicron is good news for now, but it is the result of an “evolutionary mistake” as COVID-19 is transmitting very efficiently and there is no reason for it to become milder, indicating that the next variant could be more virulent, a leading Indian-origin scientist from the University of Cambridge has warned.

Ravindra Gupta, Professor of Clinical Microbiology at the Cambridge Institute for Therapeutic Immunology and Infectious Diseases (CITIID), led a recent study on the Omicron variant.

Vaccination

वेघर किशोरों का टीकाकरण चुनौती बना (The Hindu:20220112)
दल मक्कूल-कॉलेज में पढ़ने वाले किशोर तो नजदीकी टीकाकरण केंद्रों पर वैक्सीन लगवा रहे हैं, लेकिन सड़कों पर गुजर-बसर करने वाले किशोरों का टीकाकरण किसी चुनौती से कम नहीं है। हालांकि, स्थानीय प्रशासन इसे लेकर प्रयास में जुटा है। उनका प्रयास है कि जल्द से जल्द उनका टीकाकरण किया जाए जिससे उन्हें महामारी के संक्रमण में आने से बचाया जा सके।

70 हज़ार के करीब सङ्क्या : दिल्ली बाल अधिकार संरक्षण आयोग (डीसीपीसीआर) के एक सर्वेक्षण के अनुसार, ऐसे बच्चों की सङ्क्या लगभग 70 हज़ार के करीब है। लेकिन परेशानी यह है कि यह सर्वे काफी समय पहले कराया गया था।

स्थायी तौर पर एक जगह न रहने से परेशानी : बाल अधिकारों को लेकर काम करने वाले संगठनों की मानें तो सड़क पर रहने वाले बच्चों की पहचान कर उनका टीकाकरण काफी चुनौतीपूर्ण है। कारण यह है कि ऐसे किशोर एक जगह स्थायी तौर पर नहीं रहते हैं। टीकाकरण के लिए पहचान से जुड़ा दस्तावेज भी होना जरूरी है।

शेल्टर होम में भी अभियान : उधर, किशोरों के टीकाकरण को लेकर बाल विकास विभाग के एक अधिकारी ने बताया कि ऐसे किशोरों के टीकाकरण को लेकर कदम उठाए गए हैं। उन्होंने कहा कि यह सर्वेक्षण काफी समय पहले हुआ था। अब इतने बच्चे सड़कों पर नहीं हैं। बड़ी सङ्क्य में बच्चों को सुरक्षित स्थानों पर पहुंचाया जा चुका है। शेल्टर होम में भी ऐसे बच्चे रहते हैं। वहां जाकर भी टीम टीकाकरण के लिए जुटी हुई है।