



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Friday 20201016

Fitness in the time of Covid

Here's a three-fold plan to stay strong (The Tribune: 20201016)

<https://www.tribuneindia.com/news/health/fitness-in-the-time-of-covid-156522>

The most important fact to realise in the times of Covid is that being healthy and fit is not just a pandemic trend. To sail through this unprecedented situation, here's a three-fold plan.

When it comes to boosting immunity, Vitamin C has been the hero. The Recommended Dietary Allowances or RDA for Vitamin C for an adult is 90-95 mg/day.

One guava contains 125.6 mg of Vitamin C, a kiwi has 64 mg, an orange 51.1 mg, one bell pepper (red) has about 152 mg and one papaya has 235 mg.

Overdoing the RDA will only result in toxicity leading to diarrhoea, nausea, stomach pain, gastric issues etc. The trick is to adopt healthy and sustainable eating habits.

1. Start your day with lukewarm lemon water.
2. Eat freshly cooked home-made food only.
3. Include at least two servings of seasonal fruits in your diet.
4. Have dinner at least three hours before your sleeping time.
5. Maintain a healthy body weight but do not go on a crash diet.
6. Take care of your body shape. Beauty can come in all shapes and sizes but health and fitness has got a particular shape.

You need to work it out

Include at least 30 minutes of any activity like walking, cycling, swimming or an exercise regimen in your daily routine.

Lifestyle alterations

Small routine changes in your lifestyle go a long way. These are a few you can start with—

1. Enjoy adequate sleep.
2. Get up before the sunrise, look outside, spread your arms and feel the nature. This will improve your brain functioning

Cancer drug

AstraZeneca Pharma India to launch cancer drug (The Tribune: 20201016)

<https://www.tribuneindia.com/news/health/astrazeneca-pharma-india-to-launch-cancer-drug-156234>

Acalabrutinib 100 mg capsules are used for treatment of various types of blood cancers

AstraZeneca Pharma India to launch cancer drug
Photo for representational purpose only.

Drug firm AstraZeneca Pharma India on Thursday said it would launch its Acalabrutinib 100 mg capsules, used for treatment of various types of blood cancers, under the brand name 'Calquence' in the country on October 21.

The capsules are indicated for treatment of patients with mantle cell lymphoma (MCL) who have received at least one prior therapy and for treatment of patients with chronic lymphocytic leukaemia (CLL) and small lymphocytic lymphoma (SLL), AstraZeneca Pharma India said in a filing to the BSE.

Shares of AstraZeneca Pharma India Ltd on Thursday closed 0.61 per cent lower at Rs 4,266.65 apiece on the BSE. PTI

UNICEF

91 million urban Indians lack basic handwashing facilities at home: UNICEF (The Tribune: 20201016)

<https://www.tribuneindia.com/news/health/91-million-urban-indians-lack-basic-handwashing-facilities-at-home-unicef-156211>

National Sample Survey, 2019, reported that only 36 per cent of households in India washed their hands before eating

91 million urban Indians lack basic handwashing facilities at home: UNICEF
Photo for representation only. Source: iStock.

Around 91 million urban Indians lack basic handwashing facilities at home, UNICEF has said while noting that washing of hands with soap is critical in the fight against infectious diseases like COVID-19.

In a statement released on the occasion of Global Handwashing Day, UNICEF said lack of handwashing with soap puts millions at increased risk to COVID-19 and other infectious diseases.

"In Central and South Asia, 22 per cent of people in urban areas, or 153 million people, lack access to handwashing. Nearly 50 per cent of urban Bangladeshis, or 29 million people; and 20 per cent of urban Indians or 91 million, lack basic handwashing facilities at home," it said.

Dr Yasmin Ali Haque, UNICEF India Representative said as the pandemic continues to spread, it is important to remember that handwashing is no longer just an individual choice, it is a societal imperative.

"It is one of the most low-cost and highly effective measures you can take to protect yourself and others against coronavirus, and many other infections," she said.

"As schools consider the new parameters for reopening, we need to make sure that they continue to prioritize access to handwashing with soap, clean drinking water and safe sanitation for every child," she added. According to data provided by the child rights body only three out of five people worldwide have access to basic handwashing facilities.

"Forty per cent of the world's population, or three billion people, do not have a handwashing facility with water and soap at home. Nearly three-quarters of the people in the least developed countries lack basic handwashing facilities at home," UNICEF said.

"Forty-three per cent of schools lacked handwashing facility with water and soap affecting 818 million school-age children. In the least developed countries, seven out of 10 schools have no place for children to wash their hands with water and soap," it said.

The global child rights body further said that according to the Joint Monitoring Programme 2019, approximately 60 per cent of households in India have handwashing facilities with soap while the coverage in rural communities is lower.

Meanwhile, the National Sample Survey, 2019, reported that only 36 per cent of households in India washed their hands before eating and only 74 per cent cleaned their hands with soap after defecation, it added. PTI

WHO Covid vaccine drive

WHO Covid vaccine drive bedevilled by familiar question: Who pays if things go wrong?

In H1N1 flu pandemic, lack of clarity on liability caused delays(The Tribune: 20201016)

WHO Covid vaccine drive bedevilled by familiar question: Who pays if things go wrong?
Under the WHO's COVID-19 vaccine plans, known as COVAX, 92 poor countries are eligible to access vaccines at lower or no costs until the end of 2021, but liability conditions remain vague. Reuters photo

Who foots the bill if people in poor countries fall sick with unexpected side-effects from coronavirus vaccines? It's not clear and that's a big problem in the battle to beat COVID-19.

The World Health Organisation (WHO) has so far left the question of financial claims unresolved as it seeks to ensure shots are fairly distributed around the world, according to confidential documents reviewed by Reuters and six people familiar with discussions.

A similar situation emerged during the H1N1 swine flu pandemic in 2009-10. Back then, fears about potential compensation costs stymied the WHO's efforts to get vaccines to low-income countries. Some health experts fear the UN body risks making the same mistake.

Under the WHO's COVID-19 vaccine plans, known as COVAX, 92 poor countries are eligible to access vaccines at lower or no costs until the end of 2021, but liability conditions remain vague.

Without clearly stated terms, governments of poor states may be on the hook for potential compensation claims, which could put them off participating in the WHO-led scheme and risk prolonging the pandemic in places ill-equipped to cope, health experts say.

WHO and GAVI, a vaccine alliance which co-leads COVAX, said in a joint statement to Reuters that the scheme will try to solve liability and indemnification issues "while addressing the financial obligations this may impose on AMC-eligible economies," referring to the group of 92 poorer states which includes most African and South-East Asian countries.

Vietnam, which is eligible for free or cheaper COVAX vaccines, is unlikely to use shots provided by the global facility, a Vietnamese health official told Reuters, saying supply deals it negotiated bilaterally with pharmaceutical companies were more transparent than COVAX's terms.

Kenya, which is also eligible, said it was premature to say who should carry the liability for potential adverse effects but expected the vaccine makers to bear some of the responsibility, according to Rashid Aman, chief administrative secretary at the ministry of health.

Vastly underfunded—COVAX has received about a quarter of the \$16 billion the WHO and GAVI say it needs by the end of next year—the scheme has left richer countries to fend for themselves when it comes to vaccine liability.

“Participants will be responsible for deployment and use of approved vaccines within their territories and assuming any liability associated with such use and deployment,” according to a COVAX document seen by Reuters detailing the terms for countries that must pay to join.

The group includes European Union nations, China and also middle-income states, such as Argentina, Iran, Iraq, South Africa and Mexico.

“The consequence of this arrangement is that these countries may end up being liable to pay a very high hidden price if something goes wrong,” a European Union senior official involved in talks with COVAX told Reuters.

This is one of the reasons why the EU has decided not to take delivery of vaccines through COVAX even though the 27-nation bloc has pledged money to the facility, the official said, noting that deals the EU is separately negotiating with vaccine companies involve clauses that make firms liable for potential compensation.

The United States has refused to fund COVAX and has instead sealed its own deals with drug companies, including offering a blanket legal immunity to COVID-19 vaccine makers in a bid to spur their investments in jabs.

China announced last week it would buy COVAX vaccines for 1% of its population.

Barrier for access?

There is no internationally approved COVID-19 vaccine, but the WHO estimates the first shot could be ready this year.

Adverse effects after a vaccine gets regulatory approval are rare but the speed at which COVID-19 shots are being pursued increases the risks of unforeseen conditions - and of large litigation costs.

During the H1N1 flu pandemic, the WHO struggled to get vaccines to dozens of poor countries partly because it had agreed with pharmaceutical companies that poorer nations would be on the hook for compensation claims just like richer countries, the organisation acknowledged in a 2011 report.

“Some recipient countries felt WHO did not adequately explain that liability provisions included in the recipient agreement were the same as the liability provisions accepted by purchasing countries,” concluded the report of the WHO committee that reviewed the handling of the H1N1 flu pandemic.

Most of the estimated half million people who died from H1N1 were in poorer countries.

COVID-19 has so far infected nearly 38 million people and killed at least a million.

There are nearly 200 coronavirus vaccines in development and many governments acknowledge that drugmakers are taking big financial risks in developing and manufacturing at an unprecedented speed—it usually takes 10-15 years to bring a vaccine to market—shots that may not be successful.

There is broad consensus that some of these costs should be covered by taxpayers and many rich countries already have public or private funds that could pay indemnities to victims.

But many poorer countries that have agreed to get vaccines through COVAX do not have such compensation schemes nor the financial resources to fund them.

This means that they could either face costs for which they have no insurance, or that potential victims there might not be compensated at all.

“We are concerned how such arrangements could be a barrier for access to COVID-19 vaccines in lower and middle income countries that cannot or do not want to take on liability for the vaccines,” Dimitri Eynikel of Doctors Without Borders, a medical non-governmental organisation, told Reuters.

The Gates Foundation, one of WHO’s largest funders, raised similar concerns in a meeting with health experts in September, a person who attended the meeting said.

“It is a high-priority for the foundation that (..)distribution issues are resolved to ensure that decisions impacting delivery are as effective as possible,” a spokeswoman for the Gates Foundation told Reuters, adding that work was being done to address those issues. Reuters

Covid-19 infection

People with blood type ‘O’ may have lower risk of Covid-19 infection (The Tribune: 20201016)

People with blood type ‘O’ may have lower risk of Covid-19 infection

<https://www.tribuneindia.com/news/health/people-with-blood-type-o-may-have-lower-risk-of-covid-19-infection-156184>

Study suggests that people with blood types 'A', 'B', or 'AB' may be more likely to be infected with the virus than people with type 'O'

People with blood type 'O' may have lower risk of Covid-19 infection
Photo for representational purpose only. iStock

New research adds to the growing body of evidence that people with blood type 'O' may have a lower risk of Covid-19 infection and reduced likelihood of severe outcomes, including organ complications if they do get sick.

Two studies published in the journal Blood Advances suggest that individuals with blood type 'O' may be less vulnerable to Covid-19 infection.

"It is very important to consider the proper control group because blood type prevalence may vary considerably in different ethnic groups and different countries," said study author Torben Barington from the University of Southern Denmark.

"We have the advantage of a strong control group - Denmark is a small, ethnically homogenous country with a public health system and a central registry for lab data - so our control is population-based, giving our findings a strong foundation," Barington added.

For the findings, the research team compared Danish health registry data from more than 473,000 individuals tested for Covid-19 to data from a control group of more than 2.2 million people from the general population.

Among the Covid-19 positive, they found fewer people with blood type 'O' and more people with 'A', 'B', and 'AB' types.

The study results suggest that people with blood types 'A', 'B', or 'AB' may be more likely to be infected with Covid-19 than people with type 'O'.

The researchers did not find any significant difference in the rate of infection between 'A', 'B', and 'AB' types.

The findings also showed that blood groups 'A' and 'AB' associated with an increased risk of severe clinical outcomes of Covid-19 infection.

People with blood groups 'A' or 'AB' appear to exhibit greater Covid-19 disease severity than people with blood groups 'O' or 'B', according to a separate retrospective study.

Researchers found that patients with blood groups 'A' or 'AB' were more likely to require mechanical ventilation, suggesting that they had greater rates of lung injury from Covid-19.

They also found more patients with blood group 'A' and 'AB' required dialysis for kidney failure.

"The unique part of our study is our focus on the severity effect of blood type on Covid-19. We observed this lung and kidney damage, and in future studies, we will want to tease out the effect of blood group and Covid-19 on other vital organs," the authors wrote.

Earlier, another study published in the journal *Clinical Infectious Diseases* that people with blood group 'A' may be more prone to Covid-19 infection while those with blood type 'O' have a lower risk of contracting the virus. — IANS

Air Quality (The Asian Age: 20201016)

■ Smoky haze shrouds Delhi-NCR even after stricter anti-air pollution measures

Air quality enters 'very poor' zone

New Delhi, Oct. 15: A layer of smoky haze lingered over Delhi-NCR on Thursday with air quality in the region hitting 'very poor' levels, even as stricter anti-air pollution measures, including a ban on electricity generators, came into force under the Graded Response Action Plan (GRAP).

NASA's satellite imagery showed a large cluster of farm fires near Amritsar, Patiala, Ferozpur and Faridkot in Punjab and Ambala and Rajpura in Haryana.

However, the Ministry of Earth Sciences' Air Quality Early Warning System for Delhi said its impact on the capital's air quality was marginal.

The city recorded an air quality index (AQI) of 315 at 11:10 am. The last time the air quality hit such a poor level was in February.

The 24-hour average AQI was 276 on Wednesday, which falls in the 'poor' category. It was 300 on Tuesday, 261 on Monday, 216 on Sunday and 221 on Saturday.

ITO (AQI 372), Vivek Vihar (AQI 370), and

Will write to EPCA, CPCB for shutting 11 coal-fired power plants: Gopal Rai

New Delhi, Oct. 15: Delhi environment minister Gopal Rai on Thursday said he will ask the Central Pollution Control Board (CPCB) and a Supreme Court-mandated pollution control authority to shut the 11 coal-fired power plants operating within 300 kilometres of Delhi within a week.

"The Delhi government has been making all efforts to bring pollution levels down, but we become helpless when pollution from neighbouring states affects the city's air quality. I am going to write a letter to the CPCB and the Environment Pollution (Prevention and Control) Authority, asking them to

Shadipur (AQI 359) recorded the highest pollution levels on Thursday morning.

The air quality in the neighbouring cities of Faridabad (317), Ghaziabad (326), Greater Noida (344) and Noida (314) was also in the red



Gopal Rai improves," Mr Rai said.

The minister said authorities are considering granting extension to these power plants to meet the new emission norms, instead of shutting them. The 11 power plants have missed two deadlines to install flue-gas desulphurisation units to reduce sulphur dioxide emissions.

The CPCB had earlier set the deadline as December 2017 to meet the emission standards. It was later extended by two years to December 31, 2019. — PTI

zone.

An AQI between 0 and 50 is considered 'good', 51 and 100 'satisfactory', 101 and 200 'moderate', 201 and 300 'poor', 301 and 400 'very poor', and 401 and 500 'severe'.

A senior scientist at the India Meteorological

Department said the dip in the air quality can be attributed to low wind speed which allowed accumulation of pollutants.

PM10 levels in Delhi-NCR rose to 300 microgram per cubic meter (g/m3) at 9:30 am — the highest this season so far. PM10 levels below 100 g/m3 are considered safe in India.

PM10 is particulate matter with a diameter of 10 micrometers and is inhalable into the lungs. These particles include dust, pollen and mold spores.

The levels of PM2.5 finer particles which can even enter the bloodstream were 151 g/m3. PM2.5 levels up to 60 g/m3 are considered safe.

GRAP — a set of anti-pollution measures followed in Delhi and its vicinity towns according to the severity of the situation — comes into force on Thursday.

It was notified by the Ministry of Environment and Forests in 2017 for implementation through the Supreme Court-mandated Environment Pollution (Prevention and Control) Authority. — PTI

Civic bodies intensify efforts to control dust pollution

AGE CORRESPONDENT
NEW DELHI, OCT. 15

BJP ruled South and North Delhi Municipal Corporations have intensified efforts to control dust pollution. The North Corporation launched a drive while South Corporation takes stringent pollution control measures including action against burning of solid waste, garbage, dry leaves, and plastic, rubber and construction activities at Dwarka, one of the main hotspots. The South Corporation has issued a NGT challan of ₹50,000 to a construction company in Dwarka for keeping building material in open amounting ₹50,000.

North Delhi mayor Jai Prakash launched the drive at Ajmal Khan Park in Karol Bagh area sprinkling water in the presence of civic officials.

Deluge

Dealing with a deluge: On Hyderabad floods (The Hindu: 20201017)

<https://www.thehindu.com/opinion/editorial/dealing-with-a-deluge-the-hindu-editorial-on-hyderabad-floods/article32865504.ece>

As floods swamp Hyderabad, the focus is on the inadequacy of drainage infrastructure. A deep monsoon depression over the west central Bay of Bengal, which weakened as it moved over Telangana, resulted in downpours over several districts in the State, severely affecting the city of Hyderabad as well. On October 13, the monthly average rainfall of Hyderabad for October (103.6 mm according to Skymet) was surpassed on a single day when 192 mm of rain fell. According to the India Meteorological Department, this is the highest rainfall for October recorded in Telangana's capital since 1903. Such a high intensity downpour in a short span is bound to affect a densely populated urban area, and Hyderabad was no exception. At least 24 people were killed and several localities submerged and isolated following incessant rains and the overflowing of the city's lakes. Other districts were badly affected too: roads damaged and irrigation tanks breached. The monsoon storm that never became a cyclone, has managed to cross the east (Andhra Pradesh) and west coasts (north Karnataka and Maharashtra) of India. This is rare and a rain-related disaster event that is difficult to plan for. Floods and deluges, like any other disaster, disproportionately affect the poor. Disaster management agencies have managed to limit the impact of the disaster as many of those marooned in submerged areas and flooded houses were rescued. But the extent of the damage and the turmoil show a lack of preparation and disaster mitigation, a problem that plagues most urban centres in the country.

Much of the damage was due to the overflowing of lakes — in particular, the Hussain Sagar Lake in the middle of the city and the breaching of storm water drains. Construction over lake beds and encroachments of drainage channels have been identified as problems that have exacerbated flooding and inundation in the city in the past (the deluge in August 2000, for example). But the little that has been done to unblock existing storm drains over the last decade has not been enough to handle the requirements of the city, which still depends upon an antiquated sewerage and drainage system. Hyderabad urgently needs to expand and remodel its drainage system. Besides lakes and canals, wetlands and watersheds play a vital role in absorbing excess rainfall, but regrettably, rapid urbanisation in the twin cities has resulted in the loss of a large portion of the wetlands. An analysis by the Centre for Science and Environment in 2016 revealed that 3,245 hectares of water bodies were lost in Hyderabad between 1989 and 2001. In the long term, the effects of flooding due to deluges can only be mitigated if urban planners take into account the hydro-geology of cities and ensure that construction, development and land occupation do not take place in a way that reduces the area of wetlands.

World Health Organization (WHO)

Young, healthy people may not get Covid vax until 2022: WHO (New Kerala: 20201017)

<https://www.newkerala.com/news/2020/182074.htm>

World Health Organization (WHO) chief scientist Soumya Swaminathan on Thursday said that young and healthy people may have to wait till 2022 to get the Covid-19 vaccine.

Swaminathan also stressed that health workers and those at highest risks should be prioritised.

She indicated that, despite the many vaccine trials being undertaken, speedy, mass shots were unlikely, and organising who would given access first in the event of a safe vaccine being discovered was still being worked on.

"Most people agree, it's starting with healthcare workers, and frontline workers, but even there, you need to define which of them are at highest risk, and then the elderly, and so on," Swaminathan was quoted as saying to The Guardian.

"There will be a lot of guidance coming out, but I think an average person, a healthy young person might have to wait until 2022 to get a vaccine," she added.

Swaminathan hoped there would be at least one effective vaccine by 2021 but it would be available only in "limited quantities".

Swaminathan also warned against complacency about the virus death rate, saying with the increasing number of cases, mortality would also rise.

"Mortality increases always lag behind increasing cases by a couple of weeks. We shouldn't be complacent that death rates are coming down," WHO's chief scientist said.

Meanwhile, the Union Health Ministry on Thursday said the country's doubling time of Covid-19 cases has sharply increased to 70.4 days from 25.5 days in mid-August, which is nearly thrice the time being taken earlier.

"This indicates a substantial fall in the daily new cases and the consequent increase in time taken to double the total cases," the Ministry tweeted as India recorded a spike of 67,708 Covid-19 cases and 680 deaths in 24 hours, as the tally mounted to 73,07,097 cases.

Handwashing

Handwashing an effective tool to prevent Covid, other diseases: WHO (New Kerala: 20201017)

<https://www.newkerala.com/news/2020/182014.htm>

Ten months into the pandemic, handwashing with soap remains one of our best defences against the virus, along with other public health measures such as maintaining physical distance, avoiding crowded places, practising cough etiquette and wearing a mask wherever recommended.

Global Handwashing Day observed annually on October 15 to raise awareness and highlight the importance of handwashing as an effective means of disease prevention -- this year marks a critical reminder for the world that this simple, cost effective practice can save lives.

"Handwashing has always been one of the most effective ways of keeping diseases at bay. It is a simple act that pays in dividends when it comes to keeping ourselves healthy and safe. Handwashing is also one of the key cornerstones of Covid-19 prevention," said Dr. Poonam Khetrpal Singh, Regional Director, WHO South-East Asia Region.

She added, "Now more than ever as we embrace the new normal and live with Covid-19, hand hygiene needs to become an integral part of our daily routine and our lives, as we live through this pandemic, and beyond, to protect us from diseases."

With Covid-19 transmission mainly spreading between people through direct, indirect or close contact with infected people via mouth and nose secretions, washing hands with soap and running water is of critical importance.

To stop the spread of Covid-19, along with other Covid appropriate behaviours, the practice of handwashing at regular intervals is a must, after coughing or sneezing, when caring for the sick, after using the toilet, before eating, while preparing food and after handling animals or animal waste.

Handwashing after touching common surfaces such as doorknobs or handles, or after one comes back home from visiting a public place will keep ourselves and others around us safe.

"Promoting hand hygiene at all levels of health care is also critical. Hand hygiene, a very simple action, is well accepted to be one of the primary modes of reducing health care-associated infection and of enhancing patient safety," the Regional Director said.

The pandemic is still among us and it is far from over. We must remind ourselves of the basics that we as individuals can do to keep ourselves safe, she said.

This year's Global Handwashing Day theme is 'Hand Hygiene for All' and calls for all of society to achieve universal hand hygiene. To beat the virus today and ensure better health outcomes beyond the pandemic, handwashing with soap must be a priority now and in the future.

Liver disease

Even mild fatty liver disease may up death risk: Study (New Kerala: 20201017)

<https://www.newkerala.com/news/2020/181895.htm>

In a major study, researchers have found an increased risk of death in patients with non-alcoholic fatty liver disease (NAFLD) and advanced fibrosis or cirrhosis.

The study, published in the journal Gut, show that mortality increases with disease severity, but even mild fatty liver disease is linked to higher mortality.

Small clinical studies have demonstrated that among patients with NAFLD, advanced liver fibrosis is the most important histological predictor of mortality, but until now, population-level data have been missing from cohorts with liver histology.

"This is the first nationwide cohort study with detailed liver histology data to confirm that NAFLD contributes to an increased risk of all-cause mortality," said study first author Tracey G Simon from the Massachusetts General Hospital in the US.

Non-alcoholic fatty liver disease is often caused by obesity and affects nearly 25 per cent of the US and European adults. It represents the most common cause of chronic liver disease in Western countries.

For the current results, the research team matched 10,568 individuals with biopsy-confirmed NAFLD to general population controls through Sweden's comprehensive, nationwide registers.

They found that all stages of NAFLD were associated with excess mortality risk, even early stages of disease.

This risk was driven primarily by deaths from extra-hepatic cancer and cirrhosis, while the risks of cardiovascular mortality or hepatocellular carcinoma (HCC) mortality were relatively modest.

Patients with NAFLD had a 93 per cent increased risk of all-cause mortality, but the numbers varied with disease severity.

The risk increased progressively from the mildest form of NAFLD (simple steatosis), to non-fibrotic steatohepatitis (NASH), to non-cirrhotic fibrosis and to severe NAFLD with liver cirrhosis.

These findings should be used to develop more targeted interventions designed to reduce mortality, in patients with NAFLD," Simon said.

Global Handwashing Day 2020:

Global Handwashing Day 2020: Prepare your hands to cuddle and care(New Kerala: 20201017)

<https://www.newkerala.com/news/2020/181832.htm>

As the only possible way to beat the coronavirus before its vaccine is invented is through maintaining personal hygiene, the significance of global handwashing day has increased several folds this year.

Ever since the outbreak of coronavirus, multiple hand-washing challenges have been doing rounds on the internet with several celebrated personalities took up the challenge to spread awareness about the importance of hand-washing to combat the highly contagious virus.

To understand how the pandemic has made hand-washing more important than ever, ANI spoke to health experts on the occasion of global handwashing day.

"Hands are the main pathways of germ transmission in general or during health care. Proper hand hygiene is the single most important means for preventing the spread of infection," said Dr Soumya Reddy V, Consultant - General Physician, Apollo Telehealth.

The action of hand antiseptics practice is generally performed either by hand rubbing with an alcohol-based formulation (Ethanol-based or isopropyl alcohol-based formulations) or handwashing with plain or antimicrobial soap and water for 20 seconds or more.

When asked about the significance of washing hands for the time period of 20 seconds or more, Dr Inder Kumar Kasturia, Consultant, Family Medicine at Aakash Healthcare said, "When we rub our hands with soap and water for 20 seconds or more, it rips the outer layer of the virus and enables the components of the soap to kill it."

This can help in killing the potential coronavirus molecules on the surface of our hands. "Washing hands with only water may not be helpful, nor will it help if we just touch the water and dry our hands," added Dr Inder.

Knowing the importance of handwashing, the World Health Organisation had rolled out a global campaign 'SAVE LIVES Clean Your Hands.'

"Effective infection prevention and control measures like hand hygiene are crucial to ensure health facilities do not become hubs of COVID-19 transmission, and to reducing healthcare-associated infections from other pathogens, which account for an estimated 8 million deaths

globally each year," Dr Poonam Khetrapal Singh, WHO Regional Director for South-East Asia had said in a media statement.

Meanwhile, Dr Inder said hand washing is a critical step to stop the spread of the COVID-19 virus. But many are not aware of when to wash them.

"On occasions of coming in contact with common sources of contact or surfaces in crowded places, where access to soap and water is unavailable use hand rubs, alcohol-based disposable hand wipes or gel sanitisers," stressed Dr Soumya.

She further said overenthusiastic hand cleaning practice is also harmful.

"Excessive hand washing can cause dermatitis due to the chemicals in wash and rubs used. It can disrupt the integrity of the skin surface and cause more harm than benefit," said Dr Soumya adding, the excessive use of methanol-based hand wash can cause Methanol toxicity.

She suggested using the right amount of alcohol percentage a minimum of 75 per cent alcohol (ethanol or propanol) to attain proper sanitisation after its use.

Lastly, both the doctors echoed that proper education about hand hygiene is essential to avoid unintended misuse or repeated use even without coming into contact with any contaminated surface for hours together might lead to unwanted antimicrobial resistance in the future.

Started in 2008, Global Handwashing Day is an annual global awareness day promoting handwashing with soap as an easy, effective and affordable way to prevent diseases and save lives.

The Day was founded by the Global Handwashing Partnership and is an opportunity to design, test and replicate creative ways to encourage people to wash their hands with soap at critical times. Global Handwashing Day is celebrated every year on October 15.