



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Tuesday 20210528

Antibodies

Zydus Cadila seeks DCGI nod for human clinical trials of antibodies to treat Covid (The Tribune: 20210528)

<https://www.tribuneindia.com/news/coronavirus/zydus-cadila-seeks-dcgi-nod-for-human-clinical-trials-of-antibodies-to-treat-covid-259274>

It is the only Indian company to have developed a treatment for Covid

Zydus Cadila seeks DCGI nod for human clinical trials of antibodies to treat Covid

Photo for representation only.

Zydus Cadila on Thursday said it is seeking permission from Drugs Controller General of India (DCGI) to initiate human clinical trials for monoclonal antibodies cocktail for treatment of Covid.

"Zydus is currently seeking permission to initiate phase 1/3 human clinical trials from the DCGI... ZRC-3308, a cocktail of two SARS-CoV-2-neutralizing monoclonal antibodies (mAbs) can emerge as one of the main treatments for mild Covid," Cadila Healthcare said in a regulatory filing. Cadila Healthcare is the listed entity of the group.

ZRC-3308 has been found to be safe and well tolerated in animal toxicology studies.

Zydus said it is the only Indian company to have developed a neutralizing monoclonal antibody-based cocktail for the treatment of Covid.

Dr Sharvil Patel, Managing Director, Cadila Healthcare Ltd said, "At this juncture, there is a critical need to explore safer and more efficacious treatments to combat Covid. It is important to look at different stages of the disease progression and look at options that can reduce patient's suffering and discomfort.

“We believe that ZRC-3308 has the potential to address these concerns and provide a safe treatment.”

Earlier this week, drug majors Roche India and Cipla announced the launch of Roche's Antibody Cocktail in India priced at Rs 59,750 per dose for the treatment of mild to moderate Covid in patients who are at high risk. PTI

WHO

B.1.617 COVID19 variant, first detected in India, now found in 53 countries: WHO (The Tribune: 20210528)

<https://www.tribuneindia.com/news/coronavirus/b-1-617-covid19-variant-first-detected-in-india-now-found-in-53-countries-who-259232>

WHO has declared B.1.617 as a “variant of concern”

B.1.617 COVID19 variant, first detected in India, now found in 53 countries: WHO

Image only for representational purposes. Tribune photo/Mukesh Aggarwal.

The B.1.617 COVID-19 variant, first detected in India, has now been found in 53 countries, according to the WHO, which noted that India recorded a 23 per cent decrease in the number of new cases in the last seven days but they were still the highest in the world.

The World Health Organisation's COVID-19 Weekly Epidemiological Update, published May 25, said that over the past week, the number of new cases and deaths continued to decrease globally, with over 4.1 million new cases and 84,000 new deaths reported, a 14 per cent and 2 per cent decrease respectively compared to the previous week.

According to the update, the B.1.617 variant, first detected in India, is now prevalent in 53 countries globally.

The B.1.617 viruses are divided into three lineages - B.1.617.1, B.1.617.2 and B.1.617.3. The update gave a break-up of the prevalence of the three sub-lineages of the B.1.617 variant in countries, territories and areas as of May 25.

According to it, B.1.617.1 is found in 41 countries, B.1.617.2 in 54 countries and B.1.617.3 in six. In addition, information for the B.1.617.1, B.1.617.2 sub-lineages was received by WHO from unofficial sources in 11 countries, including China, and will be reviewed as more information becomes available.

WHO has declared B.1.617 as a “variant of concern” and the update noted that this variant has “increased transmissibility”, disease severity is “under investigation”, risk of reinfection is “under investigation, possible modest reduction in neutralization activity (B.1.617.1)”.

It said that the highest numbers of new COVID cases in the last seven days were reported from India (1,846,055 new cases; 23 per cent decrease), Brazil (451,424 new cases; 3 per cent increase), Argentina (213,046 new cases; 41 per cent increase), the United States of America (188,410 new cases; 20 per cent decrease), and Colombia (107,590 new cases; 7 per cent decrease).

“Despite a declining global trend over the past four weeks, incidence of COVID-19 cases and deaths remain high, and substantial increases have been observed in many countries throughout the world,” it said.

The update further said that the South-East Asia Region reported over 2 million new cases and over 32,000 new deaths, a 21 per cent decrease and a 4 per cent increase respectively compared to the previous week.

“While the overall incidence of cases continues to decrease (driven primarily by trends in India), death incidence continued to increase for a tenth consecutive week, and sizable increases have been observed in other countries in the region,” it said.

In the region, the highest numbers of new deaths were reported from India (28,982 new deaths; 2.1 new deaths per 100,000; a 4 per cent increase), Nepal (1,297 new deaths; 4.5 new deaths per 100,000; a 6 per cent increase), and Indonesia (1,238 new deaths; 0.5 new deaths per 100,000; a 10 per cent increase). PTI

Covid vaccine

Covid vaccine doses administered in country crosses 20 crore(The Tribune: 20210528)

There are 1,28,74,546 people in the 18-44 years age group who have received their first dose

<https://www.tribuneindia.com/news/coronavirus/covid-vaccine-doses-administered-in-country-crosses-20-crore-258290>

Covid vaccine doses administered in country crosses 20 crore

Covid vaccine doses administered in country crosses 20 crore. PTI

In a significant landmark, the cumulative Covid vaccine doses administered in the country has crossed 20 crore, the Union health ministry said on Tuesday.

In the age group of 18-44 years, the ministry said, 9,42,796 people received their first vaccine dose on Tuesday, and cumulatively, 1,28,74,546 have received vaccine doses across the country since the start of the phase-3 of the vaccination drive. Bihar, Rajasthan and Uttar Pradesh have administered to more than 10 lakh beneficiaries in the 18-44 age group their first dose of Covid vaccine, it said.

The country has administered 20,04,94,991 vaccine doses so far, as per the 7 pm provisional report, the ministry said. The total of 20,04,94,991 includes 97,94,835 healthcare workers (HCWs) who have taken their first dose and 67,28,443 HCWs who have taken their second dose, and 1,51,62,077 frontline workers (FLWs) who have received their first dose, 83,77,270 FLWs who have taken their second dose.

There are 1,28,74,546 people in the 18-44 years age group who have received their first dose. Besides them, 6,20,47,952 and 1,00,24,157 beneficiaries in the 45-60 years category have been administered their first and second doses respectively, while 5,71,19,900 and 1,83,65,811 beneficiaries above 60 years have taken their first and second doses respectively, the ministry said.

The ministry said that vaccination is an integral pillar of the comprehensive strategy for containment and management of the Covid pandemic, along with test, track, treat and Covid appropriate behaviour. The vaccination exercise as a tool to protect the most vulnerable population groups in the country from Covid continues to be regularly reviewed and monitored at the highest level, it said. PTI

Covid-19: What you need to know today (Hindustan Times: 20210528)

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

Covax, launched by WHO, the Coalition for Epidemic Preparedness, and GAVI, the Vaccine Alliance, to ensure equitable access to coronavirus disease vaccines, is in a bind. Thus far, it has shipped 72 million shots, 166 million short of its May-end target. That's a fraction of the around two billion vaccine doses shipped worldwide. By the end of June, Covax will be around 190 million doses short of its target, according to Covax chief Seth Berkley (as cited in an article in Science). The main reason for this is the facility's dependence on Serum Institute of India (SII), which makes Covishield, its version of the AstraZeneca/Oxford vaccine, and which has had to deal with an exponential surge of infections in India, where 16 million of the approximately 27 million reported cases of Covid-19 (almost 60%) have been recorded since March 1. India's flawed vaccine strategy – there seem to have been either delays or mistakes in demand estimation, capacity assessment, approvals, orders – isn't hurting just it, but also the

world, but enough has been written about that. The big question, both local and global, about vaccine supply is: What now?

The same Science article directed me to a background paper for a March summit organised by Chatham House, Covax, and others, that pointed to the potential availability of up to 14 billion doses of the vaccine in the current year. That would mean another 12 billion doses till the end of the year. Even accounting for at least some manufacturers facing production issues of the sort we now know they can, and excluding vaccines for which reliable efficacy data isn't available – let's assume that knocks five billion doses off the number, taking it to seven billion – that's substantial, although it is still nowhere close to the number the world needs. Then, it was always clear that not everyone in the world was going to get vaccinated this year, and the availability of a billion doses a month for the next seven months isn't an insubstantial achievement. Some of these will no doubt find their way to India.

India has already put out an estimate on the number of vaccines that will be available between August and December – a staggering 2.17 billion doses. Discounting for production issues, and excluding vaccines that are still in trials, this number, too, will likely come down significantly. The Ken, for instance, has estimated actual availability at 1.09 billion. Reuters reported that there could be a substantial shortfall, with SII alone producing 27% fewer doses of Covishield in that period than the 750 million listed by the government. And while Bharat Biotech claims to have raised its manufacturing capacity of Covaxin to 500 million doses a month from April, that is yet to reflect in the availability of vaccines (although things are expected to improve from July). Still, assuming rapid approvals, and the application of learnings from the first few phases of the vaccine drive, it is possible that the supply of vaccines between now and the end of the year will be around 1.5 billion doses.

It's important, however, as I've previously suggested in this column, that everyone know exactly how many vaccines are available to each state in a month -- from the Central quota, from the state quota (as determined by the Centre), and in private sector hospitals. It's also important for the Centre and the states to stagger and prioritise vaccinations based on not just supplies, but other factors (vulnerability of the population could be one), and communicate this clearly. Once there is clarity on availability, prioritisation, and scheduling, much of the anxiety that is being seen in urban areas around access to vaccines should reduce. In rural areas, based on HT's own reporting, it is clear that vaccine hesitancy is still a problem that needs to be addressed. At the current rate, it is clear that India will miss its target of completely vaccinating 300 million people by the end of July by at least 30% (perhaps more). The fact that this has happened despite an opening up of the vaccine drive, on April 1, and subsequently on May 1, is cause enough for a rethink in strategy.

Black fungus now an epidemic

Black fungus now an epidemic, govt to be informed of all cases Hindustan Times: 20210528

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

Doctors tend to a patient at the Covid-19 care centre at Rakabganj gurdwara. Sanchit Khanna/HT PHOTO

New Delhi : The Delhi government on Thursday declared mucormycosis an epidemic and made it mandatory for all health care institutions in the city to report suspected and confirmed cases of the infection to them, amid a sharp spike in incidences of the fungal infection over the past few weeks as a complication among patients with Covid-19.

The move comes a week after the Centre urged all states to categorise the infection as a notifiable disease after an increase in cases following the second wave of Covid-19 in April.

Delhi chief minister Arvind Kejriwal on Wednesday said over 620 patients are being treated for mucormycosis, known commonly as black fungus, in city hospitals, and flagged a severe shortage of Amphotericin-B, the only last-line drug used to treat the fungal infection.

Instances of black fungus are extremely rare, and major hospitals in the Capital like the All India Institute of Medical Sciences (AIIMS) and Sir Ganga Ram Hospital see between six and 15 cases of the infection in an entire year, usually.

The Delhi Epidemic Diseases (Mucormycosis) Regulations 2021, which will remain in force for a year, forbid any organisation from “spreading information or material” or using “print or electronic or any other form of media for mucormycosis” without prior permission from the health department.

This means that hospitals will not be allowed to share, without approval, details about infections and the number of cases with the press. However, it is unclear whether rule this will cover requests for medicines and other information put out on the social media.

As of Tuesday, the city received 3,850 vials of Amphotericin-B, against a requirement of over 30,000 doses a week, said senior officials in Delhi’s health department.

The Delhi government estimates that the city will need around 100,000 doses of the medicine over the next two months.

To help address these shortages, the Delhi high court on Thursday allowed the duty free import of Amphotericin-B, on furnishing a bond by the importers till the Centre takes a decision on the tax waiver.

The regulations, Dr Nutan Mundeja, Delhi's director general of health services, said all health care facilities in the Capital must follow guidelines issued by the Union health ministry and the Indian Council of Medical Research (ICMR) on screening, diagnosis, and management of mucormycosis.

The order also mandates that a committee be constituted under every chief district medical officer (CDMO) comprising doctors specialising in internal medicine, ophthalmology, ENT, as well as epidemiologists to review instances of individuals or organisations disobeying the order.

In the event the regulations are flouted, the district magistrate concerned will issue a notice and ask for a response within a fixed period. If a reply is not received or found to be unsatisfactory, action can be taken under Section 188 of the Indian Penal Code that allows for imprisonment up to six months or a fine of ₹1,000 fine or both for disobeying a public servant's order.

Mucormycosis mainly affects those who are severely immunocompromised, have uncontrolled diabetes, have had Covid-19, and were treated using steroids. It mainly affects the mouth, nose, eye and later spreads to the brain. It can kill almost half the people it infects if left untreated.

“The high number of cases could be because there was no glucose control in patients during the pandemic. Also, steroids were used in high quantities when there was a shortage of oxygen. And, we are yet to study the immune dysregulation caused by the new variants of Sars-CoV-2 and whether it is different from the old ones,” said Dr Arunaloke Chakrabarti, head of the department of microbiology at Post Graduate Institute of Medical Education & Research in Chandigarh.

■ 2.11L fresh cases, 3,847 die in 24 hrs ■ 'Mixed vaccine' trials likely

Keep Covid-19 norms in force till June 30, Centre tells states, UTs

VINEETA PANDEY
NEW DELHI, MAY 27

With Covid-19 cases still significantly high and the virus now spreading into rural areas, the Centre on Thursday directed all the states and Union territories to continue the ongoing Covid-19 guidelines till June 30 and go in for "intensive and local containment measures" in districts that are reporting a high count. In the past 24 hours, 2.11 lakh fresh Covid-19 cases and 3,847 deaths from the deadly virus were reported across India.

In a fresh order, Union home secretary Ajay Bhalla said strict implementation of the containment and other measures had led to a fall in new and active cases in a majority of states/UTs, barring some areas in the



A health worker feeds a Covid-19 patient inside Dhanvantri Covid-19 hospital in Ahmedabad on Thursday. — PTI

Northeast and South India. He said that in spite of the declining trend, the number of active cases was still very high, which was why the containment measures needed to be implemented strictly.

"Any relaxation by states/UTs may be considered at an appropriate

time, in a graded manner, after assessing the local situation, requirements and resources," Mr Bhalla said. The order comes as some states have started easing the strict restrictions imposed when the cases were very high.

Delhi, which has been

■ Turn to Page 4

Delhi Lt Governor declares black fungus epidemic

AGE CORRESPONDENT
NEW DELHI MAY 27

The Delhi government on Thursday declared black fungus as an epidemic. With the city witnessing over 600 cases of Black fungus, Lt Governor Anil Baijal issued regulations declaring it an epidemic under the Epidemic Diseases Act to contain and manage cases of the deadly mucormycosis in the city.

All healthcare facilities in Delhi will follow guidelines for screening, diagnosis and management of black fungus issued by the health ministry.

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Post-pandemic world

In the post-pandemic world, we must prioritise people (The Indian Express: 20210528)

<https://indianexpress.com/article/opinion/columns/in-the-post-pandemic-world-we-must-prioritise-people-poverty-7333341/>

Investments to eradicate poverty and build a resilient ecosystem will deliver among the highest returns to the economy in both the near and long term.

A health worker screens traveler to test for Covid-19 at a train station in Mumbai. (AP Photo/Rajanish kakade)

The current pandemic has offered mankind another opportunity to mend its ways. The first warning shot was the seminal work done by the “Club of Rome” in 1972. The forum realised that the human species, unlike other living beings, was consuming not for its needs but for its greed. It concluded that if humanity continues on this manic path, it will destroy mother earth. It captured the results of its scientific analysis in a seminal publication – Limits to Growth. The insights from this work informed the many successive UN Summits on environment and development issues that led to the global adoption of the Sustainable Development Goals by the leaders of 193 nations in 2015.

What do we need to do now?

The political leadership of the world must henceforth place the wellbeing of people and the productivity of nature at the core of their post-Covid-19 economic recovery plans. This is the quickest and surest way to revive the health of our fellow citizens, speed up revitalisation of our economies, and accelerate job creation.

Beyond the current pandemic, our world faces many deeper, more intractable and persistent crises. These range from those manifested locally, such as pervasive poverty and marginalisation, pollution and waste, land-use change, and species/habitat loss; through the national and regional ones, such as deforestation, human and wildlife trafficking, unsustainable trade practices and resource depletion; to the big global issues, such as the threats to the climate, biodiversity and oceans – and collapsing international financial systems.

There is a growing recognition that the pandemic, like these other challenges, is the consequence of the lopsided value systems and institutional arrangements that underlie our current economic policies and practices. If we return to “business as usual”, it is impossible to imagine the world achieving the levels of social justice, resource efficiency and environmental health that our nations are committed to.

To build a new global economy that ensures an equitable and environmentally sustainable future for all, nations, big or small, will have to pay much greater attention to facilitate systemic changes by building up strong civil societies, with research capacities for innovating suitable solutions. To achieve these complex but interlinked goals for a future global order, concurrent actions are therefore necessary.

First, put in place a new kind of global solidarity and international cooperation for restoring the balance between people and nature and to build future resilience against existential threats. Strong new institutional networks and nodal agencies need to be built up at regional and national levels to provide the bridge between global entities such as WHO, FAO, Red Cross/Red Crescent, etc., and local institutions.

Second, ensure that national and global commitments are met with alacrity for net-zero emissions, conservation of biodiversity, resource efficiency, reduction of wastes and pollution and maximise social and economic equity. To achieve these goals, there is a need to introduce serious policies and practices to replace fossil fuels with renewable energy; protect nature and restore our forests, rivers and degraded lands; and adopt nature-based solutions to replace mechanised, resource-guzzling ones.

Three, create safe and sustainable food systems by adopting regenerative agriculture, revitalise local production systems and shift to a more inclusive, green and circular economy, to secure the basic needs of food, water, energy and soil supplies, for all. This will require establishing a better balance between the income that farmers get and the prices that consumers pay.

Four, ensure that post Covid-19, exit and recovery cum fiscal stimulus strategies give priority to socially just, low-carbon, regenerative circular economic development, rather than bail-out policies that only serve to subsidise unsustainable and polluting industries. It has to be appreciated that investments focussed on eradicating poverty and building a resilient ecosystem will deliver among the highest returns to the economy in both the near and long term. They are also the lowest cost means for preventing future disasters, natural or manmade.

Therefore, there is a strong business and economic case for taking a proactive, bottom-up systemic approach to addressing such planetary emergencies which, unfortunately, can be expected to occur with ever greater frequency and ferocity.

It needs to be highlighted that it is not finances but the resolve of the leadership to achieve the above objectives that will be fundamental. At the onset of the Covid-19 pandemic, within weeks, governments all over the world were able to dig out financial resources to deal with the challenge, in amounts that are several orders of magnitude larger than what had been asked for over the past decades for mitigating existential threats — climate stabilisation, biodiversity conservation, ocean health and reversing desertification. Or for programmes to improve human services such as healthcare, nutrition and education. It appears that mobilising resources to deal with threats to the concerns of the voiceless is much harder to do. For everyone's sake, this must change before it is too late to avoid irreversible damage to the lives of people — and even to life on earth.

Black Fungi (Hindustan: 20210528)

https://epaper.livehindustan.com/imageview/834444_105913306_4_1_28-05-2021_0_i_1_sf.html

दिल्ली में ब्लैक फंगस को महामारी घोषित किया

नई दिल्ली | वरिष्ठ संवाददाता

संकट

दिल्ली सरकार ने गुरुवार को ब्लैक फंगस को महामारी घोषित कर दिया। इसके लिए औपचारिक नोटिफिकेशन जारी कर दिया गया है। राजधानी में ब्लैक फंगस के 600 से ज्यादा मामले मिले हैं।

इस बीच मुख्यमंत्री अरविंद केजरीवाल ने कहा कि ब्लैक फंगस के करीब 620 केस हो चुके हैं, लेकिन हमें दवा नहीं मिल रही है। यदि 600 मरीज हैं तो प्रतिदिन 3500 इंजेक्शन चाहिए, लेकिन 400 इंजेक्शन ही मिल रहे हैं।

- दिल्ली सरकार ने औपचारिक नोटिफिकेशन जारी किया
- राजधानी में म्यूकर माइकोसिस के मिले चुके हैं 620 मामले

इससे ब्लैक फंगस के मरीजों के इलाज में दिक्कत आ रही है। वहीं, शुक्रवार को आपदा प्रबंधन प्राधिकरण की अहम बैठक होनी है जिसमें कोरोना की स्थिति और टीकाकरण पर चर्चा होगी। इसमें अनलॉक पर भी चर्चा हो सकती है।

Medicine (Hindustan: 20210528)

https://epaper.livehindustan.com/imageview_834445_107213432_4_1_28-05-2021_2_i_1_sf.html

कोरोना की दवाएं सुलभ, ब्लैक फंगस की दुर्लभ



दिल्ली में कोरोना संक्रमण के इलाज में इस्तेमाल होने वाली दवाओं की किल्लत कम हो गई है। अस्पतालों में मरीजों को रेमडेसिविर उपलब्ध है तो मेडिकल स्टोर पर आइवरमेक्टिन और दूसरी एंटीबायोटिक दवाएं भी मिल रही हैं। लेकिन, कोरोना के बाद एक बड़ी परेशानी बनकर उभरी बीमारी ब्लैक फंगस (क्यूकोर माइकोसिस) के इलाज में इस्तेमाल होने वाली दवाएं नहीं मिल रही हैं। इसके लिए अब भी लोगों को भटकना पड़ रहा है। प्रस्तुत है हिन्दुस्तान टीम की रिपोर्ट...

मेडरोल दुकानों में आसानी से उपलब्ध

मयूर विहार

दिल्ली के मयूर विहार फेस 1 इलाके में कुछ दिन पहले तक कोरोना के लक्षण के साथ दी जाने वाली कुछ एंटीबायोटिक दवाएं और स्टेरॉइड उपलब्ध नहीं थे। यहां रहने वाले लोगों को ग्रीन पार्क और एम्स के पास से आइवरमेक्टिन और मेडरोल जैसी दवाएं लानी पड़ रही थीं।

हिन्दुस्तान टीम ने गुरुवार को पड़ताल की तो पता चला कि मेडिकल स्टोरों पर ये दवाएं अब उपलब्ध हैं। मयूर विहार स्थित आपोलो फार्मसी पर अब स्टेरॉइड मेडरोल और एंटीबायोटिक दवा आइवरमेक्टिन भी उपलब्ध है। इसके नजदीक ही एक अन्य मेडिकल स्टोर पर भी कोरोना के इलाज में इस्तेमाल होने वाली दवाएं उपलब्ध थीं।



कोरोना की दवाएं अब दुकानों पर उपलब्ध हैं। लेकिन ब्लैक फंगस की दवाओं के लिए लोग भटक रहे हैं। • पी. जाकिर

सीमा शुल्क के बगैर दवा के आयात की अनुमति

नई दिल्ली (प्र.सं)। ब्लैक फंगस के मरीजों के इलाज में इस्तेमाल होने वाली दवा एम्फोटेरिसिन बी. आयात करने पर सीमा शुल्क का भुगतान नहीं करना होगा। उच्च न्यायालय ने दवा की भारी कमी को देखते हुए गुरुवार को सीमा शुल्क मुक्त आयात की अनुमति दे दी है। जस्टिस विपिन साची और जसमीत सिंह की पीठ ने कहा कि दवा पर सीमा शुल्क में केंद्र सरकार द्वारा छूट देने के लिए अंतिम फैसला लिए जाने तक अयातकों द्वारा अनुबंध पत्र के आधार पर सीमा शुल्क का भुगतान किए बगैर दवा का आयात कर सकते हैं। पीठ ने कहा कि दवा की मांग और आपूर्ति में अंतर हर घंटे बढ़ता जा रहा है। साथ ही कहा कि मरीजों को समय पर दवा मुहैया कराने के लिए केंद्र सरकार को युद्ध स्तर पर कदम उठाने की जरूरत है।

किसी एक को नहीं दी जा सकती तरजीह

नई दिल्ली (प्र.सं)। उच्च न्यायालय ने गुरुवार को कहा कि प्रत्येक मरीज को जीवन और सम्मान से जीने का अधिकार है, ऐसे में किसी को भी ब्लैक फंगस की दवा या इलाज में दूसरे मरीजों के तुलना में प्राथमिकता नहीं दी जा सकती। न्यायालय ने कहा है कि यह निश्चित है कि याचिकाकर्ता ब्लैक फंगस से पीड़ित अपने दादा के लिए सरकार और मंगाराम अस्पताल को उचित संख्या में एम्फोटेरिसिन बी इंजेक्शन मुहैया कराने का निर्देश चाहती है, लेकिन अन्य मरीजों के मुकाबले इलाज के लिए प्राथमिकता नहीं चाहती है। पीठ ने अधिवक्ता इकरा खालिद की याचिका पर सुनवाई के दौरान यह टिप्पणी की। इकरा के 80 वर्षीय दादा ब्लैक फंगस से पीड़ित हैं।



Children Vaccine (Hindustan: 20210528)

https://epaper.livehindustan.com/imageview_834446_106989700_4_1_28-05-2021_3_i_1_sf.html

बच्चों के लिए जल्द वैक्सीन खरीदे केंद्र : केजरीवाल

नई दिल्ली | वरिष्ठ संवाददाता

मुख्यमंत्री अरविंद केजरीवाल ने बच्चों को टीका लगाने के लिए जल्द से जल्द फाइजर का कोविड-19 रोधी टीका खरीदने की मांग की है। उन्होंने यह मांग तब की जब इससे पहले अमेरिकी दवा कंपनी ने भारत में अपने टीकों को जल्द से जल्द मंजूरी दिए जाने की मांग की।

मुख्यमंत्री अरविंद केजरीवाल ने कंपनी द्वारा जल्द ही इसे मंजूरी दिए जाने संबंधी एक खबर का हवाला देते हुए ट्वीट करते हुए कहा कि हमें अपने बच्चों के लिए जल्द से जल्द इस टीके को खरीदना चाहिए। दिल्ली के मुख्यमंत्री आगामी महीनों में कोरोना वायरस की तीसरी लहर का बच्चों पर असर पड़ने की विशेषज्ञों की आशंका का हवाला देते हुए टीकों के उचित विकल्प तलाशने के लिए केंद्र सरकार से अनुरोध करते रहे हैं।

परीक्षा से पहले छात्रों और शिक्षकों को लगाया जाए कोविड टीका : दिल्ली सरकार ने केंद्र को यह भी सुझाव दिया कि अगर वह 12वीं कक्षा की बोर्ड की

देश के अंदर इस्तेमाल करने की इजाजत हो

केजरीवाल ने कहा कि जितनी भी अंतरराष्ट्रीय स्तर पर वैक्सीन उपलब्ध हैं, सबको हमारे देश के अंदर इस्तेमाल करने की इजाजत हो, खासतौर पर बच्चों के लिए जो उपयुक्त वैक्सीन मिल रही हैं। ज्यादा से ज्यादा वैक्सीन को खरीद कर हमारे बच्चों को लगाना चाहिए।

परीक्षा कराने का फैसला करती है तो छात्रों तथा शिक्षकों को टीके लगाए जाए।

पांच करोड़ खुराक देने की पेशकश : गौरतलब

है कि फाइजर ने हाल ही में भारत सरकार के अधिकारियों के साथ बातचीत की थी। उसने जुलाई और अक्टूबर के बीच टीकों की पांच करोड़ खुराक देने की पेशकश की है।

आमने



