



a weekly publication from ICMR-NIRT Library

2021 | Vol.4 | Issue No.50



news **bulletin** Library



NEWS BULLETIN

13 Dec 2021 | Vol.4 | #50

A weekly publication from NIRT Library

THE HINDU

'Highly unlikely' existing vaccines will fail against Omicron: WHO

GENEVA, DECEMBER 08, 2021 08:34 ISI

In the fight against all COVID-19 variants, WHO emergencies director Michael Ryan said, "the best weapon we have right now is to get vaccinated."



Omicron does not appear to cause more severe disease than previous COVID-19 variants, and is "highly unlikely" to fully dodge vaccine protections, a top WHO official said.

The World Health Organization's second-in-command, said that while a lot remained to be learned about the new, heavily mutated variant of COVID-19, preliminary data indicated it did not make people sicker than Delta and other strains.

THE TIMES OF INDIA

ICMR designs kit to detect new Covid-19 variant Omicron in 2 hours

ANI | Dec 11, 2021, 08.16 PM IST

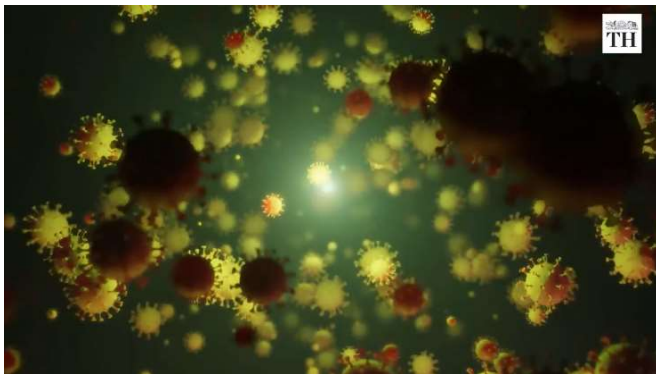


DIBRUGARH: Amid rising cases of the new Covid-19 variant Omicron, the Indian Council of Medical Research (ICMR) in Dibrugarh, Assam has designed a testing kit that will be able to detect the virus in two hours time.

The development has come at a time when the Omicron variant is making its presence felt in various states, with at least 33 cases being detected in the country so far.

Till now it was a real concern for the authorities to quickly detect the variant. It used to take...

Continued in page no.41



"We have highly effective vaccines that have proved effective against all the variants so far, in terms of severe disease and hospitalisation," the 56-year-old epidemiologist and former trauma surgeon said.



"There's no reason to expect that it wouldn't be so" for Omicron, he said, pointing to early data from South Africa where the variant was first detected that "suggest the vaccine at least is holding up in protection terms".

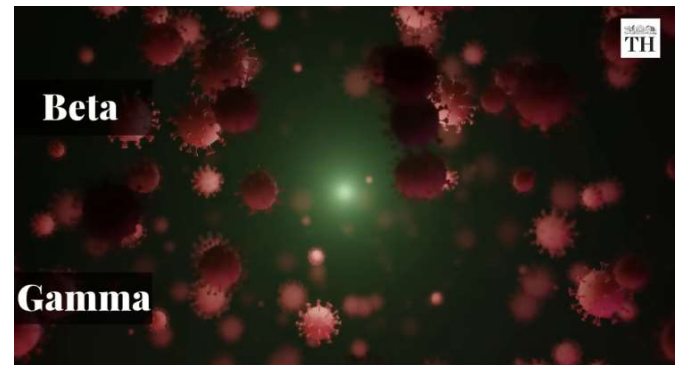
Vaccination is the best weapon

Mr. Ryan acknowledged it was possible that the existing vaccines might prove less effective against Omicron, which counts more than 30 mutations on the spike protein that dots the



surface of the coronavirus and allows it to invade cells.

But he said it was "highly unlikely" it would be able to evade vaccine protections altogether.



"We have to confirm if there's any lapse in that protection, but I would expect to see some protection there," he said.

"The preliminary data from South Africa wouldn't indicate that we will have a catastrophic loss of efficacy. In fact, the opposite at the moment," Mr. Ryan said.

In the fight against all COVID-19 variants, he said, "the best weapon we have right now is to get vaccinated."

Two weeks after first being identified, Omicron has been found in dozens of countries around the world.

Early data from South Africa indicates that the new variant is likely more transmissible than previous variants, Mr. Ryan said, adding that this was not a surprise.

"When any new variant emerges, it will tend to be more transmissible, because it's got to compete with previous variants," he said.

Same rules for new variant

Mr. Ryan said one could expect Omicron to gradually replace Delta as the dominant strain.

But he pointed out that Omicron had so far been seen spreading especially quickly in South Africa,

where Delta had waned, and may just be “exploiting a gap in the transmission of Delta”.



There are also indications that Omicron is better at infecting people who have been vaccinated or already had COVID-19.

“There is some evidence to suggest that reinfection with Omicron is more common than it was with previous waves or previous variants,” Mr. Ryan said.

But, “we’re particularly interested in seeing not whether you can be reinfected with Omicron, but whether any new infection is more or less severe,” he said.

He said that, as the current COVID-19 vaccines aim to prevent severe disease but do not necessarily protect against simply contracting the virus, reinfections with mild or no symptoms were of lesser concern.

In any case, Mr. Ryan said, despite its mutations, the new variant was still COVID-19, and should be fought with the same measures, including vaccines, masks and physical distancing.

“The virus hasn’t changed its nature. It may have changed in terms of its efficiency, but it hasn’t changed the game entirely,” he said.

“The rules of the game are still the same.”



Explained: What is the difference between a booster shot and an additional Covid-19 vaccine?

While the additional Covid dose would be a “full” dose of the vaccine, booster shots being offered right now have a lesser volume, since the third dose is only supposed to increase the efficacy range.

Written by [Rounak Bagchi](#) , Edited by Explained Desk | Kolkata | Updated: December 7, 2021 8:21:19 am

With the [Omicron](#) variant of [Covid-19](#) spreading across the country, the need for a booster shot or an additional jab may feel more urgent than ever.

The National Technical Advisory Group on Immunisation (NTAGI) will be meeting on Monday to deliberate upon issues of child immunisation and administering additional doses of Covid-19 vaccine to the immunocompromised. The expert panel is also expected to come up with a comprehensive policy for both the additional Covid-19 vaccine dose and child immunisation, as informed by the chairman of India’s Covid-19 task force, NK Arora.

“The policy will deal with who will require the vaccine, when and how. This needs to be seen in the context that a new variant is coming and with time, we will get more information about it. Therefore, the relevance and effectiveness of the current vaccines will also become apparent with time only,” Arora had said.

What is an additional dose of a Covid-19 vaccine?

An additional dose, originally called a third dose, is given to people with moderately or severely compromised immune systems to improve their response to the initial vaccine series. The term “third dose” was used to refer to additional doses for the two mRNA vaccines, but now the term is “additional dose” because those who received a Johnson & Johnson “one dose” vaccine may also be eligible for a dose based on their immune systems.

People with weakened immune systems might not develop enough immunity after vaccination with two doses of a vaccine. An additional dose, thus, might improve their protection against the novel [coronavirus](#).

What is a booster shot?

A booster shot is nothing but a means of strengthening one's immune system against a particular pathogen. It may be exactly the same original vaccine, in which case its goal is to increase the magnitude of protection by producing more antibodies.

The booster shot is an additional dose after the protection provided by the original shot(s) has started to decrease over time. Typically, you would get a booster after the immunity from the initial dose(s) naturally starts to wane. The booster is designed to help people maintain their level of immunity for longer. What a booster shot does is that it gives the memory cells the crucial signal to re-engage when the virus attacks.

So, what is the difference between the two?

A Covid-19 booster is given when a person has completed their vaccine series, and protection against the virus has decreased over time. Depending on the original series you had, some details will vary.

An additional dose, however, is administered to people with moderately to severely compromised immune systems. This additional

dose is intended to improve immunocompromised people's response to their initial vaccine series. Experts say that offering such beneficiaries a third dose could help them match up an immune response similar to generalized, healthy populations.

Third Covid-19 doses are thus offered to those with immune vulnerabilities, which could possibly include [cancer](#) patients (those in remission or undergoing chemotherapy), or those who have received an organ transplant. These can only be offered on a case-by-case basis, and may not exactly be subject to public rollout.

Are there differences in their dosage?

While the additional Covid dose would be a “full” dose of the vaccine, booster shots being offered right now have a lesser volume, since the third dose is only supposed to increase the efficacy range.

Experts have also suggested that there could be some differences in the side-effects one could expect. With booster shots, we have come to know about a higher intensity or symptoms similar to what one may go through with the second dose. However, it's yet unknown how severe, or safe a third dose could be.



'Looked like a Covid hotspot': Delhi airport struggles with new protocol

While the central government and airport officials have ramped up services and deployment to deal with rising Omicron cases, incoming passengers, especially those from 'at-risk' countries, said they are forced to wait at least three-six hours.

Close to a week after new guidelines came into effect at the Delhi airport against the backdrop of a new Covid variant, international passengers continued to complain of chaos, crowding, and



long wait times to get tested. Several passengers who arrived early on Monday also called the airport a potential 'Covid hotspot' and claimed there are no provisions for food, water or charging points.

Chaos at Delhi airport on Monday.

While the central government and airport officials have ramped up services and deployment to deal with rising [Omicron](#) cases, incoming passengers, especially those from 'at-risk' countries, said they are forced to wait at least three-six hours.

Jasveer Kaur, a 55-year-old teacher from Jalandhar, returned to Delhi from New York, where she had gone to meet her son and daughter. Speaking to [The Indian Express](#), she said, "Since the US isn't on the 'at-risk' countries list, I thought there won't be much trouble at the airport. However, officials asked me to take a Covid test. I told them I had test reports from the US, but I was made to stand in a long line for almost two hours. It took another 90 minutes for the results. I only had a small bottle of water. Everyone was shouting and pushing each other, my daughter kept calling me. My brother, who came to pick me up, had to wait nearly four

hours. It's worse than a train station inside. We all could be infected because of the crowd."

Under the guidelines, all passengers coming from 'at-risk' countries have to compulsorily undergo RT-PCR tests and 5% of passengers arriving from other countries would have to take the test on a random basis. The passengers will have to wait for the results before leaving the airport or taking a connecting flight.



Under the guidelines, all passengers coming from 'at-risk' countries have to compulsorily undergo RT-PCR tests and 5% of passengers arriving from other countries would have to take the test on a random basis.

Manish Jain, a businessman from Gurgaon, reached Delhi around 4 am. He said he waited for six hours at the airport to get his bags and the test result. "I have never seen such scenes at the airport. Our flight from London landed around 3-4 am. Officials were shouting at us. I wanted to get the regular RT-PCR test done but I was told I would have to wait for six hours. I spent a lot of money and opted for the rapid test. I had to stand in long lines for hours. It looked like a Covid hotspot. Nobody was following [social distancing](#)... There are 10-12 counters at Terminal 3 and most of their payment machines don't work..." he said.

A foreign national from Italy, who refused to be named, too said she and her friend had to wait at the airport for almost six hours. "We knew the situation was bad but didn't expect this. The airport lounge was like a circus. My friend lost her handbag while trying to find a charger. People

were fighting with each other over long queues and luggage. I wanted to sit and rest but we had no time. We were running from one counter to another to get tested. Eventually, I lost track of time and was praying to get out. A woman gave me some food after she spotted me standing near the food counter. It was exhausting," she said.

20 special counters in the arrival section for those who have pre-booked their tests to streamline the process. Since a majority of passengers are opting for rapid tests, officials have installed 120 rapid PCR test machines as well.

"The Delhi airport has been making continuous enhancements in infrastructure and processes to manage the new screening norms for passengers arriving from 'at-risk' countries. The number of passengers pre-booking their tests on arrival has been going up every day... The tests are being completed quickly to minimise waiting time. The current time taken – from sample collection to providing reports – stands at 60 minutes for rapid-PCR test and five hours for RT-PCR tests. We are also working closely with the immigration authorities to facilitate swift movement of passengers. For those waiting for their test results, seating arrangements have been vastly expanded and food counters have been made available in the waiting area," said CEO-DIAL Videh Kumar Jaipuria.

Delhi had reported its first Omicron case on Sunday – a passenger who arrived in the capital last week, with a travel history from Tanzania, Johannesburg, and Doha, has tested positive for the variant. He is undergoing treatment at Lok Nayak Hospital. According to Delhi Health Minister Satyendar Jain, 27 people from countries affected by the Omicron variant have been admitted at Lok Nayak Hospital so far. Of these, 17 have tested positive for Covid but only one of them has been infected by the Omicron variant. He said that most of the people admitted are asymptomatic.



ஓமிக்ரான் மாறுபாடு குறித்த உலக சுகாதார அமைப்பின் சமீபத்திய அறிக்கை கூறுவது என்ன?

ஓமிக்ரான் தொற்று குறித்த பல்வேறு சந்தேகங்களுக்கு இன்னும் விடை தெரியவில்லை. ஆனால் வருகின்ற நாட்களில் அதிகப்படியான தரவுகள் நமக்கு கிடைக்கும் – WHO

Written By [WebDesk](#)

Updated: December 9, 2021 1:56:05 pm



WHO's latest report say on Omicron variant: கடந்த வாரம் கொரோனா தொற்று குறித்த புதிய அறிவிப்பில், ஏற்கனவே உலக நாடுகளில் இன்னும் டெல்டா மாறுபாடு பாதிப்புகளை ஏற்படுத்தி வருகின்ற நிலையில் ஓமிக்ரான் தொற்று தாக்கம் குறித்து உடனே முடிவுக்கு வந்துவிட இயலாது என்று கூறியது உலக சுகாதார நிறுவனம். ஓமிக்ரான் தொற்று குறித்த பல்வேறு சந்தேகங்களுக்கு இன்னும் விடை தெரியவில்லை. ஆனால் வருகின்ற நாட்களில் அதிகப்படியான தரவுகள் நமக்கு கிடைக்கும் என்றும் அது கூறியுள்ளது.

பரவும் தன்மை, மருத்துவ தீவிரம், மறுதொற்றின் ஆபத்து மற்றும் தடுப்பூசிகளின் சாத்தியமான தாக்கம் என ஓமிக்ரான் குறித்த நான்கு முக்கிய விசயங்களை அப்டேட் செய்துள்ளது உலக சுகாதார நிறுவனம்.

தொற்றுநோயியல் மீது ஒமிக்ரான் எத்தகைய தாக்கங்களை ஏற்படுத்தும் என்று WHO கூறியுள்ளது?

இந்த பிறழ்வு கண்டறியப்பட்ட தென்னாப்பிரிக்காவில் புதிய கொரோனா தொற்றுகள் அதிக அளவில் பதிவு செய்யப்பட்டு வருவதாக உலக சுகாதார நிறுவனம் கூறியுள்ளது. நவம்பர் 29 மற்றும் டிசம்பர் 5ம் தேதிக்கு மத்தியில் சுமார் 62,021 நபர்களுக்கு கொரோனா தொற்று ஏற்பட்டுள்ளது. இது முந்தையை வாரத்தைக் காட்டிலும் 111% அதிகமாகும். மேலும், கொரோனா பாசிட்டிவ் விகிதம் நவம்பர் 7ம் தேதி அன்று 1.2% ஆக இருந்த நிலையில் தற்போது அது 22.4% ஆக உறுதி செய்யப்பட்டுள்ளது.

தென்னாப்பிரிக்காவின் அண்டை நாடுகளான எஸ்வாதினி (1990%), ஜிம்பாப்வே (1361), மொசாம்பிக் (1,207%), நமீபியா (681%) மற்றும் லெசோத்தோவில் (219%) கொரோனா தொற்று பரவல் விகிதம் சமீப காலத்தில் அதிகரித்துள்ளது.

கொரோனாவிற்கு எதிராக தடுப்பூசி செலுத்திக் கொண்டவர்களின் விகிதம் இந்நாடுகளில் குறைவாகவே உள்ளது. நமீபியாவில் மொத்த மக்கள் தொகையில் வெறும் 12.1% மக்கள் மட்டுமே முழுமையாக தடுப்பூசி செலுத்திக் கொண்டனர். அதே நேரத்தில் லெசோத்தோவில் தடுப்பூசி செலுத்திக் கொண்டவர்களின் விகிதம் 26.7% ஆகும். தென்னாப்பிரிக்காவின் மக்கள் தொகையில் 25.2% மக்கள் மட்டுமே முழுமையாக தடுப்பூசி செலுத்திக் கொண்டனர் என்று உலக சுகாதார மையம் அறிவித்துள்ளது.

இந்த அதிகரிப்புகளின் இயக்கிகள் தெரியவில்லை என்றாலும், VOC அறிவிப்பைத் தொடர்ந்து மேம்படுத்தப்பட்ட சோதனையுடன் இணைந்து Omicron பரவுவது, பொது சுகாதாரம் மற்றும் சமூக நடவடிக்கைகளின் (PHSMs) தளர்வு மற்றும் துணை-உகந்த பங்கை வகிக்கிறது என்பது நம்பப்படுகிறது.

உலகளாவிய தரவுகளின் படி டிசம்பர் 7ம் தேதி அன்று, 57 நாடுகளில் ஒமிக்ரான் தொற்று கண்டறியப்பட்டுள்ளது என்று உலக சுகாதார அமைப்பு கூறியுள்ளது. ஆனாலும், முந்தைய டெல்டா பிறழ்வு பல்வேறு நாடுகளில் குறிப்பாக அமெரிக்கா மற்றும் ஐரோப்பிய நாடுகளில்

இன்னும் தொற்றுநோய்களை உருவாக்கி வருகின்ற சூழலில் ஒமிக்ரானின் தாக்கம் குறித்து விரைவில் முடிவுக்கு வர இயலாது என்று கூறியது.

தொற்றில் இதன் பங்கு எப்படி இருக்கும்?

ஏற்கனவே புழக்கத்தில் இருக்கும் பிறழ்வுகளைக் காட்டிலும் தற்போது உருவாகியுள்ள ஒமிக்ரானின் வளர்ச்சி அதிகமாக உள்ளது என்பதற்கான சான்றுகள் உள்ளன. ஆனால் அது அதிகப்படியான தொற்றினை பரப்புமா என்பது குறித்து முடிவு செய்ய தரவுகள் தேவை. SARS-CoV-2 நோய்த்தொற்றுகளில் 1% ஒமிக்ரான் மாறுபாட்டின் காரணமாக இருந்தால், அது ஐரோப்பாவில் ஆதிக்கம் செலுத்தும், புதிய தொற்றுநோய்களில் 50 சதவீதத்திற்கும் குறைவாகவே இருக்கும் என்ற ஒமிக்ரான் மீதான நோய் தடுப்பு மற்றும் கட்டுப்பாட்டுக்கான ஐரோப்பிய மையத்தின் முன்னறிவிப்பை இது சுட்டிக்காட்டுகிறது.

விரிவான க்ளஸ்டர் விசாரணைகள், தொடர்பு-தடமறிதல் மற்றும் வீட்டுப் பரிமாற்ற ஆய்வுகள் உட்பட நடந்துவரும் மற்றும் திட்டமிடப்பட்ட தொற்றுநோயியல் ஆய்வுகள், முன்பு தடுப்பூசி போடப்பட்ட அல்லது பாதிக்கப்பட்டவர்களிடமிருந்து நடுநிலைப்படுத்துதல் ஆய்வுகள் மற்றும் தடுப்பூசி செயல்திறன் பற்றிய ஆய்வுகள், அதிகரித்த பரவும் தன்மை மற்றும் நோயெதிர்ப்பு சக்தியிடம் இருந்து தப்பிக்கும் முறை பற்றிய நமது புரிதலை மேம்படுத்த உதவும்.

நோயின் தீவிரம் மற்றும் மறுதொற்றின் மீதான தாக்கம் என்னவாக இருக்கும்?

தற்போது தீவிரத் தன்மை குறித்த வரையறுக்கப்பட்ட தரவுகள் மட்டுமே உள்ளன. மேலும் ஒமிக்ரான் மாறுபாட்டின் மூலம் நோயின் தீவிரத்தன்மையில் ஏதேனும் மாற்றங்கள் உள்ளனவா என்பதை அறிவது தற்போது சவாலானது.

டிசம்பர் 6 ஆம் தேதி வரை, 18 ஐரோப்பிய ஒன்றிய நாடுகளில் அடையாளம் காணப்பட்ட 212 உறுதிப்படுத்தப்பட்ட நோயாளிகளிடம் இருந்து பெறப்பட்ட தரவுகளின் அடிப்படையில் நோயின் தீவிரத்தன்மை குறைவாகவும் லேசானதாவும் உள்ளது.

கோவிட்-19 காரணமாக தென்னாப்பிரிக்கா மருத்துவமனையில் அனுமதிக்கப்படும் விகிதமும் 82% வரை அதிகரித்துள்ளது. 502 முதல் 912 நபர்கள் வரை நவம்பர் 28 முதல் டிசம்பர் 4க்கு இடைப்பட்ட காலங்களில் அனுமதிக்கப்பட்டுள்ளனர். ஆனாலும், ஒமிக்ரான் தொற்றுடன் எத்தனை பேர் அனுமதிக்கப்பட்டுள்ளனர் என்பது இன்னும் தெரியாது என்று WHO கூறியுள்ளது.

டெல்டா மாறுபாட்டைக் காட்டிலும் தீவிரத்தன்மை சமமாக இருந்தாலும் அல்லது குறைவாக இருந்தாலும் கூட, அதிகமான மக்கள் பாதிக்கப்பட்டால் மருத்துவமனையில் சேர்க்கப்படுவது அதிகரிக்கும் என்றும், வழக்கு எண்ணிக்கை மற்றும் இறப்பு எண்ணிக்கைகளுக்கு இடைப்பட்ட காலம் அதிகரிக்கும் என்றும் WHO கூறியுள்ளது.

மீண்டும் நோய்த்தொற்றில், ஒமிக்ரான் மாறுபாட்டில் உள்ள பிறழ்வுகள் ஆன்டிபாடிகளின் நடுநிலைப்படுத்தும் செயல்பாட்டைக் குறைக்கலாம், இதன் விளைவாக இயற்கையான நோய் எதிர்ப்பு சக்தியிலிருந்து பாதுகாப்பைக் குறைக்கலாம் என்று முதன்மை பகுப்பாய்வு முடிவுகள் தெரிவிக்கின்றன.

இதனால் தான் அதிக அளவில் நோய் எதிர்ப்பு சக்தி கொண்ட ஆப்பிரிக்கர்கள் மத்தியில் இந்த தொற்று அதிக அளவில் பரவி வருகிறது. வயது வந்தவர்களில் 35% பேர் தற்போது கோவிட்-19 தடுப்பூசியை செலுத்திக் கொண்டனர். சமீபத்திய தொற்றுநோயியல் ஆய்வுகள் மற்றும் மாடலிங் படி, கடந்தகால நோய்த்தொற்றுகள் காரணமாக இதில் செரோபிரேவலன்ஸ் அளவுகள் 60-80% வரை அதிகமாக இருக்கும் என்று மதிப்பிடப்பட்டுள்ளது.

தென்னாப்பிரிக்காவில் இருந்து ஆரம்ப மாடலிங் ஆய்வுகள் மீண்டும் தொற்றுநோய்க்கான அதிக ஆபத்தைக் கண்டறிந்துள்ளதாக WHO கூறியது. இருப்பினும், தடுப்பூசி போடப்பட்டவர்களைத் தொற்றும் அல்லது மீண்டும் தொற்றும் ஒமிக்ரான் மாறுபாட்டின் திறன், முன்னேற்றங்கள் அல்லது மறு-தொற்றுநோய்களின் தீவிரத்தை கண்டறிவது உட்பட இதை உறுதிப்படுத்த மேலும் ஆய்வுகள் தேவை.

ஒமிக்ரான் மாறுபாடு சிகிச்சை மற்றும் தடுப்பூசிகளை எப்படி பாதிக்கலாம்?

கடுமையான நோய்களால் பாதிக்கப்பட்ட நோயாளிகளின் நிர்வாகத்தில் Interleukin-6 ஏற்பி தடுப்பான்கள் மற்றும் கார்டிகோஸ்டிராய்டுகள் தொடர்ந்து பயனுள்ளதாக இருக்கும் என்று WHO மீண்டும் வலியுறுத்தியது. தடுப்பூசிகளால் பெறப்பட்ட நோய் எதிர்ப்பு சக்தி மற்றும் கூடுதல் தடுப்பூசி அளவுகளின் பயன்பாடு உட்பட தடுப்பூசி செயல்திறனை பாதிக்குமா, அவற்றின் பாதுகாப்பை குறைக்குமா என்பதை ஆய்வு செய்ய கூடுதல் தரவுகள் தேவை என்றும் அதில் குறிப்பிடப்பட்டுள்ளது



விமான பயணிகளுக்கான ஆர்டிபிசிஆர் சோதனை; முடிவை 3 மணி நேரத்தில் அறியலாம்: விமான நிலைய இயக்குநர் சரத்குமார் தகவல்

Published : 10 Dec 2021 03:06 am

விமானப்பயணிகளுக்கான [ஆர்டிபிசிஆர்](#) சோதனை முடிவு, 3 மணி நேரத்துக்குள் தெரியும் வகையில் நடவடிக்கை எடுக்கப்பட்டுள்ளதாக சென்னை [விமான நிலைய இயக்குநர்](#) சரத்குமார் தெரிவித்துள்ளார்.

இதுதொடர்பாக சென்னை விமான நிலைய ஆணையக [இயக்குநர்](#) சரத்குமார் செய்தியாளர்களிடம் நேற்று கூறியதாவது:



சோதனை கட்டணம் குறைப்பு

ஓமைக்ரான் பாதித்த நாடுகளில் இருந்து வரும் பன்னாட்டு பயணிகளுக்கு பல்வேறு வசதிகள் செய்யப்பட்டுள்ளன. ஒரே நேரத்தில் 700 பேர் வரை சமூக இடைவெளியுடன் அமரக் கூடிய இருக்கைகள் போடப்பட்டுள்ளன. பாதிப்பு அதிகம் உள்ள நாடுகளில் இருந்து வரக்கூடிய பயணிகளுக்கு ராபிட் சோதனை செய்ய கட்டணம் ரூ.3,400-ல் இருந்து ரூ.2,900 ஆக குறைக்கப்பட்டுள்ளது.

இதேபோல [ஆர்டிபிசிஆர்](#) சோதனை கட்டணம் ரூ.600 ஆக குறைக்கப்பட்டுள்ளது. ராபிட் சோதனை முடிவு 45 நிமிடத்தில் இருந்து 30 நிமிடமாக குறைக்கப்பட்டுள்ளது. அதுபோல், [ஆர்டிபிசிஆர்](#) சோதனை நேர முடிவு 6 மணி நேரத்தில் இருந்து 3 மணி நேரமாக குறைக்கப்பட்டுள்ளது.

கடந்த 1-ம் தேதியில் இருந்து ஓமைக்ரான் அதிகம் பாதித்த நாடுகளில் இருந்து வந்த 5,816 பேருக்கு சோதனை செய்யப்பட்டுள்ளது. இதில் யாருக்கும் ஓமைக்ரான் தொற்று உறுதியாகவில்லை. ஓமைக்ரான் அதிகம் பாதித்த நாடுகளில் இருந்து வரும் பயணிகளுக்கு சோதனை கட்டாயம் என்ற பட்டியலில் இருந்து சிங்கப்பூர் நீக்கப்பட்டுள்ளது.

டெல்டா வைரஸை விட ஓமைக்ரான் வைரஸ் அதிக பாதிப்புகளை ஏற்படுத்தும் என்பதால் பன்னாட்டு பயணிகளிடம் அதிக கவனம் செலுத்தப்படுகிறது. மேலும் விமான நிலையத்துக்கு, அதிகம்பாதித்த நாடுகளில் இருந்து வரக்கூடிய பயணிகள் பரிசோதனை நேரம் மற்றும் கட்டணங்களை ஆன்லைனில் செலுத்தி வசதி பெற நடவடிக்கை எடுக்கப்பட்டுள்ளது. விமான நிலைய விரிவாக்க

பணிகள் முடிந்த பின் பெயர் பலகை வைக்க நடவடிக்கை எடுக்கப்படும். இவ்வாறு அவர் கூறினார்.



தடுப்பூசிகளைப் பதுக்கினால் நீண்ட நாள் நாம் கரோனாவுடன் போராட வேண்டிய சூழலை ஏற்படுத்தும்: உலக சுகாதார அமைப்பு எச்சரிக்கை

Published : 10 Dec 2021 11:41 am



கோவிட்-19 தடுப்பூசிகளைப் பதுக்கினால், நாம் நீண்டகாலத்துக்கு கரோனா வைரஸுடன் போராட வேண்டிய சூழலை ஏற்படுத்தும் என [உலக சுகாதார அமைப்பு](#) எச்சரித்துள்ளது.

கரோனா வைரஸின் உருமாற்றம் அடைந்த [ஓமைக்ரான் வைரஸ்](#) உலகில் 40 நாடுகளில் பரவிவிட்டது என [உலக சுகாதார அமைப்பு](#) எச்சரித்துள்ளது. [தடுப்பூசிகள்](#) மூலம் மனிதர்களுக்குக் கிடைத்த நோய் எதிர்ப்பு சக்தியை அழித்து, ஓமைக்ரான் தாக்குகிறது, அதிலிருந்து தப்பிவிடுகிறது என்று ஆய்வுகள் கூறுகின்றன. இதனால் ஏற்கெனவே 2 தடுப்பூசிகளைச் செலுத்திய நாடுகள்,

அடுத்ததாக பூஸ்டர் டோஸ் தடுப்பூசிக்கு தங்கள் மக்களைத் தயார் செய்து வருகின்றனர்.

குறிப்பாக வளர்ந்த நாடுகள் தங்கள் மக்களுக்கு ஏற்கெனவே 70 சதவீதத்துக்கு மேல் இரு தடுப்பூசிகளைச் செலுத்திய நிலையில் தற்போது பூஸ்டர் டோஸையும் செலுத்த வலியுறுத்தி வருகிறது.

உலகில் ஒரு பகுதியில் உள்ள வளர்ச்சி குறைந்த, வறுமை நாடுகளில் இன்னும் மக்கள் ஒரு டோஸ் தடுப்பூசிகூட செலுத்த முடியாத நிலையில் இருக்கும்போது, வளர்ந்த நாடுகள் பூஸ்டர் டோஸ் தடுப்பூசி செலுத்துகிறார்கள். இதனால், தடுப்பூசிகளைப் பதுக்கும் சூழல் ஏற்படும் என [உலக சுகாதார அமைப்பு](#) அஞ்சுகிறது.

இதுகுறித்து உலக சுகாதார அமைப்பின் தடுப்பூசித் துறை இயக்குநர் மருத்துவர் கேட்டே ஓ பிரையன் நேற்று பேட்டியளித்தார்.

அவர் கூறியதாவது:

"ஓமைக்ரான் வைரஸுக்கு எதிராக ஏற்கெனவே புழக்கத்தில் இருக்கும் [தடுப்பூசிகள்](#) எந்த அளவுக்கு சிறப்பாகச் செயல்படும் என்பதற்கான புள்ளிவிவரங்கள் முதல் கட்டமாக வந்துள்ளது பயனுள்ளதாக இருக்கிறது.



ஆனால், தீவிரமான கரோனாவால் பாதிக்கப்படுவோருக்கு இந்தத் தடுப்பூசிகளால் பயன் கிடைக்குமா என்பது தெரியாது. இப்போது நமக்குக் கிடைத்திருக்கும் தடுப்பூசிகளை நாம் பயன்படுத்தினால் மக்களுக்குக் குறைந்தபட்சம் 6 மாதங்கள் அல்லது அதற்கும் அதிகமான மாதங்கள் வரை கொடிய வைரஸிலிருந்து

பாதுகாக்கும். குறிப்பாக சிறிய அளவிலான, நடுத்தரமான தொற்றைக் குறைக்க [தடுப்பூசிகள்](#) உதவும். அதிலும் 65 வயதுக்கு மேற்பட்டவர்களுக்குப் பயன் அளிக்கும்.

என்பதற்கு முழுமையான புள்ளிவிவரங்கள் இல்லை, இன்னும் வர வேண்டியுள்ளது. அது கிடைத்தால்தான் ஓமைக்ரானை எவ்வாறு சமாளிக்க முடியும் என்பதை அறிய முடியும்.

உலகளாவிய தடுப்பூசி பயன்பாடு சீராக இல்லை. இதனால் பணக்கார நாடுகள் [தடுப்பூசிகள்](#) மூலம் தங்களை மேலும் பாதுகாப்பை பலப்படுத்துகிறார்கள். ஏழை நாடுகள் தடுப்பூசி இல்லாமல் தடுமாறுகின்றன. தடுப்பூசிகளை நாம் பதுக்குவதால் கரோனா வைரஸுக்கு எதிரான போர் நீண்ட காலம் நீடிக்கும், அதனுடன் நாம் போராட வேண்டிய காலமும் நீண்டுகொண்டே செல்லும்.

ஓமைக்ரான் வைரஸுக்கு எதிராகத் [தடுப்பூசிகள்](#) வேலை செய்யவில்லை என்று அர்த்தமாக எடுக்கக்கூடாது. வைரஸுக்கு எதிராகத் தடுப்பூசி வேலை செய்யவில்லை என்றால், மக்கள் அதிகமான அளவில் தடுப்பூசி செலுத்தியுள்ளார்கள் என்றுதான் அர்த்தம்".

இவ்வாறு மருத்துவர் ஓ பிரையன் தெரிவித்தார்.

 **The Indian EXPRESS**

Pune completes 100% first dose vaccination of target population

According to district health officials, the first dose has been administered to 83,44,544, or 100 per cent of beneficiaries eligible for the vaccine.

By: [Express News Service](#) | Pune |

Updated: December 9, 2021 7:18:27 am

The Pune administration has reached the target of administering the first dose of the vaccine against [Covid-19](#) to 100 per cent of the eligible population in the district on December 8.

According to district health officials, the first dose has been administered to 83,44,544, or 100 per cent of beneficiaries eligible for the vaccine.

Meanwhile, a total of 5,48,2018 (65.7%) residents have got both doses.

According to the state Health Department, the weekly positivity rate of Covid-19 infections in Pune is less than 2 per cent. However, the state's weekly positivity rate is 0.8 per cent and there are 13 districts, including Pune, whose weekly positivity rate is still higher than the state average. The weekly Covid-19 positivity rate in Pune district, in the week of December 1-7, was 1.64 per cent.



Explained: What does the WHO's latest report say on Omicron variant of Covid-19?

WHO has presented an update on the current situation on four key issues on Omicron — transmissibility, clinical severity, risk of reinfection and the potential impact of the vaccines.

Written by [Kaunain Sheriff M](#) , Edited by Explained Desk
| New Delhi | Updated: December 9, 2021 9:43:56 am

In the latest weekly [Covid-19](#) epidemiological update, the World Health Organisation (WHO) said that given the predominant circulation of the [Delta variant](#) in many countries, it is too early to draw a conclusion on the impact of the



new [Omicron](#) variant on the global epidemiology of Covid-19.

Commuters wearing face masks to protect against Covid-19 while walking through the La Defense business district transportation hub in Paris, Wednesday, Dec. 8, 2021. (AP Photo/Michel Euler)

The global health body further highlighted that while several crucial questions about Omicron remain unanswered, more data will continue to emerge in the coming weeks.

At the same time, WHO has also presented an update on the current situation on four key issues on Omicron — transmissibility, clinical severity, risk of reinfection and the potential impact of the vaccines.

What has WHO said on the impact Omicron is likely to have on the epidemiology?

WHO said that in South Africa, where the new variant of concern (VOC) was first reported, fresh Covid-19 cases have continued to surge. As many as 62,021 new cases were reported between November 29 and December 5, a 111% increase compared to the previous week. More significantly, the country has reported an increase in the test positivity rate from 1.2% the week beginning November 7 to 22.4% in the week beginning December 2.

WHO also noted that a huge increase in the weekly number of cases has also been seen in some countries neighbouring South Africa,

including Eswatini (1,990%), Zimbabwe (1,361%), Mozambique (1,207%), Namibia (681%) and Lesotho (219%).

"These other countries have very low vaccination coverage ranging from 12.1% of the total population fully vaccinated in Namibia to 26.7% in Lesotho. In South Africa, 25.2% of the total population is fully vaccinated," WHO said.

"While drivers of these increases remain unknown, it is plausible that the spread of Omicron in combination with enhanced testing following the declaration of a VOC, play a role, together with the relaxation of public health and social measures (PHSMs) and sub-optimal immunisation coverage," WHO highlighted.

On the global data, WHO said as on December 7, the Omicron variant has been confirmed in 57 countries. "However, given the predominant circulation of the Delta variant in many countries, particularly in countries in the European Region and in the United States of America, it is too early to draw any conclusions about the impact Omicron will have on the global epidemiology of Covid-19," it said.

What could be the impact of the new variant on the transmissibility?

WHO said that at present, while "there seems to be evidence that the Omicron may have a growth advantage over other circulating variants, it is unknown whether this will translate into increased transmissibility".

It highlighted the European Centre for Disease Prevention and Control's possible forecast on Omicron that if 1% of SARS-CoV-2 infections are due to the Omicron variant, it will become dominant in Europe, comprising less than 50 per cent of the new infections by January 1, 2022, with a growth advantage of less than 120% and by March 1, 2022, with a growth advantage of less than 30%.

"Ongoing and planned epidemiological studies, including detailed cluster investigations, contact-tracing and household transmission studies, coupled with neutralisation studies from people previously vaccinated or infected and studies of vaccine effectiveness will help improve our understanding of the interplay between increased transmissibility and immune escape as drivers of increased transmission," WHO concluded.

What could be the likely impact on the severity of the disease and reinfection?

WHO underlined that currently only limited data are available on clinical severity making it "challenging to assess any changes in disease severity with the Omicron variant".

However, as of December 6, WHO said all of the 212 confirmed cases identified in the 18 European Union countries — for which there was information available on the severity — were asymptomatic or mild.

It also noted that South Africa has seen an 82 per cent increase in hospital admissions due to Covid-19 — from 502 to 912 — during the week (November 28 and December 4). However, the global health body said it is yet to be known how many cases of hospitalisation are linked to the Omicron variant.

"Even if the severity is equal or potentially even lower than for Delta variant, it is expected that hospitalizations will increase if more people become infected and that there will be a time lag between an increase in the incidence of cases and an increase in the incidence of deaths," WHO highlighted.

On reinfection, it said preliminary analysis "suggests" that the mutations present in the Omicron variant "may reduce neutralising activity of antibodies resulting in reduced protection from natural immunity".

"This may explain why the variant seems to be spreading rapidly in a highly immune population such as South Africa, in which current vaccination coverage in adults is about 35%, but in which seroprevalence levels are estimated to be as high as 60-80% due to past infections, according to recent epidemiological studies and modelling," WHO said.

WHO said that initial modelling studies from South Africa have found an increased risk of re-infection, adding, this information only offers an initial assessment of the risk of re-infection.

"..however, further studies are needed to confirm this, including the ability of the Omicron variant to infect or re-infect those who have been vaccinated, as well as to determine the severity of these breakthroughs or re-infections".

How may the Omicron variant impact the treatment and vaccines?

WHO reiterated that Interleukin-6 Receptor Blockers and corticosteroids are expected to continue to be effective in the management of patients with severe diseases. On vaccines, it said there is a "need for more data" to examine whether the mutations "may result in reduced protection from vaccine-derived immunity and data on vaccine effectiveness, including the use of additional vaccination doses".

The Indian EXPRESS

FDA expands Pfizer COVID booster, opens extra dose to age 16

The Pfizer vaccine is the only option in the US for anyone younger than 18, either for initial vaccination or for use as a booster.

By: [AP](#) | Washington |
December 9, 2021 10:24:17 pm



Vials of the Pfizer Covid-19 vaccine ready to be administered in London, Saturday, Dec. 4, 2021. (AP Photo/Alberto Pezzali)

The US is expanding [COVID-19](#) boosters, ruling that 16- and 17-year-olds can get a third dose of Pfizer's vaccine.

The US and many other nations already were urging adults to get booster shots to pump up immunity that can wane months after vaccination, calls that intensified with the discovery of the worrisome new [omicron](#) variant.

On Thursday, the Food and Drug Administration gave emergency authorisation for 16- and 17-year-olds to get a third dose of the vaccine made by Pfizer and its partner BioNTech — if it's been six months since their last shot.

There's one more step: The Centers for Disease Control and Prevention must formally recommend the boosters for this age group and a decision is expected soon.

The Pfizer vaccine is the only option in the US for anyone younger than 18, either for initial vaccination or for use as a booster. It's not yet clear if or when teens younger than 16 might need a third Pfizer dose.

Vaccinations for children as young as 5 just began last month, using special low-dose Pfizer shots. By this week, about 5 million 5- to 11-year-olds had gotten a first dose.

The extra-contagious [delta variant](#) is causing nearly all COVID-19 infections in the US, and in much of the world. It's not yet clear how vaccines will hold up against the new and markedly different omicron mutant. But there's strong evidence that boosters offer a jump in protection against delta-caused infections, currently the biggest threat.

Complicating the decision to extend boosters to 16- and 17-year-olds is that the Pfizer shot — and a similar vaccine made by Moderna — have been linked to a rare side effect. Called myocarditis, it's a type of heart inflammation seen mostly in younger men and teen boys.

Health officials in Israel, which already gives boosters to teens, have said the side effect continues to be rare with third doses.

A US study this week offered additional reassurance. Researchers from children's hospitals around the country checked medical records and found the rare side effect usually is mild and people recover quickly, while COVID-19 itself can cause more serious heart inflammation. The research was published Monday in the journal *Circulation*.



UK opens up Covid boosters to all over 30s in Omicron fight

There are around 7.5 million people aged 30 to 39, and 3.5 million of those are eligible for boosters from Monday, NHS England said.

By: [PTI](#) | London |
December 12, 2021 6:46:55 pm



Andhra Pradesh on Sunday reported 156 new Covid cases. (File)

Andhra Pradesh reported its first case of the [Omicron](#) variant of [Covid-19](#) Sunday. Health Department officials said a 34-year-old from Ireland, who returned to his native place in [Vizianagaram](#) district in the last week of November, tested positive for the new variant.

The individual first arrived at the Mumbai airport where his RT-PCR report was negative. He then reached [Visakhapatnam](#) on November 27 and proceeded to his home in Vizianagaram. A second test at Vizianagaram showed him to be Covid positive. "His swab sample was sent to CCMB (Centre for Cellular and Molecular Biology), Hyderabad for genome sequencing and the result declared as Omicron positive. He does not have any symptoms and was re-tested on December 11 and the RT-PCR result was negative. There are no other Omicron cases in the state," Health Minister A K Srinivas said.

Fifteen international travellers have tested positive for Covid-19 in the state in recent days. Their swab samples were sent to the CCMB for analysis. Out of the 10 reports received so far, the Omicron variant has been detected only in one.

Andhra Pradesh on Sunday reported 156 new Covid cases. Health department officials have warned that the marriage season and the approaching festive season may trigger a drastic increase in cases unless people take adequate precautions and follow Covid-19 protocol.

Chief Minister Y S Jagan Mohan Reddy also held a review meeting on the Covid situation in the state in the wake of the detection of the Omicron variant. During the meeting, he directed the officials to expedite the vaccination process and complete it by fixing targets. He instructed the officials to initiate a drive on using masks, and ensure that there are no mass gatherings.

Reddy also emphasised on continuing the door-to-door fever survey and vaccination. In addition, officials were tasked with checking the facilities in hospitals which used to treat Covid patients and ensuring that adequate facilities are available in empanelled hospitals which cater to beneficiaries under the government's healthcare scheme. The chief minister directed the officials to re-inspect quarantine centres, Covid care centres and call centres.

He directed the officials to complete two crore doses of vaccination by the end of December. Officials were also asked to conduct mock drills on the operation of the newly set up oxygen generation plants in all hospitals. Special medical teams will be sent to the airports in Bengaluru, Chennai and Hyderabad to conduct RT-PCR tests on people who are headed to Andhra Pradesh.

The health minister said 87.43 per cent of the people in the state have taken their first dose of the Covid-19 vaccine, while 62.19 per cent have taken both doses. He said the entire population above 18 years would be completely vaccinated by the end of January. The CCMB is also likely to set up a genome sequencing lab in [Vijayawada](#) soon.

Booster increases antibodies, improves protection against Omicron: Scientists

Noted virologist Dr T Jacob John said booster doses of any vaccine (except live attenuated like OPV, measles) exponentially raises antibody level: 'Pfizer vaccine some 40-fold high'.

By: [PTI](#) | New Delhi |
December 12, 2021 3:04:41 pm



A woman receives a dose of the Pfizer Covid-19 vaccine at Swaminarayan School vaccination centre, in London, Saturday, Dec. 4, 2021. (AP)

A booster dose against [COVID-19](#) increases the amount of circulating antibodies and is shown to increase protection from symptomatic infection with [Omicron](#), scientists have said, underlining that boosters can be the simplest step forward, especially for the immunosuppressed.

Reacting to the statement of UK Health Security Agency (UKHSA) that booster dose of Covishield vaccine effective against Omicron and a third booster dose of COVID-19 vaccine provides 70-75 per cent protection against symptomatic infection from the Omicron variant, the virologists and epidermalogists underlined that booster doses of any vaccine (except live attenuated

like oral polio vaccine or OPV, measles) exponentially raises antibody level.

Eminent virologist Dr Shahid Jameel said a booster shot after two doses increases the amount of circulating antibodies and is shown to increase protection against symptomatic infection with Omicron. "We don't know how well two doses continue to protect against severe disease," he told *PTI*.

On what India should do where majority of population is vaccinated with Covishield, the former head of the advisory group to the Indian SARS-COV-2 Genomics Consortia (INASACOG) said it must be ensured that those who got only one dose of Covishield get the second dose in 8-12 weeks instead of 12-16 weeks.

"Carry out lab studies with Omicron to learn how well sera from Indian vaccines of [Covaxin](#) and Covishield neutralise the virus. Make a policy on boosters. What vaccines to use? Who should get it? And when? Make a policy and start vaccinating children starting with adolescents," he said.

Jameel said in India, four vaccines can be used as boosters: Covaxin in people who got Covishield and vice versa, DNA vaccine ZyCoV-D, Covovax protein vaccine from SII and Corbev ax-E protein vaccine from Biological E.

The Health Ministry told the Lok Sabha last week that the National Expert Group on Vaccine Administration for COVID-19 (NEGVAC) and the National Technical Advisory Group on Immunisation (NTAGI) are considering scientific evidence related to justification for booster doses against the [coronavirus](#).

Noted virologist Dr T Jacob John said booster doses of any vaccine (except live attenuated like OPV, measles) exponentially raises antibody level: "Pfizer vaccine some 40-fold high".

"If we are interested in being cautious about the unknown risks of omicron, boosters for as many as possible is the simplest step forward, especially for the immunosuppressed, seniors and those with co-morbidities. This is in the best interests of their welfare," he told *PTI*.

John, the former director of the ICMR's Centre of Advanced Research in Virology, stressed that children must be vaccinated too since unvaccinated large segment of population can act as reservoirs — "plus omicron seems to go after children". "Better to prevent than to wait for evidence. Protection delayed can also mean protection denied," he said.

Dr Giridhara R Babu, professor and the Head of lifecourse epidemiology at the Public Health Foundation of India, said the evidence is gradually mounting in stressing the need for boosters eventually to everyone.

"However, data on physical outcomes are important in prioritizing the booster doses; Protection against hospitalisation or deaths is important in analysing the need for prioritising boosters compared to receiving only two primary doses," he said.

Babu said for developing countries, the priority still remains to reach the unreached (providing two primary doses to those not already vaccinated). Among the fully vaccinated, the available evidence points to the usefulness of providing booster doses to the elderly and those at high risk, including immunocompromised, he said.

Dr Chandrakant Lahariya, Physician epidemiologist and public policy specialist, however, said booster is not a priority for the country and at least for Indian context, Omicron has not changed anything and India should do to collect more indigenous data and evidence for decision making on booster.

"The vaccines being used in India continue to protect against severe disease, hospitalisation and deaths. Therefore, the focus continues to be administered first and second shot to as many adults as possible," he told *PTI*.

Elaborating further, he said "In current stage of pandemic, every study on vaccine effectiveness (in general and against Omicron) should be interpreted in the context of that setting".

"What all vaccine effectiveness studies are pointing out is that existing vaccines continue to hold up against the key objective of COVID-19 vaccination drives that is to prevent severe diseases, hospitalisation and deaths. This holds true for the Omicron variant," Lahariya added.

Lahariya said neutralising studies are also pointing out that hybrid immunity through natural infection and at least one shot of vaccine provides far greater protection than vaccines alone. India has the situation of hybrid immunity where high sero prevalence and one dose coverage gives assurance that people are protected.

"Considering the effectiveness of the COVID-19 vaccines being used in India against all symptomatic diseases is unknown or very limited data is available, therefore, we should not use studies and arguments of administering booster doses to improve protection from symptomatic diseases. As preventing all symptomatic diseases is not, at least at present, the purpose of ongoing COVID-19 vaccine drive in India," he said.



Explained: How will the world decide when the Covid-19 pandemic is over?

The pandemic may be widely considered over when WHO decides the virus is no longer an emergency of international concern, a designation its expert committee has been reassessing every three months. But when the most acute phases of the crisis ease within countries could vary.

By: [AP](#) |

Updated: December 12, 2021 3:02:09 pm



People wear face masks to protect against the spread of the coronavirus in Taipei, Taiwan. (AP Photo)

There's no clear-cut definition for when a pandemic starts and ends, and how much of a threat a global outbreak is posing can vary by country.

"It's somewhat a subjective judgment because it's not just about the number of cases. It's about severity and it's about impact," says Dr. Michael Ryan, the World Health Organization's emergencies chief.

In January 2020, WHO designated the virus a global health crisis "of international concern." A couple months later in March, the United Nations health agency described the outbreak as a "pandemic," reflecting the fact that the virus had spread to nearly every continent and numerous other health officials were saying it could be described as such.

The pandemic may be widely considered over when WHO decides the virus is no longer an emergency of international concern, a designation its expert committee has been

reassessing every three months. But when the most acute phases of the crisis ease within countries could vary.

“There is not going to be one day when someone says, ‘OK, the pandemic is over,’” says Dr. Chris Woods, an infectious disease expert at Duke University. Although there’s no universally agreed-upon criteria, he said countries will likely look for sustained reduction in cases over time.

Scientists expect [Covid-19](#) will eventually settle into becoming a more predictable virus like the flu, meaning it will cause seasonal outbreaks but not the huge surges we’re seeing right now. But even then, Woods says some habits, such as wearing masks in public places, might continue.

“Even after the pandemic ends, COVID will still be with us,” he says.

The Indian EXPRESS

Israeli study finds Pfizer Covid-19 booster protects against Omicron

The findings were similar to those presented by BioNTech and Pfizer earlier in the week, which were an early signal that booster shots could be key to protect against infection from the newly identified variant

By: [Reuters](#) |
December 12, 2021 9:55:37 am

Israeli researchers said on Saturday they found that a three-shot course of the Pfizer/BioNTech [Covid-19](#) vaccine provided [significant protection against the new Omicron variant](#).

The findings were similar to those presented by BioNTech and Pfizer earlier in the week, which

were an early signal that booster shots could be key to protect against infection from the newly identified variant.



Vials of the Pfizer Covid-19 vaccine ready to be administered in London, Saturday, Dec. 4, 2021. (AP Photo/Alberto Pezzali)

The study, carried out by Sheba Medical Center and the Health Ministry’s Central Virology Laboratory, compared the blood of 20 people who had received two vaccine doses 5-6 months earlier to the same number of individuals who had received a booster a month before.

“People who received the second dose 5 or 6 months ago do not have any neutralization ability against the [Omicron](#). While they do have some against the Delta (strain),” Gili Regev-Yochay, director of the Infectious Diseases Unit at Sheba, told reporters.

“The good news is that with the booster dose it increases about a hundred fold. There is a significant protection of the booster dose. It is lower than the neutralization ability against the Delta, about four times lower,” she said.

The Israeli team said they worked with the actual virus while the companies used what is known as a pseudovirus, which was bio-engineered to have the hallmark mutations of Omicron.

The Israeli research follows a study from South Africa that found the Omicron variant can partially evade protection from two doses.

Covid remains undefeated

Tavleen Singh writes: Ever since the horrific second Covid wave has waned, that same note of triumphalism has come back into the orchestrated cacophony that fooled Modi in the past.

Written by [Tavleen Singh](#) |

Updated: December 13, 2021 7:46:12 am



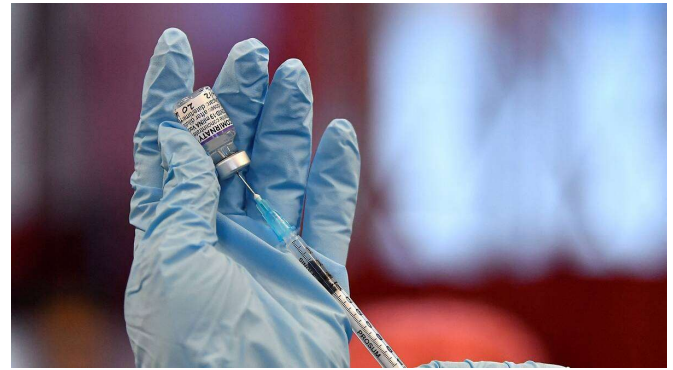
Crowd at a Sunday market in Jammu. (AP)

By next week the Serum Institute could be forced to halve its production of Covid vaccines because the Government of India has placed no fresh orders. Alarm bells should be ringing loudly in Delhi but there is no indication yet that they are. It is as if nobody in [Narendra Modi](#)'s government has noticed that just over half of our population is fully vaccinated and that a huge section of those who have been fully vaccinated are going to need booster shots soon. Are the high officials who man the vaccination task force going to let us down again since none of them were punished last time?

Booster dose effective against Omicron, finds UK study

The UK Health Security Agency said that two doses of vaccines provide "much lower levels" of protection against symptomatic infection compared to the currently dominant Delta variant of Covid-19.

December 11, 2021 9:12:26 am



The UK health agency said a third top-up vaccine dose seem to boost immunity against the new variant. (Representational image via Reuters)

A third booster dose of [Covid-19](#) vaccine provides 70-75 per cent protection against [symptomatic infection from the Omicron variant](#), the UK Health Security Agency (UKHSA) said on Friday.

In its latest technical briefing, the agency said that two doses of both the Oxford/AstraZeneca — administered in India as Covishield — and Pfizer/BioNtech vaccines provide "much lower levels" of protection against symptomatic infection compared to the currently dominant [Delta variant](#) of Covid-19.

However, a third top-up dose does seem to boost immunity against the new variant, based on an analysis of data from 581 [Omicron](#) cases.

"It is projected that if current trends continue unchanged, the UK will exceed one million infections by the end of this month," the UKHSA said.

"The preliminary data showed effectiveness against the new variant appears to increase considerably in the early period after a booster

dose, providing around 70-75 per cent protection against symptomatic infection. Due to the early nature of the findings, all estimates are subject to significant uncertainty and are subject to change," it said.

The health experts reiterated that vaccines were still likely to offer good protection against severe Covid, which required hospital treatment.

Dr Mary Ramsay, Head of Immunisation at the UKHSA, said: "These early estimates should be treated with caution but they indicate that a few months after the second jab, there is a greater risk of catching the Omicron variant compared to Delta strain.

"We expect the vaccines to show higher protection against the serious complications of Covid-19, so if you haven't yet had your first two doses please book an appointment straight away."

She highlighted the current guidance of working from home where possible, consistently wearing masks in crowded or enclosed spaces, washing your hands regularly and isolating and getting tested if you feel unwell as vitally important in reducing the impact of Covid-19.

The scientific analysis is released as the UK recorded another day of high daily infections at 58,194 on Friday.



Explained: To roll out Covid-19 booster vaccines, or not to

When protection given by a Covid vaccine course starts to wane, a booster can help maintain immunity levels. But vaccinating the entire population is the priority.

Written by [Anuradha Mascarenhas](#) | Pune |
Updated: December 12, 2021 9:01:07 am



A healthworker prepares shots of a Covid-19 vaccine. (AP Photo/Alvaro Barrientos, File)

On Friday, the Health Ministry said India is still [examining the possibility](#) of administering booster shots of the [Covid-19](#) vaccine, while noting that the World Health Organization (WHO) has not taken a stand on this.

Experts have said boosters will be required for continuing protection from Covid, while stressing that second-dose coverage is of high priority. Some have suggested looking at both options simultaneously — increasing coverage and offering targeted boosters to vulnerable sections.

What is a 'booster' dose?

Most Covid vaccines are administered in two doses, with a few given as a single dose. A booster is an additional shot given after the protection provided by the original shot(s) has begun to decrease over time, so that people can maintain their level of immunity for longer.

"How long immunity developed by an infection or a vaccination will last will vary depending upon various factors," said leading immunologist Dr Vineeta Bal. For example, antibodies decay over time, and even memory T-cells will die after a few years or months.

In the past, boosters were recommended for smallpox prevention every three to five years.

Tetanus toxoid boosters are also recommended today for adults and pregnant women after childhood vaccination.

What is the published evidence of waning immunity following Covid vaccination?

In September, a study at ICMR–Regional Medical Research Centre, Bhubaneswar showed a significant drop in antibodies against Covid-19 within four months after complete vaccination.

Another study, on the immune response to mRNA vaccines, was published in Science earlier this year. At six months, it found declining antibody levels, but durable memory B cell and T cell responses. Most of the B cells were able to cross-bind with the Alpha, Beta and Delta variants.

A study in the US showed that antibodies reduce by more than 80% six months after receiving the second dose of the Pfizer-BioNTech mRNA vaccine.

Have studies been done on the effect of a booster dose?

BioNTech and Pfizer have said a three-shot course was able to neutralise the [Omicron](#) variant in a laboratory test; the third dose increased neutralising antibodies by a factor of 25.

A recent study by Indian Council of Medical Research (ICMR) scientists suggested use of booster shots of Covishield to fight emerging variants. The study, posted on bioRxiv and yet to be peer-reviewed, evaluated the neutralising potential of blood samples from people who received two doses of Covishield.



A health worker shows empty vials after administering Covid-19 vaccines to beneficiaries at a government hospital in Bengaluru, Friday, Dec. 10, 2021. (PTI Photo/Shailendra Bhojak)

Under what other circumstances can administering a booster be considered?

Breakthrough infections with Delta are associated with high viral loads. If community transmission is high, boosters would help in controlling viral spread, said Dr Sanjay Pujari, member of the ICMR national task force on Covid-19. He noted that daily case counts in Israel have remained low after booster coverage increased.

“In India, where there are no surplus stocks of different vaccines, the policymakers need to take a call whether to aggressively enhance the vaccine coverage and whether booster shots can be given, at least to those who were vaccinated more than six months ago. Particularly those with comorbidities and frontline health workers,” said scientist Dr V S Chauhan.

Experts such as Dr Bal said boosters are not an answer to surges, especially in an outbreak area. In any community, mass vaccination for specific diseases provides a robust way of preventing morbidity. The goal should be vaccination of the entire eligible population with the recommended number of doses, they stressed.

Indian Medical Association president Dr J A Jayalal stressed the need for the Centre to roll out a booster for healthcare and frontline workers and immunocompromised persons. "Immunity is sufficient to face normal infection. Now, with another variant, Omicron, there are reports indicating high transmissibility, and in such an event, it will be healthcare workers who will be most at risk due to increased frequency of exposure. The viral load average immunity will not be sufficient... Firstly, of course, all people in the country should be vaccinated," he said.

What is the reasoning of some countries in administering boosters?

The US Centers for Disease Control and Prevention (CDC) has recommended booster shots, at least six months after their second dose, for all adults who received a Pfizer-BioNTech or Moderna vaccine. The European CDC has urged citizens to get fully vaccinated and adhere to recommendations on booster vaccination.

In many European countries where vaccinations started almost a year ago, there has been a surge in the pandemic. Armed with vaccine stocks, these countries and the US have rolled out booster shots for the last several months.

Experts pointed out, however, that the situation in the US and Europe is different compared to India. The number of [Delta variant](#)-caused cases is increasing in many countries.

Besides, there is some preliminary evidence that immunity mediated by mRNA vaccines (such as those from Pfizer-BioNTech and Moderna) starts waning earlier than that mediated by adenovirus-vector-based vaccines (such as Covishield), especially for T cell response. This was discussed in a letter published in the New [England Journal of Medicine](#) last month. "Hence mRNA vaccine recipients might be more in need for boosters earlier than Indians (since 80+% vaccine recipients in India have received Covishield)," Dr Bal said.

Why is the WHO not throwing its weight behind boosters?

According to a WHO statement in October, the degree of waning of immunity and need for booster doses may differ between vaccine products, target populations, circulating SARS-CoV2 virus, in particular variants of concern, and intensity of exposure. Introducing booster doses should be evidence-driven and targeted to groups in greatest need; improving coverage of primary vaccination series should be prioritised over booster vaccination, it said.

What is India's policy on booster doses?

On Friday, the Health Ministry said two experts bodies are still examining this. About the WHO, Dr V K Paul, head of India's Covid-19 task force, noted: "They have absolute clarity on the administration of a booster. It is under consideration. It has clearly and emphatically highlighted the need to complete primary vaccination, as the most important priority. Our thinking and the overall picture are also aligned with the same approach to complete the task of vaccinating adults with two doses," Paul said.

ICMR chief Dr Balram Bhargava also said India is still examining the issue of booster doses. "The data (on antibody response) has shown that vaccines are still effective after nine months to a year. This depends on the type of vaccines," Bhargava said.

How should we view booster shots in the context of Omicron?

Information on Omicron variant is still emerging. ICMR chief Dr Balram Bhargava said India will soon begin testing of [Covaxin](#) and Covishield against Omicron.

Experts said Omicron appears to spread very easily in the unvaccinated population, based on reports from Africa. Whether this will be the case in fully vaccinated people is unclear. Expert

accounts from Africa suggest the disease itself is mild, and hospitalisation is mostly not needed. But once again, a lot more data from other places is needed before this can be confirmed as a general trend.

"Israel is an example of how mass booster vaccination have kept their case numbers low. Although some triple vaccinated individuals have tested positive for Omicron, they have had mild symptoms and there has been no rapid spread. However, further long-term data is needed," leading immunologist Dr Vineeta Bal said.



May need booster shots for frontline workers, elderly, say experts

Gautam Menon, Professor at Ashoka University, said, "Booster shots may be necessary, at least initially, for frontline and healthcare workers, those above 60 years of age and those who are immunocompromised, but others can wait for them."

Written by [Anuradha Mascarenhas](#) | Pune |
Updated: December 11, 2021 4:45:59 am

In its fight against the [Covid-19](#) pandemic, it is essential that India step up efforts to vaccinate the nearly 15 per cent of its adult population, which was still unvaccinated, as well as prioritise administering the second dose of the vaccine to those inoculated with only the first dose, according to an expert.



Prof Menon also told The Indian Express that best results are obtained with "boosters that are different from the vaccines you get originally."

Speaking at a discussion on SARS CoV 2 [Omicron](#) variant on Friday, professor of physics and biology at Ashoka University, Gautam Menon, also said, "Booster shots may be necessary, at least initially, for front-line and healthcare workers, those above 60 years of age and those who are immunocompromised, but others can wait for them."

He, however, said more information was needed "about the use of the currently available Indian vaccines as boosters, and also about how the two vaccines most used in India — [Covaxin](#) and Covishield — might perform against the Omicron variant."

Sharing his insights on the new variant, Prof Menon said, "The news of emergence of the new Omicron variant from South Africa is worrying. While we will know more in the coming weeks, what we know so far is that this variant spreads more efficiently and can evade immunity even from an earlier infection of Covid-19 and vaccination. There are some positive indications such as the severity of the illness being possibly less than that caused by [Delta variant](#), but this requires confirmation."

Another expert who addressed the event, Dr Shahid Jameel, director of Trivedi School of Biosciences, Ashoka University, said, "Early lab results from South Africa and Pfizer show about a 40-fold and 25-fold drop in virus neutralisation

ability of Pfizer vaccine. According to various studies, booster shots have been shown to increase the amount of antibodies and cut reinfection rates. Given these results, it is now time that India devises policies on booster shots and vaccination for children."

Dr Jameel had earlier told [The Indian Express](#), "I am of the view that a third dose of AstraZeneca (marketed as Covishield in India) would not be as effective. Another vaccine should be used as a booster in people vaccinated with two doses of Covishield. Novovax made by Serum Institute (called Covovax) and Biological E's [Corbevax](#) would be both effective and inexpensive. SII also has the capacity to make over 1.5 billion doses of Covovax."

Prof Menon also told The Indian Express that best results are obtained with "boosters that are different from the vaccines you get originally."

At the discussion, both Dr Jameel and Prof Menon said they expected Covid-19 cases in India to rise by early next year as this has been the experience even in other countries with high levels of vaccination, such as Israel and the UK. They also added a note of caution, saying as more data becomes available, "some of the information that we know as of now could be wrong".

Both experts emphasised that the best strategies to reduce the spread of Covid-19 are mask-wearing, proper ventilation, physical distancing and stepping up vaccination, and the responsibility for these rests as much with the individual as with the government.

Dr Jameel also raised the issue of vaccine inequity, and how it had led to emergence of the Omicron variant. "There are reports from the UK where AstraZeneca vaccine doses have been destroyed as they were close to expiry... on the other hand, there are countries where vaccine doses have not been administered due to inadequate supply. The new variant has come

due to vaccine inequity and how vaccines have rolled out. This is the kind of inequity we should fight against," said Dr Jameel.

He also made a strong case for reducing the gap between two Covishield doses from 16 to 12 weeks to increase the rate of vaccination.



Explained: What government said on Omicron variant of Covid-19 today

Nine cases of the 25 Omicron cases detected in India did not have foreign travel history while 14 are fully vaccinated — Covishield (8); Pfizer (5); and Sinovac (1) — indicating breakthrough infections caused by the new Covid-19 variant.

Written by [Kaunain Sheriff M](#)

Edited by Explained Desk | New Delhi

December 10, 2021 7:54:33 pm



Hospital staff continue with their routine work at the isolation ward prepared for patients detected with Omicron variant at Civil hospital, Asarwa. (Express photo by Nirmal Harindran)

All the 25 [Omicron](#) variant cases in India have mild symptoms, said the government on Friday. It also said that nine cases did not have foreign travel history while 14 are fully vaccinated — Covishield (8); Pfizer (5); and Sinovac (1) —

indicating breakthrough infections caused by the new [Covid-19](#) variant.

Is India testing Covaxin and Covishield against Omicron?

ICMR chief Dr Balram Bhargava said that India will soon begin testing of [Covaxin](#) and Covishield against Omicron. "We have at this moment, in India, seen 25 cases of Omicron. NIV Pune has got samples from these individuals. We are trying to grow the virus, inoculate it in the culture medium, so that it grows. Once we grow the virus, we will be able to test in the laboratory and then we will test the efficacy of both Covaxin and Covishield. This work has started and we are trying multiple cultures to grow the virus," Bhargava said.

What is the strategy for protection against Omicron?

India's Covid-19 task force head Dr V K Paul again highlighted that India needs to be vigilant and that the mask is a universal and social vaccine, which is effective against any variant.

Paul also flagged that India, which is currently reporting a decline in Covid-19 cases, however, has seen the emergence of 70 clusters of Covid-19 cases. "We should keep in mind that the country is witnessing a cluster of cases. Approximately we have seen 70 such clusters. We are investigating them and found that it is still caused due to the [Delta variant](#). This is why both doses of vaccination and masks are very important. There is no need to panic but we need to be vigilant," Paul said.

Bhargava also emphasised that clinically Omicron is yet not posing a burden on the healthcare system. "However, the vigil has to be maintained. Regular meetings are being organised to keep a watch on the global scenarios. District-level restrictions are to be implemented where the test positivity is more than 5 per cent. Also, scientific evidence for

diagnosis and treatment are being reviewed. The treatment remains unchanged at the moment," Bhargava said.

What did the health ministry say about India's policy to administer booster doses?

Again, it highlighted that two expert bodies are still examining the issue of administering booster doses. Paul also said that there is no stand on booster dose by the WHO. "They have absolute clarity on the administration of the booster. It is under consideration. It has clearly and emphatically highlighted the need to complete primary vaccination, as the most important priority. Our thinking and the overall picture are also aligned with the same approach to complete the task of vaccinating adults with two doses," Paul said.



Explained: What the changes in India's international flight rules mean for travellers

India has extended the suspension of scheduled commercial international flights till January 31. Why? When will regular international flights resume?

Written by [Pranav Mukul](#) , Edited by Explained Desk |
New Delhi |
Updated: December 11, 2021 1:15:45 am

The Directorate General of Civil Aviation (DGCA) said Thursday it has [extended the suspension](#) on scheduled commercial international flights till January 31. This is in line with the practice in place since the onset of [Covid-19](#) in India in March 2020. Additionally, India has also changed its list of 'at-risk' countries — travellers

from where are subjected to additional health requirements.



Passengers exiting from the arrivals gate of the international terminal of Sardar Vallabhbhai Patel International Airport, Ahmedabad. (Express Photo: Nirmal Harindran)

Does this mean all international flights will be cancelled?

No, the international flights scheduled right now are operating under special air-bubble arrangements, and these flights will continue to operate as per their schedule. India has air bubble arrangements with 32 countries, including the US, Singapore, Qatar, the UAE, the UK, France, Germany, etc. However, travel to these countries will be subject to their health guidelines.

When will regular international flights be resumed?

India [had announced](#) resumption of regular international flights with effect from December 15, but that decision [was retracted](#) in light of the [Omicron](#) variant of Covid-19. The DGCA had said that a new effective date of resumption will be notified in due course of time. The resumption was to happen in a calibrated manner with a staggered reopening for countries considered 'at-risk'.

Among the 'at-risk' countries, if India has an air bubble arrangement, flights would have been resumed at a 75 per cent capacity as decided in bilateral agreements, and for those without an

air bubble, at 50 per cent capacity. For all the remaining countries that are not a part of the 'at-risk' category, 100 per cent of the flights had been allowed to resume.

What are the changes to the list of 'at-risk' countries?

The Ministry of Health and Family Welfare has removed Singapore and Bangladesh from the list of 'at-risk' countries — meaning passengers from these places will be allowed to travel quarantine-free to India. Also, it has added Ghana and Tanzania to the list. Now the list of 'at-risk' countries comprises Europe, including the UK, in addition to South Africa, Brazil, Botswana, China, Ghana, Mauritius, New Zealand, Zimbabwe, Tanzania, Hong Kong and Israel.

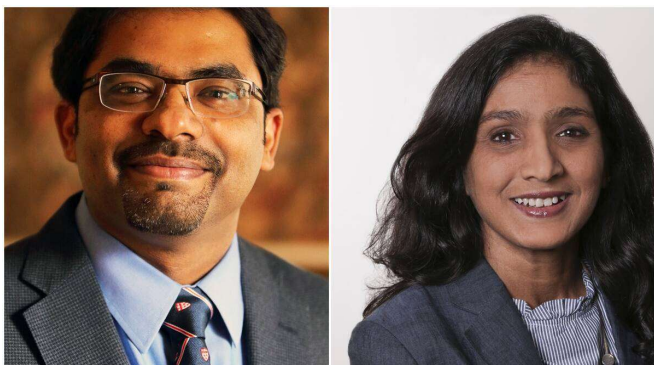


Express Interview: 'With Omicron variant, it is critical for India to step up vaccination'

In an interview with The Indian Express, Purnima Menon and Madhukar Pai, volunteers with India Covid SOS discuss the Omicron variant, vaccination in India and focus areas in Covid management.

By: [Express News Service](#) | Pune |
Updated: December 10, 2021 12:05:47 pm

Purnima Menon, a senior research fellow at the International Food Policy Research Institute in New Delhi, and Madhukar Pai, professor of epidemiology and global health in Canada's McGill University are volunteers with India Covid SOS, an international non-profit volunteer group of scientists, clinicians, engineers, policy-makers,



Madhukar Pai and Purnima Menon.

community organisers and industry partners. In an interview over email with [The Indian Express](#) they discuss the [Omicron](#) variant, vaccination in India and focus areas in Covid management.

Can you talk about the initiative of identifying, compiling and disseminating promising practices that emerged from the second Covid wave? The rationale and vision behind this initiative.

The idea of examining successes in public health is not uncommon or new, but in the context of [Covid-19](#) and the fast-moving situation in India in April-June, the India Covid SOS team was hearing stories of innovation and resilience even as we came together as a network in April 2021. We realised that these stories needed to be preserved to hold and to learn from; this in turn inspired us to reach out to Exemplars in Global Health to ask for support in curating some of these case studies, now publicly available. We felt, as we came out of this traumatic period, that India and, indeed, the world would benefit from preserving the various stories of innovation, hard work and commitment. These positive case studies might come in handy if India were to see another Covid wave, especially in the context of the Omicron variant.

Omicron has emerged as a Variant of Concern now. In light of other possible variants in future 1) how can vaccination strategies be dynamic enough to keep pace with a constantly

changing virus 2) a set of best practices, as you are helping to curate, may apply for one region/country but not others. How are you looking to have a more cohesive pool of best practices that any region/country can draw from?

At this point, we do not know if existing vaccines will protect fully against Omicron, but we expect them to confer at least partial protection against bad outcomes. It might be necessary to re-design existing vaccines against newer variants, and annual boosters might also be needed to keep up with new variants in future. Ongoing research will make this clearer in the next few months. For now, it is important for people in India to get vaccinated and follow basic public health measures (masking, avoiding large gatherings). Yes, some aspects of vaccination case studies may seem like they are limited only to the Indian or, indeed, the communities they are gathered from. However, if you look across them, you see that there are many connected lessons – these include the value of leadership committed to achieving a goal (in this case reaching everyone with the vaccine); paying attention to implementation detail – the missing middle, as it were; paying attention to client communities their beliefs and constraints; communicating effectively; and more. These insights are generalizable but it is important, of course, that we continue to examine successes in other countries as well as across India to explore what else surfaces as key insights.

With the country surpassing the one billion vaccination benchmark, what stands out as a positive move/practice that helped achieve this milestone?

The one billion mark is commendable. But with the new Omicron variant, it is critical for India to step up the vaccination rate. Only a third of the Indian population is fully vaccinated and that might not be sufficient to protect against new variants, especially if they are more transmissible

than the [Delta variant](#), and are more likely to cause re-infection. Millions of Indians are yet to complete their second dose and we hope the Omicron threat will nudge them to complete the vaccination schedule. Immunisation efforts have focused both on ensuring upstream supplies as well as the very local efforts to reach everyone eligible in communities – this has been a slow sweep across India. There are still challenges, including around technology, registration and so on, and some of these early issues contributed to a slower pick-up than if we had just been out there without any of the technology barriers.

Vaccine hesitancy is an issue globally and in India. In fact, it is a significantly bigger challenge in rural India. Can you share, from your experience, any unique initiative that was undertaken to address such critical issues?

Insights from the case studies curated in this initiative suggest that local leaders came together to address various hesitancy issues and other real constraints (food, water, rest) to help achieve high vaccination rates. Above all, exemplary efforts to truly understand and respect communities and then address concerns. Unlike western countries, there are no big, organised, anti-vaccination campaigns in India. So, we should be able to address hesitancy with time, effort and community engagement.

In the second wave, we witnessed various sectors uniting for Covid management. Do you think such integrated approaches will, increasingly, be the way forward for public health strategies?

One feature of the cross-sectoral responses that emerged during the second wave is that they were really solutions that came from desperation and a desire to help in an otherwise untenable situation. The sense of common purpose and the urgency of the times, in our view, really helped break down barriers that might have stood in the

way in normal times. Our challenge, as we look ahead to potential future waves, is to see whether the barriers can be broken down well before we get to the sense of urgency or desperation.

How many of these promising practices have been curated as of now and what are the focus areas?

To date, we have compiled over 50 stories – not all are published yet – but we anticipate that by February 2022, many will be. Focus areas include bright spots in vaccination practices, evidence-based patient management, cross-sectoral collaborations and operational excellence. We hope these stories can inspire and support those who are interested in learning about how to deliver public health success in these challenging times. Management of public health situations is a complex task, but what we have here is both the stories and examples of success, and access to the network of individuals and organisations who delivered these successes. So we do believe this effort has potential but, as in every effort, finding ways to connect these stories (and the people behind them) to those who need the insights will need to be a continuing task. We need to make sure that the stories and individuals are not hidden from the public eye.



UK's Omicron Covid variant cases nearly double in a day

UK Prime Minister Boris Johnson had earlier said that the omicron variant's doubling rate could be between two to three days.

By: [PTI](#) | London |
December 10, 2021 10:10:51 am



People wear face coverings as they walk through Westminster, in London, Dec 9, 2021. (AP)

The number of cases of the [Omicron](#) variant of [Covid-19](#) in Britain has nearly doubled in one day after a further 249 cases were confirmed on Thursday, bringing the UK total to 817.

The UK Health Security Agency (UKHSA) said if the growth rate and doubling time continue at the rate seen in the last two weeks, they expect to see at least 50 per cent of [coronavirus](#) (Covid-19) cases to be caused by Omicron variant in the next two to four weeks.

Prime Minister Boris Johnson had earlier said that the variant's doubling rate could be between two to three days as he announced tougher measures of expanded compulsory face masks in indoor settings, work from home guidance and Covid vaccine certification for entry into venues.

"It is increasingly evident that Omicron is highly infectious and there is emerging laboratory and early clinical evidence to suggest that both vaccine-acquired and naturally acquired immunity against infection is reduced for this variant. It is therefore absolutely critical that we all do everything that we can to help break the chains of transmission and slow the spread of this new variant," said UKHSA Chief Medical Advisor Dr Susan Hopkins.

"Vaccination is critical to help us bolster our defences against becoming severely ill from this new variant — please get your first, second, third or booster jab without delay," she said.

The agency said that whilst there is insufficient data to quantify either vaccine effectiveness or risk of reinfection in the UK exactly, the observed growth, case distribution and early analyses in both South Africa and the UK are consistent with some loss of immune protection against infection. New studies are being undertaken to assess this further, it added.

In a related study, early data has suggested the new variant could result in less severe disease than previous waves. However, Tim Spector, lead scientist on the UK's Zoe app-based Covid Study, warned against complacency.

"Even with Omicron appearing to be more transmissible than Delta, early signs, including new reports from Zoe users, show that it is breaking through in vaccinated people, but it's causing milder cold-like symptoms. However, this is not a reason to be relaxed about Omicron," said Spector, professor of genetic epidemiology at King's College London and co-founder of the Zoe app that tracks the spread of Covid-19.

"COVID is unpredictable and, even if most only feel like they've got a cold, there are far more long-term risks than a cold carries. If numbers skyrocket, it doesn't matter if the percentage of people being hospitalised or dying remain low — it's about volume, not percentages," he said.

The Zoe study, whose incidence figures are based on reports from around 650,000 weekly contributors, has introduced a new feature into the app that allows people to share their Omicron experiences and symptoms.

Omicron is fast moving, but perhaps less severe, early reports suggest

In Europe, as in South Africa, there are early indications that omicron cases may be fairly mild, if easy to contract.

By: [New York Times](#) | Johannesburg |
December 7, 2021 11:08:46 am



With many flights cancelled, there is little traffic at international check-in counters in OR Tambo International Airport, Johannesburg on Dec. 2, 2021. (Joao Silva/The New York Times)

Written by Lynsey Chutel, Richard Pérez-Peña and Emily Anthes

The [Covid-19](#) virus is spreading faster than ever in South Africa, the country's president said Monday, an indication of how the new [omicron](#) variant is driving the pandemic, but there are early indications that omicron may cause less-serious illness than other forms of the virus.

Researchers at a major hospital complex in Pretoria reported that their patients with the [coronavirus](#) are much less sick than those they have treated before, and that other hospitals are seeing the same trends. In fact, they said, most of their infected patients were admitted for other reasons and have no Covid symptoms.

But scientists cautioned against placing too much stock in either the potential good news of less severity, or bad news such as early evidence that prior coronavirus infection offers little immunity to omicron. The variant was discovered just last month, and more study is needed before experts can say much about it with confidence. Beyond that, the true impact of the coronavirus is not always felt immediately, with hospitalisations and deaths often lagging considerably behind initial outbreaks.

Dr. Emily Gurley, a public health researcher at Johns Hopkins Bloomberg School of Public Health, said of the signs that the variant is less severe, "It would not be shocking if that's true, but I'm not sure we can conclude that yet."

In the absence of more hard information, governments have reacted to omicron with sharp restrictions on international travel and new vaccination requirements. World leaders who were accused of responding too slowly or weakly earlier in the pandemic are eager to be seen as taking action, although some experts question whether the travel restrictions are an overreaction.

The variant has spread rapidly and has been detected in more than 30 countries on six continents so far. Health officials and researchers say that it could be the most contagious form of the virus yet and that it could soon displace the [delta variant](#) that emerged last year as the predominant form. That has fueled fears that a world eager to emerge from two years of pandemic hardship could be headed into another cycle of illness, lockdown and economic suffering.

In Europe, as in South Africa, there are early indications that omicron cases may be fairly mild, if easy to contract.

In Britain, the government said Monday that the number of omicron cases there had climbed to 336, 2 1/2 times as many as on Friday. Denmark

reported 261 cases, quadruple the number on Friday, and local media there have reported that a holiday lunch for high school students may have been a superspreader event, with dozens of people catching the new variant.



The Covid-19 virus is spreading faster than ever in South Africa, the country's president said, an indication of how contagious the new omicron variant is, but there are early indications that it may be less serious than other forms of the virus. (Joao Silva/The New York Times)

Britain and Denmark do an unusually large amount of genomic sequencing of virus samples, to tell one variant from another and detect changes, which suggests that many omicron cases in other countries are simply going undetected.

On Monday, the United States began requiring international travelers arriving in the country to provide proof of a negative coronavirus test taken no more than 24 hours before their flights, a standard that can be hard to meet. Previously, fully vaccinated travelers could show negative test results taken up to 72 hours before departure.

China, a major part of the global travel and tourism economy, announced that to maintain its zero-Covid approach, it would keep international flights at 2.2% of pre-Covid levels during the winter. Since August, it has almost entirely stopped issuing new passports, and it requires arriving travelers to quarantine for 14

days and provide extensive paperwork and multiple virus tests.

In South Africa, where scientists say omicron is already dominant, the pandemic is surging once again. A month ago, South Africa had fewer than 300 new virus cases a day; on Friday and again Saturday, the figure was more than 16,000. It fell somewhat Sunday and Monday, but that may be because of a reporting lag often seen on weekends.

"As the country heads into a fourth wave of Covid-19 infections, we are experiencing a rate of infections that we have not seen since the pandemic started," President Cyril Ramaphosa wrote in an open letter to the country. "Nearly a quarter of all Covid-19 tests now come back positive. Compare this to two weeks ago, when the proportion of positive tests was sitting at around 2%."

A report released this past weekend from doctors at the Steve Biko Academic and Tshwane District Hospital Complex in Pretoria, South Africa's administrative capital, offers the strongest support yet for a more hopeful take on omicron, although its author, Dr. Fareed Abdullah, gave reasons to be wary of drawing conclusions.

Abdullah, director of the Office of HIV/AIDS and Tuberculosis Research at the South African Medical Research Council, looked at the 42 patients with coronavirus who were in the hospital Thursday, and found that 29 of them, 70%, were breathing ordinary air. Of the 13 using supplemental oxygen, four had it for reasons unrelated to Covid.

Only one of the 42 was in intensive care, in line with figures released last week by the National Institute of Communicable Diseases, showing that only 106 patients were in intensive care over the prior two weeks, despite the surge in infections.

Most of the patients were admitted “for diagnoses unrelated to Covid-19,” the report said, and their infection “is an incidental finding in these patients and is largely driven by hospital policy requiring testing of all patients.” It said that two other large hospitals in Gauteng province, which includes Pretoria and Johannesburg, had even lower percentages of infected patients needing oxygen.

Abdullah said in an interview that he had walked into a Covid ward and found a scene unrecognisable from previous phases of the pandemic, when it would have been full of the humming and beeping of oxygen machines.

“Out of 17 patients, four were on oxygen,” he said. “That’s not in a Covid ward for me — that’s like a normal ward.”

Gurley, of Johns Hopkins, noted that the severity of disease reflects not just the variant but also who it is infecting. Two years into the pandemic, far more people have some level of immunity to the virus through vaccination, natural infection, or both, and that could translate to milder cases.

“We don’t know how to read the genetic sequences to say exactly how this variant will play out,” she said. “We’re getting more information now from South Africa, which is a particular population with a particular profile of preexisting immunity.”

Dr. Maria van Kerkhove, the World Health Organisation’s technical lead for Covid, told CBS News on Sunday, that even if it turns out that a lower percentage of omicron cases are serious, that could be balanced by a larger number of cases, meaning more hospitalisations and deaths.

Abdullah also looked at all 166 patients with the coronavirus who were admitted to the Biko-Tshwane complex between Nov. 14 and Nov. 29, and found that their average hospital stay was just 2.8 days, and fewer than 7% died. Over the

previous 18 months, the average stay for such patients was 8.5 days, and 17% died. Shorter stays would mean less strain on hospitals.

Eighty percent of the 166 patients were younger than 50, and similar figures have been reported throughout Gauteng — a sharp contrast to earlier cohorts of hospitalised Covid patients, who were usually older. That could result from South Africa having a relatively high vaccination rate in people older than 50 and a low rate in younger people, but one of the great unknowns about omicron is whether existing vaccines offer strong protection against it.

Part of the caution in interpreting Abdullah’s report is that the numbers in it are small, the findings have not been peer-reviewed and he does not know how many of the patients had omicron, as opposed to other variants of the coronavirus — although the government reported last week that it already accounted for three-quarters of virus samples in South Africa.

Abdullah acknowledged those drawbacks, and noted there could be a lag between omicron first turning up and a rise in serious illness and deaths. But so far, despite the huge increase in cases, Covid deaths have not risen in South Africa.



COVID-19 hit malaria services, led to more cases and deaths globally in 2020: WHO report

According to WHO’s latest World Malaria Report, an estimated 241 million malaria cases and 6,27,000 malaria deaths took place worldwide in 2020. This represents about 14 million more cases as compared to 2019, and 69,000 more deaths.

[COVID-19](#) pandemic has disrupted malaria services globally, leading to a marked increase in cases and deaths from the disease, new data from the World Health Organization (WHO) has revealed.

According to WHO's latest World Malaria Report, an estimated 241 million malaria cases and 6,27,000 malaria deaths took place worldwide in 2020. This represents about 14 million more cases as compared to 2019, and 69,000 more deaths. Approximately, two-thirds of these additional deaths (47,000) were linked to disruptions in the provision of malaria prevention, diagnosis and treatment during the pandemic, according to the report.

Sub-Saharan Africa continues to carry the heaviest malaria burden, accounting for about 95% of all cases and 96% of deaths in 2020. About 80% of deaths in the region were among children under 5 years of age.

Notably, the pandemic struck at a point when global progress against malaria had already plateaued. By around 2017, there were signs that the phenomenal gains made since 2000, including a 27% reduction in global malaria case incidence and a nearly 51% reduction in the malaria mortality rate, were stalling.

Since 2015, the baseline date for WHO's global malaria strategy, 24 countries have registered increase in malaria deaths. In the 11 countries that carry the highest burden of malaria worldwide, cases increased from 150 million in 2015 to 163 million in 2020 while deaths increased from 3,90,000 to 4,44,600 over the same period.

To get back on track, WHO and its partners recognise the need to ensure better and more equitable access to all health services, including malaria prevention, diagnosis and treatment, by

strengthening primary health care and stepping up both domestic and international investments.

Scientist Dr V S Chauhan, known for his contribution to the development of a recombinant vaccine for malaria, said although dealing with COVID pandemic will remain a major concern, it is important to re-focus attention on malaria so that gains achieved over decades of hard work are not lost. "Otherwise, malaria will again become a huge health problem, particularly when the Artemisinin-resistant strains have already been detected in Africa. Effective surveillance, early detection and treatment of malaria, and increased efforts in vaccine and drug development are the need of the hour," he said.

"COVID-19 pandemic has not only had a direct impact on human health and economies worldwide but has also seriously diverted attention from other major killer infectious diseases like malaria and tuberculosis. As suggested by the World Malaria Report, it is unfortunate and disturbing that both the number of cases as well as the number of deaths has significantly gone up," he added.

According to the WHO report, 15 countries with a high burden of malaria reported reductions in malaria testing by more than 20% in April-June 2020 compared to the same period in 2019. National Malaria Programmes distributed about 48 million fewer courses of treatment in 2020 compared to the previous year. And, of the world's 11 countries with the highest burden, only India registered progress against malaria. The 10 other countries, all in Africa, reported increase in cases and deaths.

In 2020, the global malaria case incidence rate was 59 cases per 1,000 people at risk against a target of 35 — putting it off track by 40%. The global mortality rate was 15.3 deaths per 1,00,000 people at risk against a target of 8.9 — putting it off track by 44%. Reaching the 2030

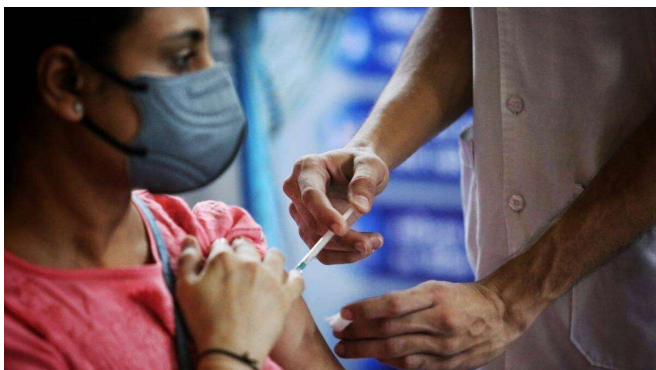
goals of the WHO malaria strategy, including a 90% reduction in global malaria incidence and mortality rates, will require new approaches, new tools and better implementation of existing ones, experts said.



Omicron Coronavirus India LIVE: India reports 7,350 new COVID-19 cases, 202 deaths in 24 hours

Covid-19 Active Cases India Dec 13 updates, New Omicron Variant Cases in India, Coronavirus Vaccine Statistics and Registration: Omicron has been detected in Maharashtra (18), Rajasthan (9), Karnataka (3), Karnataka (3), Kerala (1), Andhra Pradesh (1), Delhi (2) and Chandigarh (1).

By: [Express Web Desk](#) | New Delhi |
Updated: December 13, 2021 11:12:36 am



Omicron Covid-19 India Latest Update: The cumulative doses administered in the country so far under the nationwide COVID-19 vaccination drive has exceeded 133.17 crore.

Coronavirus LIVE Updates: India recorded 7,350 [COVID-19](#) cases and 202 fatalities in the last 24 hours, according to health ministry data. The cases, though lower than the number

recorded on Sunday, come at a time India has recorded 38 cases of the [Omicron](#) variant.

The new cases and fatalities have pushed India's COVID-19 tally of cases to 3,46,97,860 and death toll to 4,75,636. India's active COVID-19 case count has declined to 91,456.

Kerala, Andhra Pradesh and Chandigarh reported their first Omicron case on Sunday, while Maharashtra and Karnataka each recorded one more case of the COVID-19 variant, taking the tally in the country to 38. With this, Omicron has been detected in Maharashtra (18), Rajasthan (9), Karnataka (3), Karnataka (3), Kerala (1) and Andhra Pradesh (1) and Union Territories of Delhi (2) and Chandigarh (1).

India's top technical advisory body on Covid-19 vaccination has suggested that the third or the booster dose, when administered, should be of a vaccine based on a platform different from that of the first two doses.

Senior government sources told The Indian Express that the National Technical Advisory Group on Immunisation (NTAGI), the apex body that provides vaccination guidance after a technical review of the scientific evidence on immunisation policy and programmes — is still assessing the requirement for boosters.

Meanwhile, the World Health Organization said the Omicron coronavirus variant is more transmissible than the Delta strain and reduces vaccine efficacy but causes less severe symptoms according to early data.

To check the spread of the Omicron variant, Britain announced that bookings for booster doses of the COVID vaccine for those aged above 30 will open from Monday. In South Africa, where the variant was first reported, President Cyril Ramaphose was tested positive for COVID-19, even as the country recorded a new high of 37,875 new infections, dramatically up from the previous day's 17,154 new cases.

WHO must take care its communication on Omicron doesn't add to the sense of uncertainty about the virus

It is critical that global health authorities carefully measure every statement against the prevailing science. The message of caution should be delivered while taking care to do nothing that might sound alarmist

By: [Editorial](#) |

Updated: December 13, 2021 9:35:59 am



Since the SARS outbreak in the early years of this century, it has been evident that the world requires an efficient alert system when confronted with microbes that do not respect national boundaries.

Two weeks after the South African medical authorities alerted the world about the [Omicron](#) variant of SARS-COV2, there's no clarity about the magnitude of the threat posed by the latest mutation to the pathogen. While early reports indicate that the variant causes mild infections, there are understandable fears about its transmissibility and potential to evade vaccines. Travel restrictions have not stopped Omicron from dispersing in more than 50 countries. The WHO has criticised such restrictions but at the same time, its officials have talked about the highly infectious potential of the virus. Instead of exercising a calming

influence, the premier health body's messaging on Omicron seems to have added to the sense of uncertainty.

At different points in the past two weeks, WHO officials have given statements that make joining the dots difficult. For instance, they have said that Omicron could "change the course of the pandemic", and it could lead to vaccine hoarding. And, then revised their initial surmise about the transmissibility of the variant by saying that the "exact impact of Omicron is still difficult" to ascertain. Much of these discrepancies are, of course, because the science on Omicron is an evolving one and the global health body is right in underlining a safety-first approach, especially when it's about adopting the well-known Covid protocols, including masking and observing physical distance. However, the experience of the past two years shows that unequivocal messaging is amongst the key essentials of managing the social and economic fallouts of the pandemic. The new variant has emerged at a time when the virus seems to be taking divergent trajectories in different parts of the world. Hospitals in large parts of the Western world are overburdened by the ravages of the [Delta variant](#), while the pathogen seems to be at a low ebb in India, where schools and educational institutions are gradually beginning to resume physical classes. At such a juncture, it is critical that global health authorities carefully measure every statement against the prevailing science. The message of caution should be delivered while taking care to do nothing that might sound alarmist. It may not always be possible to avoid discrepancies in statements. But a careful explanation of the changed circumstances — the evolution of the state of knowledge, for instance — would do much to reassure people in a pandemic-weary world.

Since the SARS outbreak in the early years of this century, it has been evident that the world requires an efficient alert system when confronted with microbes that do not respect

national boundaries. The WHO is the only agency equipped to take up this challenge. It must improve its ways of messaging.



Omicron Covid-19 variant: Top international developments today

There is not significant data yet on how vaccines from Moderna, Johnson & Johnson and other drugmakers hold up against the new variant of Covid-19.

By: [Express Web Desk](#) |
December 8, 2021 3:45:28 pm



A person walks past a mobile coronavirus disease vaccine clinic during the spread of the Omicron coronavirus variant in Manhattan, New York, US on Dec 7, 2021. (Reuters)

In the two weeks since it was first reported, [Omicron](#) cases have been reported in 57 countries across all regions, said the World Health Organisation in its weekly epidemiological report. This has come with significant global impact — many countries have imposed travel curbs and vaccine mandates.

Here are the latest related developments:

Omicron reported in 57 countries, hospitalisations set to rise, says WHO

The Omicron variant has been reported in 57 nations, with Covid cases rising in southern Africa including Zimbabwe, and the number of patients needing hospitalisation is likely to rise as it spreads, the World Health Organization said on Wednesday.

The WHO, in its weekly epidemiological report, said more data was needed to assess the severity of disease caused by the Omicron variant and whether its mutations may reduce protection from vaccine-derived immunity. “Even if the severity is equal or potentially even lower than for [Delta variant](#), it is expected that hospitalizations will increase if more people become infected and that there will be a time lag between an increase in the incidence of cases and an increase in the incidence of deaths,” it said.

Pfizer may only partially protect against Omicron

Study suggests Pfizer [Covid-19](#) vaccine may only partially protect against Omicron. The Omicron variant of the [coronavirus](#) can partially evade the protection from two doses of Pfizer Inc and partner BioNTech's Covid-19 vaccine, the research head of a laboratory at the Africa Health Research Institute in South Africa said on Tuesday. Still, the study showed that blood from people who had received two doses of the vaccine and had a prior infection were mostly able to neutralise the variant, suggesting that booster doses of the vaccine could help to fend off infection.

There is not significant data yet on how vaccines from Moderna, Johnson & Johnson and other drugmakers hold up against the new variant. All the manufacturers, including Pfizer and BioNTech, are expected to release their own data within weeks.

Likely less severe, says Dr. Fauci

Top US infectious disease expert Dr. Anthony Fauci said on Tuesday that preliminary evidence

WHO Europe: Kids in 5-14 age group show highest Covid rates

WHO Europe regional director Dr Hans Kluge also argued that vaccine mandates should be "an absolute last resort," and said that COVID-19 deaths remain "significantly below previous peaks."

By: [AP](#) | Geneva |
December 8, 2021 5:28:03 pm



Keep your kids safe against COVID-19. (Source: Pexels)

The World Health Organization's office for Europe said Tuesday that [children in the 5 to 14 age group](#) now account for the highest rates of reported [COVID-19](#) infection in the region.

WHO Europe regional director Dr Hans Kluge also argued that vaccine mandates should be "an absolute last resort," and said that COVID-19 deaths remain "significantly below previous peaks." But he said that [coronavirus](#) cases and deaths have more than doubled in the last two months in the 53-country region stretching to central Asia.

He [stressed the continued threat from the widespread delta variant](#), and noted the new [omicron](#) variant has so far accounted for 432 confirmed cases in 21 countries in the region.

indicates that the Omicron variant of the coronavirus likely has a higher degree of transmissibility but is less severe. He said the United States was doing its own tests to determine the protectiveness of the current vaccines against the variant and expects results sometime next week. Umer Raffat, an analyst for Evercore ISI, cautioned against reading too much into a single study, noting there has been significant variability in measuring declines in antibody levels in previous lab studies. "Let's wait for additional studies to draw a mosaic," he said.

South Korea's daily virus jump exceeds 7,000 for first time

New coronavirus infections in South Korea exceeded 7,000 for the first time since the start of the pandemic on Wednesday as hours-long lines snaked around testing stations in the capital Seoul amid a worsening virus crisis. More than 5,600 of the new 7,175 cases were reported in Seoul and the nearby metropolitan region, where a delta-driven surge has led to a shortage of hospital beds and strained an already depleted health care workforce.

The country's death toll exceeded 4,000 after 63 virus patients died in the past 24 hours. The 840 patients in serious or critical conditions were an all-time high, the Korea Disease Control and Prevention Agency said.

Japan finds fourth case of Omicron variant

Japan has reported its fourth case of the Omicron coronavirus variant, TV Asahi said on Wednesday. The fresh case was a man in his 50s who had stayed in Nigeria, the network reported. The Japanese government has enforced tighter border controls against the Omicron variant.



Children have tended to face less severe cases than more vulnerable populations. (Source: Getty Images/Thinkstock)

“The delta variant remains dominant across Europe and Central Asia, and we know that the COVID-19 vaccines remain effective in reducing severe disease and deaths from it,” he told reporters from WHO Europe headquarters in Copenhagen, Denmark. It is yet to be seen how and whether the latest COVID-19 variant of concern, omicron, will be more transmissible, or more or less severe.

Kluge urged countries to [protect children and the schools](#) amid the rapid increase in cases among the young in the region, and said the incidence of COVID-19 was two to three times higher among young children than the average population in some places. Children have tended to face less severe cases than more vulnerable populations like older people, health care workers and people with weaker immune systems.

As school holidays approach, we must also acknowledge that [children contaminate their parents and grandparents at home](#), with a 10 times increased risk for these adults to develop severe disease, be hospitalized or die when non-vaccinated, he said.

The health risks extend beyond the children themselves. Kluge also spoke out [against vaccination mandates](#), saying they should be an absolute last resort and have efficacy only in some contexts.

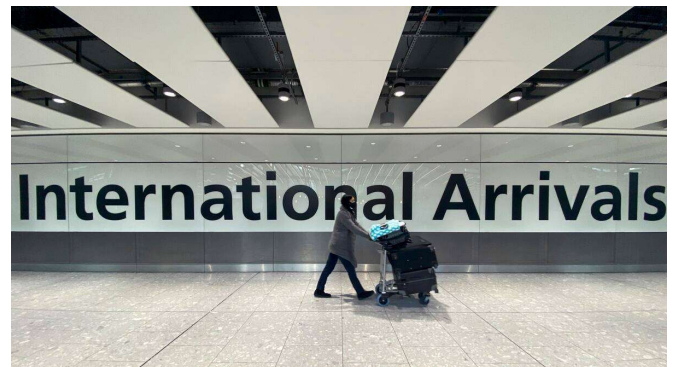
WHO's European region has the global epicenter of the pandemic for weeks, accounting for 70% of cases and 61 percent of deaths worldwide according to the U.N. health agency's weekly epidemiological report issued last week.



How much does RT-PCR cost at international airports in India?

Check out the rates for an RT-PCR or Rapid PCR test at international airports like Mumbai, Delhi, Chennai and Bengaluru.

By: [Express Web Desk](#) | New Delhi |
Updated: December 8, 2021 3:10:42 pm



A normal RT-PCR test costs Rs 600, a statement by Chhatrapati Shivaji Maharaj International Airport said. (File Photo)

With international airports across the country adhering to the Centre's revised Covid guidelines in the wake of the [Omicron](#) variant, passengers from countries considered “at-risk” are required to undergo a mandatory RT-PCR test upon arrival, including those fully vaccinated.

Amid these rules, the rates of the RT-PCR test, long queues, crowding and potential delays have been major concerns for international

travellers, with some airports charging over Rs 3,000 for a rapid test.

Here are the rates of RT-PCR tests across airports in India:

Mumbai

The Mumbai International Airport Limited run by Adani Airports had reduced the rate of a rapid PCR test to **Rs 3,900** per test from the earlier rate of Rs 4,500.

A normal RT-PCR test costs **Rs 600**, a statement by Chhatrapati Shivaji Maharaj International Airport said.

Additional Chief Secretary of the Maharashtra Health Department Dr Pradeep Vyas on Tuesday wrote to the Union Ministry of Health stating that the rates of Rapid RT-PCR tests at the Mumbai airport are too high.

Delhi

According to airport officials, there are two testing options at the Indira Gandhi International Airport: The first is to pay **Rs 500** for the test. The test results takes around six to eight hours.

The second is to pay **Rs 3,500** for a rapid PCR test and get the report in approximately 60 to 90 minutes.

Chennai

The Chennai International Airport on Tuesday reduced its RT-PCR rates. It is now charging **Rs 2,900** for a Rapid PCR test, down from the earlier Rs 3, 400. The rate of a normal RT-PCR has also been reduced from Rs 700 to **Rs 600**.

Kolkata

The Kolkata International Airport charges **Rs 700** for a normal RT-PCR test and **Rs 3,600** for a rapid PCR test. The time for results for both the tests is six hours and one hour, respectively.

Bengaluru

The Karnataka government on Tuesday [capped the prices for Covid testing](#) at the airports. At the Kempegowda International Airport in Bengaluru, while the conventional RT-PCR test, which takes the most time (nearly five hours to obtain results) is priced at **Rs 500**, the Cepheid Gene Expert test (results expected in 25 minutes) costs **Rs 2,750** per sample.

Ahmedabad

According to the Sardar Vallabhbhai Patel International Airport's website, a rapid PCR test will cost a passenger **Rs 2,700**.

Kozhikode

The Calicut International Airport on Tuesday announced that it has slashed the rates of a rapid PCR test to **Rs 1,580**.

Hyderabad

An RT-PCR test at the GMR Hyderabad International Airport costs **Rs 750** and a rapid PCR test costs **Rs 3,900**. The airport has a designated lab, Mapmygenome to book and conduct the tests.

The Airports Authority of India (AAI) has written to all regional heads that the [revenue share percentage for RT-PCR](#) and Rapid RT-PCR tests at airports should be withdrawn.

Under the present arrangement, a percentage of the fee charged by laboratories that undertake tests at airports is shared with the agency that runs the airport. The letter said that the benefit is to be passed on to passengers by reducing the cost of the tests.

Chennai airport slashes Covid-19 testing prices

The Tamil Nadu government had announced that it would bear the cost of random RT-PCR testing conducted on passengers arriving from non-risk countries.

By: [Express Web Desk](#) | Chennai |
December 8, 2021 11:31:36 am



Health workers inside an isolation ward for Covid-19 to treat patients infected with the Omicron variant, at Omandhurar Government Medical College Hospital, in Chennai, Monday, Dec. 6, 2021. (PTI Photo/R Senthil Kumar)

In a relief for international passengers, the Chennai International Airport has slashed the rates of Rapid PCR tests from Rs 3,400 to Rs 2,900, and RT-PCR tests from Rs 700 to Rs 600.

The decision, which comes into effect immediately, was taken days after the Centre and the state released fresh guidelines making it mandatory for international passengers arriving from at-risk countries to test for [Covid-19](#) at the airport. Passengers making up 2 per cent of the total arrivals from non-at-risk countries will also be tested.

The Tamil Nadu government had announced that it would bear the cost of random RT-PCR testing conducted on passengers arriving from

non-risk countries. The state health department said many labourers and other financially challenged people could be arriving in Tamil Nadu from these countries, and the move was taken to reduce their burden.

At the Chennai airport, an exclusive corridor with a holding area and amenities has been demarcated at T-4 to screen passengers arriving from at-risk countries. It can accommodate up to 500 passengers at a time. As per authorities, a host of passenger conveniences have been arranged there, including reclining chairs, F&B outlets, baby feeding rooms and a money exchange facility. Other amenities include entertainment screens, free Wi-Fi, free telephones, and a beverage vending machines. Information displays with the latest guidelines are in place to sensitise arriving passengers.

HLL Hindlabs is Chennai airport's Covid testing partner. Passenger can **pre-book** and pay for the test online to reduce their waiting time.

What schools need to do during pandemic

Rajib Dasgupta, N K Arora write: School life during and after the Covid-19 pandemic is not going to be the same.

Written by [Rajib Dasgupta](#) , [N K Arora](#) |
Updated: December 9, 2021 6:37:48 am

As [Covid-19](#) continues to show signs of ebbing in India, it's "back to school" now after nearly 600 days. There is continuing evidence from across the world that schools can be opened safely, and these institutions are not super-spreader spaces once they have mitigation measures in place. Two points of worry are emerging though.



Students resume offline classes amid the Covid pandemic (File photo)

Several education institutions across states have experienced institutional outbreaks of Covid-19 and the new sub-variant, [Omicron](#), has triggered concerns worldwide. The national genomic surveillance programme is tracking the variant and trying to ascertain if it is emerging as a major epidemiological concern in the Indian context.

Continued from page no.1

ICMR designs kit to detect new Covid-19 variant Omicron in 2 hours

...three to four days time to detect the Omicron variant with the help of the kits currently available in the market.

A team of scientists of Regional Medical Research Centre (RMRC) for the Northeast region, ICMR has developed a testing kit that enables to detect the Omicron variant of Covid-19 in real time.

The team led by scientist Dr Biswajyoti Borkakoty has prepared a kit that has the ability to detect the Omicron variant in 2 hours time from a given sample.

"ICMR-RMRC, Dibrugarh, has designed and developed a hydrolysis probe-based real-time RT-PCR assay for detection of the new Omicron variant (B.1.1.529) SARS-CoV-2 (Covid-19) that can detect the new variant within 2 hours. This is important because as of now a minimum of 36 hours is required for targeted sequencing and 4 to 5 days for whole-genome sequencing to detect the variant," said Dr. Borkakoty on Saturday.

The kit developed by ICMR-RMRC Dibrugarh is now being produced on a bulk basis by a 100 per cent made in India, a Kolkata-based company, GCC biotech on a public-private partnership (PPP) model. "The kit has been tested against specific synthetic gene fragments of Omicron variant of SARS-CoV-2 within two different highly specific unique regions of the spike protein and also reference wild type control synthetic gene fragments. Internal validation has shown that the tests are 100 per cent accurate," Dr. Borkakoty said.

It may be mentioned that in July 2020, a team of scientists led by Dr. Borkakoty had successfully managed to isolate the Covid19 virus (SARS-CoV-2) and by doing so ICMR-RMRC Dibrugarh became the third government laboratory in the country to achieve the feat.

States including Delhi, Rajasthan, Maharashtra, Karnataka, and Gujarat have reported cases of the new Covid-19 variant with the total number of Omicron cases in the country going up to 33. On November 26, the WHO named the new Covid-19 variant B.1.1.529, which has been detected in South Africa, as 'Omicron'.

Covid-19: BioNTech, Pfizer vaccine neutralises Omicron with three shots

Reuters | Dec 8, 2021, 06.27 PM IST

WASHINGTON: BioNTech and Pfizer said on Wednesday a three-shot course of their Covid-19 vaccine was able to neutralise the new Omicron variant in a laboratory test and they could deliver an Omicron-based vaccine in March 2022 if needed.

In the first official statement from vaccine manufacturers on the likely efficacy of their shot against Omicron, BioNTech and Pfizer said that two vaccine doses resulted in significantly lower neutralising antibodies but that a third dose of their vaccine increased the neutralising antibodies by a factor of 25.

Blood obtained from people that had their third booster shot a month ago neutralised the Omicron variant about as effectively as blood after two doses fought off the original virus first found in China. "Ensuring as many people as possible are fully vaccinated with the first two dose series and a booster remains the best course of action to prevent the spread of Covid-19" Pfizer boss Albert Bourla said in the statement.

The findings are broadly in line with a preliminary study published by researchers at the Africa Health Research Institute in South Africa on Tuesday, saying that Omicron can partially evade protection from two doses of the Pfizer/BioNTech vaccine, suggesting also that a third shot might help fend off infection.

A lab analysis at the university hospital of Frankfurt, Germany, however found a reduced antibody response to Omicron even after three shots.

Test kit cos seek Omicron +ve samples

TNN | Dec 13, 2021, 02.26 AM IST



Real-world samples and viral cultures are required to verify that test kits continually detect new variants of Covid-19

MUMBAI: Amidst the emergence of the latest Omicron variant and a need for accurate screening, diagnostic kit companies are feeling stymied due to the inaccessibility of 'positive samples', which may be required by them to upgrade and validate the strain. The access to 'positive blood samples' is considered important for development, upgradation and testing of Omicron as it is feared that the existing RT-PCR kits may not detect the mutant strain accurately, experts say.

According to WHO, the S gene is not present in the Omicron variant. Existing RT-PCR tests may suggest the presence but not confirm the variant, for which genome sequencing may be further required.

"Industry is waiting for the sample to upgrade and test for the strain. The private sector has never had access to the positive samples of any strain of Covid-19 during the past two years. Niti Aayog permitted only government laboratories/bodies to have access. Industry was asked to

send their developed products to ICMR for evaluation," an industry expert told TOI.

There have been discussions held between the Centre and industry on a policy which could facilitate the sharing of samples for a faster development of indigenous diagnostic kits, as is the established norm in certain developed countries. Real-world samples and viral cultures are required to verify that test kits continually detect new variants. Pune-based National Institute of Virology has already initiated efforts to isolate and culture the Omicron strain derived from a patient sample. There is at least one domestic manufacturer that is ready with the product to be submitted to ICMR for evaluation, the expert noted.

Domestic company Mylab announced that its kits detect coronavirus infection for 12 major variants. "Omicron variant would have no impact on the detection efficacy of our RT-PCR, rapid antigen, and self-testing kits," the company said.

THE TIMES OF INDIA

Omicron vs Delta: Battle of coronavirus mutants is critical

AP | Dec 7, 2021, 08.41 AM IST

NEW YORK: As the Omicron coronavirus variant spreads in southern Africa and pops up in countries all around the world, scientists are anxiously watching a battle play out that could determine the future of the pandemic. Can the latest competitor to the world-dominating Delta overthrow it?

Some scientists, poring over data from South Africa and the United Kingdom, suggest Omicron could emerge the victor.

"It's still early days, but increasingly, data is starting to trickle in, suggesting that Omicron is likely to outcompete Delta in many, if not all, places," said Dr Jacob Lemieux, who monitors variants for a research collaboration led by Harvard Medical School.

But others said Monday it's too soon to know how likely it is that Omicron will spread more efficiently than Delta, or, if it does how fast it might take over.

"Especially here in the U.S., where we're seeing significant surges in Delta, whether Omicron's going to replace it I think we'll know in about two weeks," said Matthew Binnicker, director of clinical virology at Mayo Clinic in Rochester, Minnesota.

Many critical questions about Omicron remain unanswered, including whether the virus causes milder or more severe illness and how much it might evade immunity from past Covid-19 illness or vaccines.

On the issue of spread, scientists point to what's happening in South Africa, where Omicron was first detected. Omicron's speed in infecting people and achieving near dominance in South Africa has health experts worried that the country is at the start of a new wave that may come to overwhelm hospitals.

The new variant rapidly moved South Africa from a period of low transmission, averaging less than 200 new cases per day in mid-November, to more than 16,000 per day over the weekend. Omicron accounts for more than 90% of the new cases in Gauteng province, the epicenter of the new wave, according to experts. The new variant is rapidly spreading and achieving dominance in South Africa's eight other provinces.

"The virus is spreading extraordinarily fast," said Willem Hanekom, director of the Africa Health Research Institute. "If you look at the slopes of this

wave that we're in at the moment, it's a much steeper slope than the first three waves that South Africa experienced. This indicates that it's spreading fast and it may therefore be a very transmissible virus."

But Hanekom, who is also co-chair the South African Covid-19 Variants Research Consortium, said South Africa had such low numbers of Delta cases when Omicron emerged, "I don't think we can say" it out-competed Delta.

Scientists say it's unclear whether Omicron will behave the same way in other countries as it has in South Africa. Lemieux said there are already some hints about how it may behave; in places like the United Kingdom, which does a lot of genomic sequencing, he said, "we're seeing what appears to be a signal of exponential increase of Omicron over Delta."

In the United States, as in the rest of the world, "there's still a lot of uncertainty," he said. "But when you put the early data together, you start to see a consistent picture emerge: that Omicron is already here, and based on what we've observed in South Africa, it's likely to become the dominant strain in the coming weeks and months and will likely cause a surge in case numbers."

What that could mean for public health remains to be seen. Hanekom said early data from South Africa shows that reinfection rates are much higher with Omicron than previous variants, suggesting the virus is escaping immunity somewhat. It also shows the virus seems to be infecting younger people, mostly those who are unvaccinated, and most cases in hospitals have been relatively mild.

But Binnicker said things could play out differently in other parts of the world or in different groups of patients. "It'll be really interesting to see what happens when more infections potentially occur in older adults or

those with underlying health conditions," he said. "What's the outcome in those patients?"

As the world waits for answers, scientists suggest people do all they can to protect themselves.

"We want to make sure that people have as much immunity from vaccination as possible. So if people are not vaccinated they should get vaccinated," Lemieux said. "If people are eligible for boosters, they should get boosters, and then do all the other things that we know are effective for reducing transmission -- masking and social distancing and avoiding large indoor gatherings, particularly without masks."

THE TIMES OF INDIA

Covid-19: World rushes to boost against Omicron, but questions remain

Bloomberg | Dec 10, 2021, 09.01 PM IST



The arrival of the Omicron variant has triggered a global rush for booster shots, as scientists and governments see a third dose as the most expedient strategy against the new strain that appears to cause a marked loss of vaccine protection.

In the days after earliest findings showed that omicron caused a 25 to 40- fold loss of neutralizing antibodies from the Pfizer Inc.-BioNTech SE vaccine, the second-most used shot across the world, the US expanded booster access to teenagers while countries like the UK and South Korea are slashing wait times for a third dose in half, to three months.

More governments are certain to follow, while places less awash with vaccines in the developing world are trying to secure additional stock from manufacturers. BioNTech founder Ugur Sahin said earlier this week that the mRNA shot "should be a three-dose vaccine" to fight the new strain, and the third dose could come as early as three months after the second.

But questions remain over whether the rush to booster is the right strategy against omicron.

The World Health Organization has expressed reservation, emphasizing that the world must work to ensure vaccine access to those yet to receive their first doses before richer governments roll out boosters to the general population. That's the only way to prevent the emergence of new strains like omicron, it said. New two omicron cases in Singapore had already received third shots coursed through financial markets, damping bullishness fueled by the Pfizer-BioNTech studies earlier in the week.

Researchers also caution that the science has yet to definitively show that shorter intervals for boosters than the current sixmonth norm creates higher immune protection against omicron or other variants.

"There is no data yet on whether they are needed three or six months after, and there could be a difference," said Jin DongYan, a virologist at Hong Kong University.

Widening gap

Complicating matters is emerging evidence that boosters given later rather than sooner could be more potent when it comes to inactivated vaccines like the one made by China's Sinovac Biotech Ltd. While less effective against the original coronavirus and the delta strain than messenger RNA shots, Sinovac's vaccine is the most widely used in the world -- 2.3 billion doses have been shipped out, mostly to developing countries.

A study published in the Lancet medical journal this week found the increase in protective antibodies from Sinovac's vaccine was significantly muted for those getting a third dose as soon as two months after the second, compared to those getting it eight months afterward.

Despite the lingering uncertainty, the gap between the unvaccinated and the boosted is already widening across the world and within individual countries.

In the US, fully vaccinated people are lining up for third shots amid concern over Omicron, while the US Centers for Disease Control and Prevention extended access to 16 and 17 year-olds this week. That's driving a divide between those who are triple vaccinated and those who haven't received any shots at all.

On Friday, South Korea revised down the interval for booster shots to three months as one of Asia's most-vaccinated countries grappled with a double whammy of record infections and the detection of omicron among patients.

UK Prime Minister Boris Johnson also promised to slash the six-month wait time between second and third doses by half next week amid signs omicron is spreading among Britons.

Three-dose norm

Elsewhere, especially among developing countries still struggling to procure adequate vaccine stock, anxiety is rising over booster access: In Vietnam, which is still battling a protracted virus wave that has disrupted its export-reliant economy, the government announced this week a target to give boosters to the entire population in the first six months next year, though less than 60% of its population are currently fully vaccinated.

In India, which has not yet started a third-dose campaign with only 36% of its population having received two doses, medical associations are calling for boosters for front-line health workers to keep them safe.

South Africa, where omicron was first detected, said it will start rolling out boosters from early next month.

Apart from Pfizer and BioNTech, no other vaccine maker has yet released findings on how their shots hold up against omicron, and the implications of a shorter booster interval strategy. Little is known on how viral vector vaccines developed by companies including AstraZeneca Plc and Johnson & Johnson and inactivated shots made by the Chinese companies react to the new strain, compared to messenger RNA doses.

Yet given the fear that Omicron may reverse the world's efforts to emerge from the pandemic, the booster race is likely only to accelerate in the coming weeks.

"Fully vaccinated will mean three doses," said HKU's Jin. "That will likely become the universal requirement across governments around the world."

THE TIMES OF INDIA

Omicron now has three sub-variants

TNN | Dec 13, 2021, 02.48 AM IST

HYDERABAD: Omicron, the new coronavirus variant of concern, now has three siblings - one up from two sub-lineages discovered last week, reports Syed Akbar.

According to Phylogenetic Assignment of Named Global Outbreak Lineages (Pangolin) that assigns lineages under 'Pango lineage' system to various viruses, including the novel coronavirus that causes Covid-19, the third outlier of Omicron was found from a sample collected from England on December 3. The new outlier of Omicron variant has been temporarily named 'England/MILK-2D24AC9/2021'.

Dr Vinod Scaria of Institute of Genomics and Integrative Biology (IGIB), New Delhi, has confirmed the development. Omicron, or B.1.1.529, split into two sub-lineages of BA.1 and BA.2 earlier this month. These two variants have some shared mutations.

THE TIMES OF INDIA

Omicron variant 'almost certainly' not more severe than Delta, says Fauci

AFP | Dec 7, 2021, 09.38 PM IST

WASHINGTON: Top US scientist Anthony Fauci said Tuesday that while it would take weeks to judge the severity of the new Covid-19 variant Omicron, early indications suggested it was not

worse than prior strains, and possibly milder. "It almost certainly is not more severe than Delta," Fauci told AFP in an interview. "There is some suggestion that it might even be less severe," he added.



"I think that's going to take another couple of weeks at least in South Africa and then as we get more infections throughout the rest of the world, it might take longer to see what's the level of severity."



Omicron currently not posing burden on Indian health sector: ICMR

Dec 10, 2021, 11:22PM IST Source: ANI

Director General of Indian Council of Medical Research (ICMR) Dr Balram Bhargava informed through a presser on December 10 that clinically Omicron is not yet posing burden on Indian health sector. "Regular meetings are being organised to keep a watch on global scenario and Covid scene in India with a focus on Omicron. We need help to not spread panic. District level restrictions to be implemented where positivity over 5%", said Dr Bhargava.

Treatment for the virus remains unchanged, ICMR DG further said.

THE TIMES OF INDIA

Omicron has mild symptoms; no loss of taste, smell: Doctors

TNN | Dec 7, 2021, 04.40 AM IST

JAIPUR: After keeping a close eye on the symptoms of the nine cases of the Omicron variant of Covid-19, doctors at the Sawai Man Singh (SMS) Medical College have said they did not find any complications and the symptoms were mild.

The doctors said the symptoms of the Omicron variant were mostly different from that of the Delta variant, which dominated the second wave of Covid-19. The doctors claimed that the criticality is much less in Omicron than in the Delta variant.

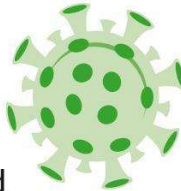
"All nine patients are stable. While some of them are asymptomatic, others have mild symptoms. They do not have complications and are on the path of recovery," Dr Sudhir Bhandari, principal, and controller of SMS medical college, told TOI.

The doctors are conducting their tests, including HRCT and other tests such as D-dimer, but none of them reported any complications. In Omicron-positive patients, involvement of lungs has not been found yet, which was quite common among Delta patients. "None of the nine patients have lost their taste or smell. This is unlike the Delta variant. Also, none of them has any difficulty in breathing and they do not require any oxygen," said Dr Bhandari, who added that they are constantly monitoring the situation in South Africa, where the Omicron variant is taking a toll on the health of the people.

RAJ BEGINS TAKING STEPS TO CHECK OMICRON

A DAY AFTER 9 PERSONS TESTED POSITIVE FOR THE NEW COVID VARIANT, THE HEALTH DEPT HAS STARTED TAKING STEPS TO CONTAIN ITS SPREAD

- A separate ward will be created for Omicron cases
- Genome sequencing of all Covid cases to be conducted
- For all those coming from abroad, effective tracking and tracing will be done
- All suspected Covid cases should be isolated if they test positive
- Anticipating third wave, directions have been issued to health authorities to remain prepared with oxygen generation plants, ICU beds and other facilities
- Directions have been issued for imparting training to doctors and nursing staff on ICU management and oxygen therapy treatment protocol
- Extensive directions have been issued for sampling of influenza-like illness and pneumonia patients coming to hospitals for treatment



Arvind Sharma

➤ An action plan will be prepared for prevention and control of Covid, under which sampling and testing of all primary and secondary contact tracing and RT-PCR testing, daily review and follow five-fold strategy (test, track, treatment, vaccination and appropriate behaviour) will be emphasised

➤ A videoconferencing was done on Monday in which principal secretary (health) Akhil Arora and secretary Vaibhav Galriya issued directions to all principals and controllers of medical colleges, chief medical health officers, principal medical officers and other senior officials of health department

“ The more the sampling is done, the more effectively the spread of the Covid can be prevented

VAIBHAV GALRIYA | HEALTH SECRETARY

"In South Africa, out of 1,000 patients, only 4.9% required ICU beds. The criticality is less in the case of Omicron, but manifold transmissibility and infectivity is a concern," said Dr Bhandari.

Since omicron has entered the state, Dr Bhandari said two doses of vaccination is important as those who are doubly vaccinated have very mild symptoms. The doctor also urged residents to follow Covid appropriate behaviour.

THE TIMES OF INDIA

ICMR focus on two-dose vax, is fine with current Covishield gap

TNN | Dec 12, 2021, 04.31 AM IST

PUNE: The Indian Council of Medical Research (ICMR) has advised against suddenly introducing a third Covid vaccine dose or recommending any change in the time gap of Covishield shots in the wake of Omicron cases. Dr Samiran

Omicron spreads faster and weakens jabs: WHO

AFP | Dec 12, 2021, 10.06 PM IST



GENEVA: The Omicron coronavirus variant is more transmissible than the Delta strain and reduces vaccine efficacy but causes less severe symptoms according to early data, the World Health Organization said Sunday.

The Delta variant, first identified in India earlier this year, is responsible for most of the world's coronavirus infections.

But South Africa's discovery of Omicron -- which has a large number of mutations -- last month prompted countries around the world to impose travel bans on southern African countries and reintroduce domestic restrictions to slow its spread.

The WHO said Omicron had spread to 63 countries as of December 9. Faster transmission was noted in South Africa, where Delta is less prevalent, and in Britain, where Delta is the dominant strain.

But it stressed that a lack of data meant it could not say if Omicron's rate of transmission was because it was less prone to immune responses, higher transmissibility or a combination of both.

Panda, head of ICMR's epidemiology department, told TOI that as of now the apex biomedical research body would underscore the importance of attaining greater coverage with two-dose vaccination.

"With Omicron cases being mild not only in India but the world over, there should not be any knee-jerk reaction like introducing a third dose or recommending any change in the interval of Covishield doses," he said

"A decision on whether a third dose would be required for immunocompromised individuals would be taken later," Dr Panda said.

He said scientific evidence of booster dose for the Indian terrain was being evaluated and the technical advisory group would make an announcement regarding it.

Dr Panda said public health focus should be on double vaccination and completing the adult immunisation programme now because the two-dose vaccine strategy seemed to be working well in the Indian context.

On the demand from states like Maharashtra, Kerala and Karnataka to reduce the gap between the two Covishield doses, the ICMR scientist said scientific evidence from in-country reality was showing that the interval was fine.

Virologist Dr Shahid Jameel said a booster shot would increase the number of circulating antibodies and it had shown to increase the protection against symptomatic infection with Omicron.

"We don't know how well two doses continue to protect against severe disease. In the UK, those who got the AstraZeneca vaccine are getting a booster of the mRNA Pfizer or Moderna vaccine. A third dose of AstraZeneca will not be very effective because of its nature," he said.

Early evidence suggests Omicron causes "a reduction in vaccine efficacy against infection and transmission", the WHO said in a technical brief.

"Given the current available data, it is likely that Omicron will outpace the Delta variant where community transmission occurs," it added.

Omicron infections have so far caused "mild" illness or asymptomatic cases, but the WHO said the data was insufficient to establish the variant's clinical severity.

South Africa reported Omicron to the WHO on November 24. Vaccine manufacturers Pfizer/BioNTech last week said three doses of their jabs were still effective against Omicron.

Countries with sufficient vaccine supplies such as Britain and France have encouraged their populations to receive a third "booster" jab to fight Omicron.

THE TIMES OF INDIA

ICMR's new rapid tests set to be cheaper, give results in 30 mins

TNN | Dec 8, 2021, 02.52 AM IST



PUNE: A soon-to-be-introduced and visually interpreted rapid Covid test - developed by the

Indian Council of Medical Research-National Institute of Virology and transferred to Chennai and Delhi-based companies for production - could cut down the cost and the turnaround time by almost 40%, ICMR-NIV officials said.

The test would be made available within two weeks at the airports in India and other places. The companies have been asked to scale up production amid Omicron concerns.

The molecular-based technology used in this rapid test kit neither requires expensive machines like RTPCT, high-speed centrifuges nor a skilled workforce to conduct the test.

"The test, RT-LAMP, has 100% sensitivity and 100% specificity. It takes only 30-40 minutes to churn out the result, which can be visually interpreted. Also, the test can be very easily deployed at the airports, docks, railway stations and other entry points for the screening of patients for Covid as it doesn't require sophisticated machinery and skilled workforce," said an ICMR official.

The RT-LAMP kit is validated by the National Institute of Biologicals, Noida. "It will be cheaper than rapid RTPCR," an ICMR official said. As against the current rapid PCR test which costs Rs 3,900 and takes an hour, the ICMR-NIV-developed test kit is likely to be costing not more than Rs 3,000.



'Keep your guard up, you cannot be casual at this time', say doctors as the number of Omicron cases rise

By - TNN
[Riya Sharma](#)

As the Omicron variant hits the country and new cases are being reported from various states, doctors say that this is not the time to let your guard down. With the number of cases going down until last month and life returning to normal, many had started taking [COVID](#) Appropriate Behaviour (CAB) lightly. But as the new variant arrives in the country, doctors advise that all COVID protocols need to be reinforced, social gatherings and unnecessary travel should be avoided, and vaccination should be given the utmost importance.



Adhere to COVID appropriate behaviour strictly: Doctors

The World Health Organisation has already designated it as a 'variant of concern'. Dr Anupam Sibal, Group Medical Director and Senior Pediatrician, Apollo Hospitals Group, says, "People can step out but should follow CAB. Masking, social distancing and handwashing/use of sanitisers are a must. As a community, we need to keep our guard up. We cannot be casual. We need to adhere to CAB strictly and at all times. Those who are not vaccinated, need to get vaccinated at the earliest."

MEASURES ONE SHOULD TAKE

- Wash your hands, avoid unnecessary surface contacts, follow social distancing and always wear your masks
- Those who are not vaccinated, need to get vaccinated at the earliest
- At workspaces, temperature screening at the entrance, conscious social distancing, surface and hand sanitisation need to come back in practice
- Avoid unnecessary travel, social gatherings, and crowded places
- At weddings, break the celebrations into different functions. Avoid indoor celebrations and make sure all guests are fully vaccinated



There is a need to reinforce all protocols as guards were lowered during festivities, say doctors. "We should recall the basic protocols of hand hygiene, avoid unnecessary surface contacts, follow social distancing and always wear masks."

AT WORKSPACES, TEMPERATURE SCREENING AT THE ENTRANCE, CONSCIOUS SOCIAL DISTANCING, SURFACE AND HAND SANITISATION NEED TO COME BACK IN PRACTICE
– Dr Anupam Sibal

At workspaces, temperature screening at the entrance, conscious social distancing, surface and hand sanitisation need to come back in practice. People should get their pending vaccination done. If one feels there are signs of fever, cough or COVID like symptoms, report to a doctor and get yourself tested. Do not ignore these symptoms," shares Dr Samir Singh, Associate Director and Regional Head (North West Cluster) - Medical Services, Manipal Hospitals.

He adds, "We need to avoid unnecessary social

gatherings, crowded places unless absolutely necessary, leisure travels and dining out at packed outlets. And we must save ourselves from rumours coming from unauthorised sources and not panic. At present, limited studies do suggest that it spreads considerably, but also that it is causing less severe damage and perhaps it may prove to be beneficial for developing herd immunity, only time (and research) would tell. For now, keep the guards up till there is concrete evidence of its virulence and control."

'Get vaccinated if not done already'

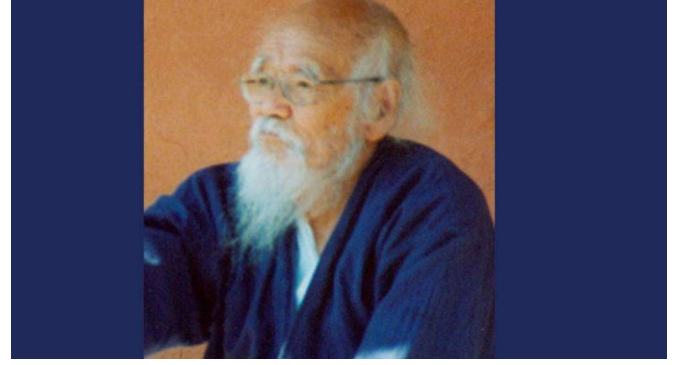
The second wave has been more devastating for all of us, and experts share that we cannot overwhelm the system again. Dr Sushila Kataria, Senior Director, Internal Medicine, Medanta, explains, "When the system gets overwhelmed, it becomes devastating than the disease itself. So if we don't want a situation like that, we need to reduce the spread. We should follow CAB, get vaccinated and if someone has symptoms, get tested early and isolate so that the chain of infection can be broken."

Talking about the ongoing wedding season, Dr Sushila adds that it is important for people to limit the number of guests. "Break the celebrations into different functions and invite different people at different functions, always host the function outdoors and ensure that is proper ventilation if it is an indoor ceremony. The most important factor is that everyone attending should be fully vaccinated," she says.

Dr Neetu Jain, Senior Consultant, Pulmonology, PSRI Hospital, agrees as she says that there is no alternative to the vaccine. "Protect the elderly and those with co-morbidities by keeping them away from cro



ஜப்பானில் உதித்த விவசாய சூரியன்



ஃபுகோக்கா அறுவடைக்குப் பின்பு வைக்கோலை நிலத்துக்கே திருப்பிக் கொடுத்தார். அதனால் ஆண்டுதோறும் நிலவளமும் உயர்ந்தது; விளைச்சலும் அதிகரித்தது. இனி, ஃபுகோக்காவின் ஆராய்ச்சி பற்றி அவரது வார்த்தைகளிலேயே பார்ப்போம்.

Written By [WebDesk](#)

Updated: December 6, 2021 1:28:38 pm

த. வளவன், மூத்த பத்திரிகையாளர்

இயற்கை உழவாண்மை என்பது உலகின் பாரம்பரியமான ஒன்று. ஆனால், காலப்போக்கில் உலகம் முழுக்கவே அது அழிக்கப்பட்டுவிட்டது. நாற்பது வருட காலத்துக்கு முன் அதை மீட்டெடுத்து உலகுக்கு மீண்டும் அறிமுகப்படுத்தியவர் ஜப்பான் நாட்டைச் சேர்ந்த விவசாய ஆராய்ச்சியாளர் மசனோபு ஃபுகோக்கா.

வேளாண் பட்டம் பெற்ற அரசுத் துறையில் பணி புரிந்தவர் மசனோபு ஃபுகோக்கா. கடும்

நஞ்சான டி.டி.டி பூச்சிக்கொல்லி மருந்தை

ஹெலிகாப்டர் மூலம் பயிர்களுக்கு தெளிக்கச் சொல்லி, அந்த நாட்டு அரசு உத்தரவிட்டது. ஆனால், 'உயிர்களைக் கொல்வது புத்த தர்மத்துக்கு விரோதமானது' என்று கருதிய ஃபுகோக்கா, தான் பார்த்து வந்த அரசுப் பணியை உடனடியாக உதறிவிட்டு, தன் தந்தையின் நிலத்தில் விவசாயம் மற்றும் அது தொடர்பான ஆராய்ச்சியில் இறங்கினார். அவரது ஆராய்ச்சி முடிவுகள் இரு புத்தகங்களாக வெளிவந்துள்ளன. 'ஓற்றை வைக்கோல் புரட்சி', இயற்கை வழி வேளாண்மை ' என்கிற இரண்டு புத்தகங்களும் விவசாயம் குறித்த அதிர்ச்சிகரமான கேள்விகளை எழுப்பிப் பலரையும் திரும்பிப் பார்க்க வைத்தன.

நவீன விவசாயத்தில் நாளுக்கு நாள் மண் வளம் குறைந்து கொண்டே போகிறது; வேலையும் பணச் செலவும் கூடிக்கொண்டே போகிறது. இதற்கு மாறாக ஃபுகோக்காவின் இயற்கை உழவாண்மையில் நில வளம் உயர்ந்து கொண்டே போகிறது. வேலையும் பணச் செலவும் குறைந்து கொண்டே போகிறது. இது எப்படி சாத்தியம்? 'இயற்கைக்கே திருப்பியளிப்போம்' என்னும் விதிதான் அதைச் சாத்தியப்படுத்தியிருக்கிறது. ஃபுகோக்கா அறுவடைக்குப் பின்பு வைக்கோலை நிலத்துக்கே திருப்பிக் கொடுத்தார். அதனால் ஆண்டுதோறும் நிலவளமும் உயர்ந்தது; விளைச்சலும் அதிகரித்தது. இனி, ஃபுகோக்காவின் ஆராய்ச்சி பற்றி அவரது வார்த்தைகளிலேயே பார்ப்போம்.

'பூமியின் இயற்கை வளம் குறித்து உங்களுக்குப் புரிதல் வர வேண்டுமா? மனிதனின் கால் படாத காட்டுப் பகுதிக்குள் சென்று பாருங்கள். அங்குள்ள மரக்கூட்டங்களுக்கு யாரும் ரசாயன உரம்

போடவில்லை, பூச்சிக்கொல்லி நஞ்சு தெளிக்கவில்லை. நிலத்தை உழாமல் முதல் முறையாக நெல் பயிர் செய்து அறுவடை செய்தபோது, அமெரிக்காவை கண்டுபிடித்த சமயத்தில் கொலம்பஸ் எவ்வளவு மகிழ்ச்சி அடைந்தாரோ... அந்த அளவுக்கு நான் மகிழ்ச்சி அடைந்தேன். ஜப்பான் நாட்டிலேயே எனது வயல் ஒன்று தான் கடந்த 20 ஆண்டுகளுக்கும் மேலாக உழப்படாமல் இருந்து வருகிறது.

நிலத்தில் ரசாயன உரங்களும் பூச்சிக்கொல்லி நஞ்சுகளும் பயன்படுத்தப் படாவிட்டால், இப்போது கிடைக்கும் விளைச்சலில் பத்தில் ஒரு பங்கு குறையலாம். ஆனால், இயற்கையின் சக்தி நமக்கு அப்பாற்பட்டது. முதற்கட்ட இழப்புக்குப் பிறகு, விளைச்சல் அதிகரிக்கத் துவங்கி விரைவிலேயே முதலில் எடுத்த விளைச்சலை மிஞ்சிவிடும்.

கால் ஏக்கர் நிலத்தில் பல லட்சம் சிலந்திகள் வாழ்கின்றன. அவை பல ஆயிரம் மீட்டர் நீளமுள்ள வலைகளைப் பின்னுகின்றன. பயிரை அழிக்கும் தாய்ப் பூச்சிகள், சிலந்தியின் வலையில் சிக்குவதால் பயிர்கள் காப்பாற்றப்படுகின்றன. ஆனால், ரசாயனப் பூச்சிக்கொல்லிகள் தெளிக்கப்படும்போது சிலந்தி வலைகள் நொடியில் அழிக்கப்படுகின்றன.

நெல் அறுவடைக்குப் பின்பு வைக்கோல், உமி ஆகியவற்றை நிலத்தில் பரப்பினேன். முதல் பயிர் அறுவடைக்கு முன்பாகவே களிமண் பூசிய விதைகளை அந்த நிலத்தில் விதைத்து விடுகிறேன், அறுவடைக்குப் பின்பு வைக்கோலால் நிலத்தை மூடும் போது, இளம் பயிர் செழித்து வளர்கிறது. களைகளும் போட்டி போடுவது இல்லை. நான் கொஞ்சம் நெருக்கமாகவே விதைப்பேன். ஒரு சதுர

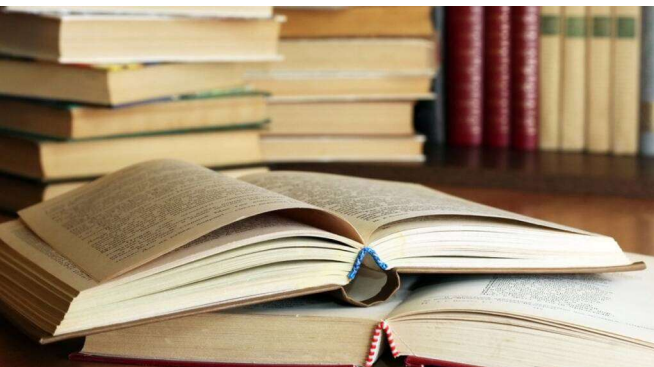
அடியில் 250 முதல் 300 நெல்மணிகள் வரை உள்ள கதிர்கள் விளைகின்றன.

இப்படியெல்லாம் பேசுகிற ஃபுகோக்காவின் சிந்தனையில் தத்துவம் சிறப்பான இடத்தைப் பற்றிக் கொள்கிறது என்பது முக்கியமாக கவனிக்கப்பட வேண்டிய விஷயம். 'உழவாண்மையில் இயந்திரப் பயன்பாடு குறைய வேண்டும். பொருளாசையைக் கட்டுப்படுத்த வேண்டும். இப்படிச் செயல்பட்டால், வேலை சுகமாக இருக்கும். ஆத்ம ஆனந்தம் அதிகரிக்கும்' என்பதே அவருடைய அடிப்படை தத்துவம்.

மருத்துவர்கள், நோயாளிகளை கவனித்துக் கொள்கிறார்கள். இயற்கை ஆரோக்கியமானவர்களை கவனித்துக் கொள்கிறது. இயற்கைச் சூழலில், நோய் அண்டாது வாழ்வதே சிறந்த வாழ்க்கை



170 பொறியியல், மருத்துவம், சட்ட, வேளாண் புத்தகங்கள் தமிழில் மொழிபெயர்ப்பு



ஒவ்வொரு புத்தகத்திலும் 150 புத்தகங்களைப் பெற்று கல்லூரிகளுக்கு

விநியோகம் செய்ய இருப்பதாக உயர்க் கல்வித்துறை அறிவித்துள்ளது. மாணவர்கள் தனியாக பிரதிகளைப் பெற விரும்பினால், பாடநூல் கழகத்திடம் வாங்கிக் கொள்ள இயலும்.

Written By [WebDesk](#)

Updated: December 13, 2021 10:04:32 am

Muthamizh Arignar Translation Project : பொறியியல், மருத்துவம், சட்டம், கால்நடை மருத்துவம், வேளாண் பாடப்பிரிவுகளில் படிக்கும் மாணவர்கள் மிக விரைவில் தங்களின் பாட புத்தகங்களை தமிழில் பெற உள்ளனர். தமிழ்நாடு பாடநூல் மற்றும் கல்வியியல் பணிகள் கழகம் மொழிப் பெயர்ப்பிற்காக 170 புத்தகங்களை அடையாளம் கண்டுள்ளது. பெங்குயின், பியர்சொ, ஆக்சுபோர்ட் பல்கலைக்கழகம், ஓரியண்ட் ப்ளாக்ஸ்வான், எல்ஸ்வியர், மெக்ரோ ஹில் மற்றும் உள்ளூர் பதிப்பகமான கல்யாணி போன்ற புகழ்பெற்ற பதிப்பகங்களின் புத்தகங்களை தமிழில் மொழி பெயர்த்து முத்தமிழ் அறிஞர் மொழிபெயர்ப்புத் திட்டத்தின் கீழ் அசல் வெளியீட்டாளர்கள் மற்றும் பாடநூல் கழகத்தால் கூட்டாக வெளியிடப்படும் என்று அறிவிக்கப்பட்டுள்ளது.

கல்லூரிகள் மற்றும் பல்கலைக்கழகங்களில் இருந்து மூத்த பேராசிரியர்கள் மற்றும் மொழிபெயர்ப்பாளர்கள் மொழிபெயர்ப்பு திட்டத்திற்காக இணைக்கப்பட்டுள்ளனர். முதற்கட்டமாக, ஜூன் 2022-க்குள் தமிழில் 50 பாடப்புத்தகங்கள் வெளியிடப்படும். அடுத்த கட்டமாக மேலும் 50 பாடப்புத்தகங்கள் மொழிபெயர்க்கப்படும் என்று தமிழ்நாடு பாடநூல் மற்றும் கல்விப் பணிகள்

கழகத்தின் துணை இயக்குநர் (மொழிபெயர்ப்புகள்) டி சங்கர சரவணன் தெரிவித்தார்.

இந்த புத்தகங்கள் கிராமப்புற மாணவர்களுக்கு தமிழில் கிடைக்க வேண்டும் என்பதே இந்த திட்டத்தின் நோக்கம். சர்வதேச மற்றும் தேசிய வெளியீட்டாளர்களின் அட்டவணையில் இந்த புத்தகங்கள் தமிழிலும் கிடைக்கும் என்று குறிப்பிடப்பட்டுள்ளது. இந்த புத்தகங்கள் பல ஆண்டுகளாக அச்சில் இருப்பதை உறுதி செய்யும். அதே போன்று புதிய சந்தை கிடைப்பதால் பதிப்பகத்தாரும் மகிழ்ச்சி அடைகின்றனர் என்று அவர் டைம்ஸ் ஆஃப் இந்தியாவிற்கு அளித்த பேட்டியில் கூறியுள்ளார்.

தமிழில் மொழிபெயர்க்கப்பட்ட புத்தகங்களை கல்லூரிகள் மற்றும் பல்கலைக்கழக நூலகங்களில் வைக்க ஏற்பாடுகள் செய்யப்படும் என்று அறிவிக்கப்பட்டுள்ளது. ஒவ்வொரு புத்தகத்திலும் 150 புத்தகங்களைப் பெற்று கல்லூரிகளுக்கு விநியோகம் செய்ய இருப்பதாக உயர்க் கல்வித்துறை அறிவித்துள்ளது. மாணவர்கள் தனியாக பிரதிகளைப் பெற விரும்பினால், பாடநூல் கழகத்திடம் வாங்கிக் கொள்ள இயலும்.

தற்போது தமிழக முதல்வரின் செயலாளராக பணியாற்றும் உதய சந்திரன் 2017ம் ஆண்டு பள்ளிக் கல்வித்துறை செயலாளராக இருந்த போது தமிழ் மொழிபெயர்ப்பு திட்டத்தை உருவாக்கினார். கடந்த இரண்டு ஆண்டுகளாக கோவிட்-19 தொற்றுநோய்களின் போது மாணவர்கள் படிக்கும் பழக்கத்தை இழந்துள்ளனர் என்பது கல்வித்துறை வட்டாரங்கள்

அறிந்ததே. மாணவர்களின் வாசிப்பு பழக்கத்தை ஊக்குவிக்கும் பொருட்டு 8 முதல் 12 பக்கங்கள் கொண்ட சிறுகதை புத்தகங்களை வெளியிடவும் தமிழ்நாடு பாடநூல் கழகம் முடிவு செய்துள்ளது. இளந்தளிர் இலக்கிய திட்டம் என்ற பெயரில் ஏற்கனவே 50 கதைகள் தேர்வு செய்யப்பட்டு அச்சிற்கு தயார் நிலையில் உள்ளது. இந்த புத்தகங்கள் பள்ளி நூலகங்களுக்கு அனுப்பப்படும் என்றும் அறிவிக்கப்பட்டுள்ளது.

our other publications...



NIRT Library
National Institute for Research in Tuberculosis
(Indian Council of Medical Research)
1, Mayor Sathyamoorthy Road
Chetpet, Chennai 600031
Tel: 91 44 28369637 | Fax: 91 44 28362525
Email: nirtlibrary@nirt.res.in

Information is power