



# DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY

Friday

20210219

## New Covid cases

### Nation sees 13,193 new Covid cases, 97 more deaths (The Tribune: 20210219)

<https://www.tribuneindia.com/news/coronavirus/nation-sees-13-193-new-covid-cases-97-more-deaths-214646>

Recovery rate reaches 97.3 per cent; fatality rate stands at 1.42 per cent

Nation sees 13,193 new Covid cases, 97 more deaths

Photo for representation purposes. Tribune file

Daily cases of Covid in the country climbed to over 13,000 after 19 days taking India's tally of cases to 1,09,63,394, while the recoveries surged to 1,06,67,741, according to Union Health Ministry data updated on Friday.

A total of 13,193 new cases were registered in a span of 24 hours.

The death toll increased to 1,56,111 with 97 new fatalities, the data updated at 8 am showed.

The number of people who have recuperated from the disease surged to 1,06,67,741 which translates to a national Covid recovery rate of 97.3 per cent and the case fatality rate stands at 1.42 per cent.

The active caseload remained below 1.5 lakh.

There are 1,39,542 active cases of coronavirus infection in the country which comprised 1.27 per cent of the total caseload, the data stated.

According to the ICMR, 20,94,74,862 samples have been tested up to February 18 with 7,71,071 samples being tested on Thursday. PTI

## **Vaccine**

### **Delay Pfizer 2nd dose as 1st highly effective: Experts (The Tribune: 20210219)**

<https://www.tribuneindia.com/news/coronavirus/delay-pfizer-2nd-dose-as-1st-highly-effective-experts-214536>

The second dose of Pfizer Inc's Covid-19 vaccine could be delayed in order to cover all priority groups as the first one is highly protective, two Canada-based researchers said in a letter published in the New England Journal of Medicine. The vaccine had an efficacy of 92.6% after the first dose, Danuta Skowronski and Gaston De Serres said, based on an analysis of the documents submitted by the drugmaker to the US Food and Drug Administration (FDA). These findings were similar to the first-dose efficacy of 92.1% reported for Moderna Inc's mRNA-1273 vaccine, according to the letter. In its response, Pfizer said alternative dosing regimens of the vaccine had not been evaluated yet and that the decision resided with the health authorities. Some countries, grappling with low supplies, are looking at dosing patterns that differ from how the vaccines were tested in clinical trials. — Reuters

## **Air pollution**

### **Air pollution kills thousands in megacities despite COVID lockdowns (The Tribune: 20210219)**

<https://www.tribuneindia.com/news/coronavirus/air-pollution-kills-thousands-in-megacities-despite-covid-lockdowns-214207>

WHO says nine out of 10 people breathe polluted air, which is linked to strokes, lung cancer and heart disease

Air pollution kills thousands in megacities despite COVID lockdowns

Photo for representational purpose only. Tribune file

Air pollution caused tens of thousands of deaths in the world's five most populous cities last year despite coronavirus lockdowns, researchers said on Thursday, urging governments to ditch fossil fuels and invest in a green recovery.

Environmental campaign group Greenpeace Southeast Asia and air quality technology company IQAir measured pollution levels across 28 cities - chosen according to where data was available and with a geographical spread.

In the five most-populated cities -- Delhi, Mexico City, Sao Paulo, Shanghai and Tokyo -- air pollution caused about 160,000 deaths and economic losses totalling about \$85 billion.

"A few months of lockdown hasn't really dented that long-term average of air pollution that people have been exposed to," said Aidan Farrow, an air pollution scientist at Greenpeace Research Laboratories at Britain's University of Exeter.

"It is a little shocking to see how much upheaval there has been -- and we still have work to do to improve air pollution," he told the Thomson Reuters Foundation.

Air pollution is the single largest environmental risk to human health globally, and kills an estimated 7 million people every year, according to the World Health Organization (WHO).

The WHO says nine out of 10 people breathe polluted air, which is linked to strokes, lung cancer and heart disease -- and now equals the effects of smoking tobacco, health experts say.

The problem affects more cities in Asia than anywhere else in the world. Major causes include vehicle emissions, coal power plants, construction, festival fireworks, forest clearing, and burning of crops, firewood and waste.

Delhi had the highest death toll among the five biggest cities, with some 54,000 deaths - or one per 500 people - due to high levels of tiny pollution particles, known as PM2.5, which can cause lung and heart diseases, the study said.

Japan's capital Tokyo suffered the highest financial cost with approximately 40,000 deaths and economic losses of \$43 billion, it added.

Lockdowns to stem the spread of the new coronavirus in major cities have forced millions to work from home, while slowing economies have slashed carbon dioxide emissions.

"We have seen changes in road traffic, aviation as well ...

but the major (air pollution) sources have continued to operate largely as before," Farrow said,

"The problem is vast and needs a big, multi-industry effort to address it," he added, calling for more investment in cleaner technologies, renewable energy and electrified public transport. — Thomson Reuters Foundation

## **Covid-19 Variants (The Asian Age: (The Tribune: 20210219)**

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=15418161>

# Covid-19 variants: India not out of the woods yet

**T**he detection of four cases of South African and one of Brazilian variants of SARS-CoV-2 in India and the data that came out of the third national Sero Survey conducted in December and January are a reminder that India cannot afford to let the guard down against the pandemic.

The arrival of the latest South African variant indicates that India has, at present, all the three variants: B.1.1.7 which was first found in the UK; B.1.351, which is now spreading in South Africa; and P.1, discovered in Brazil. Experts and scientists fear that all three have a tendency to spread faster than the original one. And the worst fear is that since they mutate, they could survive the vaccine, which the world has got after a wait for almost a year and which is thought to be the normaliser of human life on earth. Director of the Covid-19 Genomics UK consortium, the country's genetic surveillance programme, Sharon Peacock, is on record saying vaccines were so far effective against the variants in the United Kingdom, but "mutations could potentially undermine the shots". The British variant was likely "to sweep the world, in all probability", she has said.

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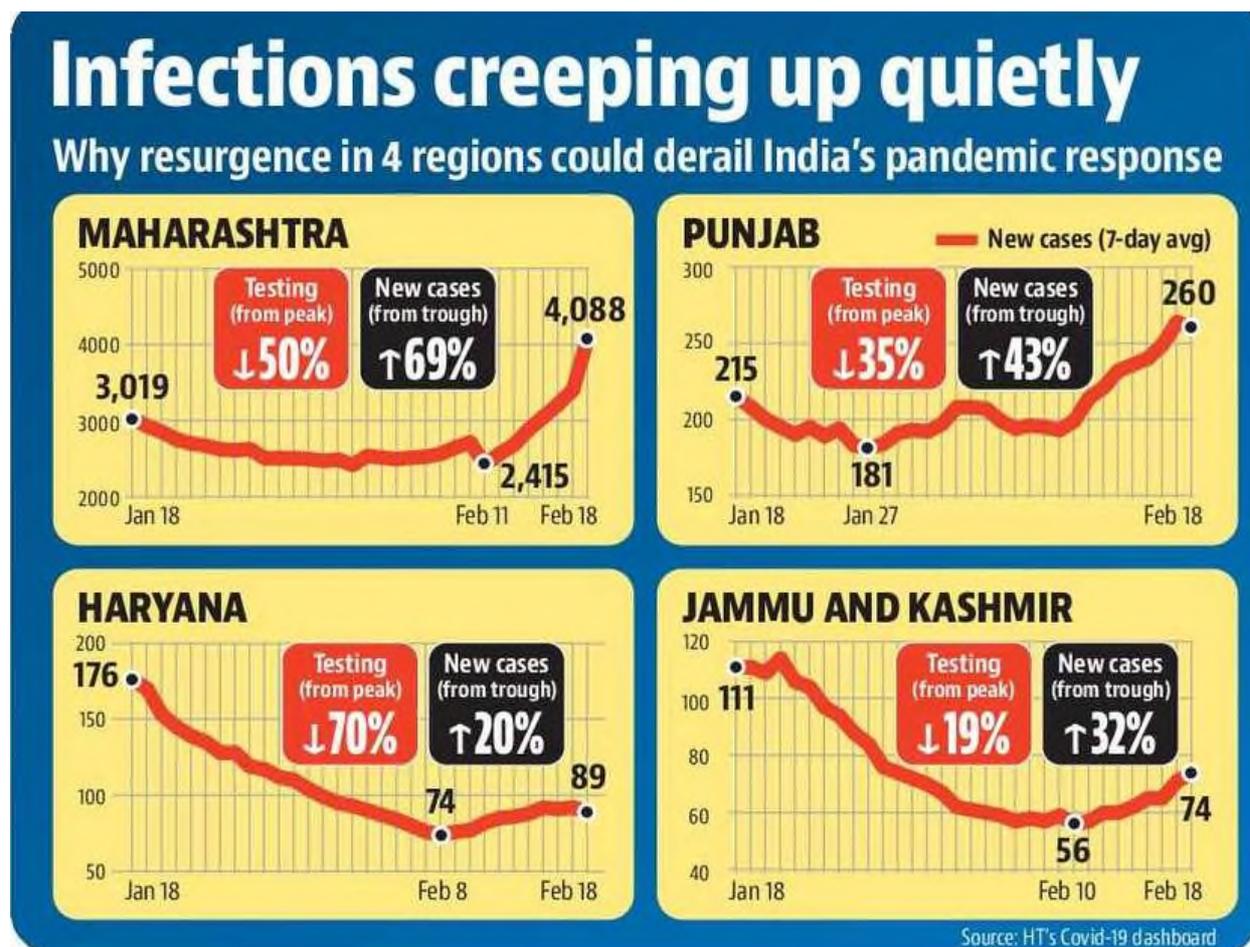
The results of the Sero Survey conducted by the Indian Council for Medical Research (ICMR) offers little reason to be complacent. As per the data, 21.5 per cent Indians have developed antibodies to the virus, indicating that the number of people exposed to the pandemic is not small. True, the number of new daily case-load is coming down sharply and so is the case with the number of deaths. Maharashtra and Kerala account for most of the new cases and deaths. However, a disturbing piece of information coming out of the survey is that Kerala, which has half the national exposure to the pandemic, records the highest number of new case every day. There can be safer explanations but the worst one points to the lack of testing or reporting, especially in the rural areas in many states. The reports of fudged testing from Bihar do not inspire confidence about the testing data.

India's Covid-19 vaccination programme makes steady progress and as per the latest reports, 68.3 per cent of all healthcare workers and 28.2 per cent of all frontline workers have been administered the vaccine. Of the healthcare workers, 37.6 per cent got the second dose, too. While the feat is commendable, the government should stop patting on its back talking of the distance covered; it should take a realistic assessment of the enormosity of the task on hand instead. The vast majority of Indians are still vulnerable to the pandemic's attack and the new variants are on the door, knocking. We are yet to start the programme for the 50 years plus category, the next most vulnerable group. The government must explore every avenue to speed up the programme. And at the same time, it must reinvigorate the awareness programme on Covid-appropriate behaviour — wearing of masks, use of sanitiser and social distancing — and advise caution on social gatherings, especially political and religious. No amount of caution is excessive while fighting a pandemic.

## Covid uptick

Signs of Covid uptick as states lower guard (Hindustan Times: 20210219)

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



Three states and one Union Territory have seen their seven-day averages of daily Covid-19 cases rise by between 20% and 69% of lows seen after the end of the first wave of the pandemic, an analysis by HT shows. This highlights the potential risk of a surge in cases amid fears of mutant strains gaining ground, and laxity in adhering to protocols due to Covid fatigue being reported across the country.

In addition to the regions mentioned above — Maharashtra, Punjab, Haryana and Jammu & Kashmir — the first wave continues unabated in the southern state of Kerala.

To be sure, all this comes even as India has vaccinated 10 million people, although an outbreak now could divert the attention of the public health system from vaccination to managing infections.

The increase in cases is being reported from these areas as restrictions on several economic and social activities have eased, and people and governments appear to be getting complacent, with almost no mask discipline in many parts of rural India, and even some cities. At the same time, testing is over 50% of its peak across India; in Delhi, too, it is 30% lower than peak capacity levels.

While Maharashtra, the state worst-hit by the disease, is again seeing a strong resurgence of infections with cases rising rapidly over the past week, Punjab, Haryana and Jammu & Kashmir also face the immediate risk of seeing a second Covid-19 surge, according to HT's analysis. Kerala, meanwhile, remains the only state in the country which is yet to bring its primary wave of infections in control.

This resurgence in new cases, along with rising positivity rates and a drop in testing comes at a time when cases across the majority of the country are at the lowest in eight months, which has prompted local governments to start relaxing norms, and encouraged people to drop their guards.

To identify the regions where cases are rising again, HT analysed data from India's 20 most populous states and UTs to narrow down on four regions where the case rate (the seven-day average of daily cases) appears to have bottomed out and has again started rising — Maharashtra, Punjab, Haryana and Jammu & Kashmir. In these regions, the case trajectory has risen as high as 69% and at least 20% from the lowest levels since the peak of the first wave.

Epidemiological estimates by the University of Michigan's Centre for Precision Health Data Science show that while India overall has an effective reproduction number ( $R_t$ ) of 0.95, only these four states have an  $R_t$  of above 1 – Punjab (1.16), Maharashtra (1.12), Haryana (1.05) and Jammu and Kashmir (1.03). An  $R_t$  of more than 1 means an outbreak is expanding in a region.

Experts warn that these cannot be treated as isolated islands of infection, and with travel restrictions eased, an outbreak in one state can easily spread to another.

In Maharashtra, which leads the country with 2.08 million infections and 51,669 deaths as of Wednesday, cases have gone up 69% from their recent trough. In the past week, 4,088 new cases have been reported in the state on average against a low of 2,415 on February 11.

Another alarming sign for the state is the rapidly rising positivity rate. On average, 8.4% of all samples tested in the past week have been positive – this has doubled in the last three weeks. The single-day positivity rate in Maharashtra in the past five days, for instance, has been 6.3%, 12.2%, 9.8%, 9.0% and 8.4%. HT reported on Tuesday that the increase has coincided with the resumption of suburban train services – with almost no social distancing norms.

To contrast these numbers against the rest of the nation, India's overall Covid-19 number has deviated only 3% above the lows seen since the end of the first wave, while the average positivity rate is only 0.1% above the lowest point (1.6%).

Testing has also dropped significantly in the western state. In the past week, the state has tested 51,060 samples a day on average, nearly half the peak capacity — at its peak the state was testing an average of over 101,893 samples a day in mid-September.

In Maharashtra, the administration has gone into damage control mode in the past week. On Thursday, Mumbai reintroduced many of the peak-Covid-19 containment policies of 2020, including filing FIRs against those violating quarantine rules. High-risk contacts will again be stamped with indelible ink on their hands for identification. Buildings in Mumbai with more than five positive cases will now be sealed as well. On Wednesday, seven districts in the state

(Amravati, Buldhana, Yavatmal, Akola, Nagpur, Parbhani and Jalna) imposed restrictions on movement of people and have restricted gatherings to five or fewer people.

In Punjab, the case trajectory now stands 32% above the post-first wave trough. In the past week, 260 new cases have been reported in the state on average against a low of 181 on January 27. And while the positivity rate has not spiked as high as Maharashtra, it has climbed from 1.2% to 1.5% in just the last week. To be sure, this rate is still comfortably below the 5% threshold recommended by the World Health Organization (WHO).

Average testing in the state has dropped 35% from peak levels — it was testing 28,352 samples a day for week ending September 15 and has tested 18,311 samples a day in the last week.

Similarly, cases have risen 32% and 20% post first wave in Jammu & Kashmir and Haryana. While the former has seen only a 19% drop from peak testing, in Haryana, the rate of testing has dropped over 70% from peak levels. Both states still have low positivity rates of 0.3% and 0.8%, well below the WHO-recommended threshold.

Testing is an area where most states have slipped in recent weeks. On average, 726,562 samples a day have been tested across the country in the past week – a drop of over 50% from peak levels when the country was testing an average of nearly 1.5 million samples a day.

Experts said that the real impact of the relaxation of curbs in states such as Maharashtra may be yet to surface.

“While it would be too early to extrapolate what is happening in Maharashtra to the rest of the country, there is no denying that what is happening in the state is really concerning. There has barely been enough time since the local trains opened up in the state to see the real on-ground impact of the spread of the disease,” said Dr Lalit Kant, former head of epidemiology and communicable diseases at the Indian Council of Medical Research (ICMR), adding that the state should be looking to isolate as many regions that develop into hot spots as possible.

“Moreover, we can’t afford any drop in testing numbers anywhere in the country. If we have built up the testing capacity to run 1.5 million tests a day, we should try to stay as close to that number as possible instead of letting our guard down.”

Kant, like many others is also worried about the new strains. India has so far reported 187 cases of infection of the UK variant, four of the South African variant and one of the Brazilian. “My real fear right now is new variants of the virus. If a large number of people develop antibodies against the virus, then it undergoes mutations in order to survive – something we’ve seen happen across the world where new strains have become dominant. We need to keep running genome sequencing to keep a track on variants of the virus.”

## **Pollution**

**Air pollution caused 12k deaths, ₹12k crore loss in B'luru: Report Greenpeace report says 120,000 lives lost due to pollution in six cities last year, shows Bengaluru has 9.4 million vehicles in an area of just around 820 sq km (Hindustan Times: 20210219)**



## Growing menace

The report by a global climate activist group highlights the poor state of the air in major cities in the country, and the consequences

■ Estimated deaths   ● Estimated cost (₹crore)



At least 12,000 people have died in Bengaluru as a result of air pollution and related problems and caused economic damages to the tune of ₹12,365 crore in 2020, according to the Greenpeace Southeast Asia Analysis of IQAir data.

The report by Greenpeace, a global climate activist group, on Thursday titled Greenpeace : Cost to Economy Due to Air Pollution Analysis 2021' said around 1.2 lakh lives were lost due to air pollution in six Indian cities and that the economic losses on account of bad air amounted to over Rs 2 lakh crore.

It wasn't clear how Greenpeace arrived at these numbers, or attributed specific deaths to air pollution because these numbers are not tracked by the Union or state governments.

Still, beyond the numbers, the report highlights the poor state of the air in major cities in the country, and the consequences.

According to the study, there were 54,000 air pollution related deaths in Delhi, 25,000 in Mumbai, 12,000 in Bengaluru, 11,000 each in Hyderabad and Chennai and around 6,700 in Lucknow.

"To show the impact of air pollution related deaths on the economy, the approach used by Greenpeace is called "willingness-to-pay", a lost life year or a year lived with disability is converted to money by the amount that people are willing to pay in order to avoid this negative outcome," according to the report.

But the report does not specify who incurred these costs, experts point out.

"When we choose fossil fuel over clean energy, our health is put at stake. Polluted air increases the likelihood of deaths due to cancer and stroke, spike in asthma attacks and worsens severity of Covid-19 symptoms," Avinash Chanchal, Climate Campaigner, Greenpeace India said in a statement.

One of the causes of poor air is construction; another is vehicular pollution.

Bengaluru has 9.4 million vehicles in an area of just around 820 square kilometers.

"Air quality had improved last year due to the lockdown and our own measures but increased vehicular population, the metro (rail) and other construction, and industrial activity have impacted overall figures," said a Karnataka State Pollution Control Board (KSPCB) official who asked not to be named.

"Though PM10 and PM2.5 pollutants have gone up, other gaseous pollutants are under control," the official added.

PM 2.5 and 10 refer to particulate matter with a diameter of 2.5 and 10 microns respectively.

According to KSPCB, Bengaluru's Air Quality Index (AQI) has fell from 107.1 in 2014-15 to 88.1 in 2018-19. a reading under 100 is considered satisfactory.

The flaws of measuring air quality is pointed out by a former KSPCB official itself.

When Metro construction was ongoing near Victoria Hospital near the busy K.R.Market of Bengaluru, the KSPCB monitors indicated this rise. But when construction was completed in this location, they came to the conclusion that pollution levels had gone down even though there was no effort to monitor hundreds of other areas where metro construction was being carried out in full swing.

Experts also point to the “law of averages” as air quality tends to worsen sharply during peak hours and then marginally reduce through other times. Since AQI is calculated over 24 hours, the severity of the problem is diluted.

KSPCB’s 41-point action plan includes measures such as pushing for the use of LPG and bio-fuels, promoting battery operated vehicles, and effective disposal of construction debris. It claims these have helped.

While the Covid-19 induced lockdown brought some reprieve to the environment, lifting of restrictions has ended that.

The Work From Home policy adopted by technology companies in Bengaluru has brought down traffic and usage of air conditioning and other appliances in offices to some extent, but dependence on private transport has not helped the situation.

Experts also point out that there are only around 20 monitoring stations (both manual and real-time) to capture pollution data in a city that expands to over 820 square kms.

“In areas such as Whitefield, where most of the pollutants are, due to construction and a concentration of vehicles, the situation has not returned to pre-Covid levels but in other places such as Indiranagar and Koramangala, (the rise in) traffic has brought it (pollution) to almost the same levels,” Madhusudhan Anand. B, CTO & Co-Founder of Ambee, a Bengaluru-based startup that works to find solutions for air pollution said.

“In areas that lead to highways outside the city, pollution levels are back at pre-Covid levels,” Anand added.

## **Tuberculosis**

### **Lessons from Covid-19 pandemic must be deployed to control tuberculosis (The Indian Express: 20210219)**

<https://indianexpress.com/article/opinion/columns/coronavirus-covid-19-cases-tuberculosis-cases-in-india-7194807/>

The fight against COVID-19 has led to increased awareness of respiratory infections, which may help remove the stigma associated with TB.

Few are aware of the fact that India loses more than 4,00,000 lives every year due to TB.

Last month, I got a call from my elder brother that Shruti was critical. The 21-year-old daughter of his office driver was in acute respiratory distress. Being a medical doctor, I had facilitated the treatment of many such cases since the onset of the COVID-19 pandemic. Hurriedly, I referred Shruti to my friend Dr Sameer. COVID-19 creates severe complications in the elderly and those with co-morbidities. But this was a seemingly healthy young woman. The next day Sameer updated me on the diagnosis. Shruti was suffering from tuberculosis (TB).

India reported the first case of COVID-19 on January 30, 2020. In one year, the pandemic caused 10.7 million cases and 1,54,000 deaths. While social and economic life in much of the world remains paralysed due to a strong second wave of COVID-19, life in India is fast returning to normal with a consistent decline in new cases since mid-September. A wider acceptance of the preventive measures has proved to be a critical game-changer for India.

However, few are aware of the fact that India loses more than 4,00,000 lives every year due to TB. India is home to one-sixth of humanity but shares more than one-fourth of the global TB burden. The WHO reports that there are more than 10 million active TB cases in the country. The lessons learned during the COVID-19 battle can do a lot in controlling TB.

For over 3,000 years, TB has plagued mankind. It continues to wreak havoc because of its distinct features: Tuberculosis is a social disease. Due to overcrowding and malnutrition, it disproportionately affects the poor and the marginalised. The stigma and myths associated with this disease lead to underreporting and underdiagnosis. The long-drawn multi-drug treatment leads to poor compliance and drug-resistance, which hamper recovery. Complications increase with a pre-existing illness like diabetes or co-infection with HIV. Finally, the chronic nature of the disease and propensity to damage multiple organs increase mortality risk.

The Prime Minister consistently advocates community-driven efforts to address social problems. His call for Swachh Bharat galvanised the nation and increased the nationwide toilet coverage from 39 per cent (2014) to 100 per cent (2019). He knows the health and economic benefits of TB elimination and has set an ambitious target of TB-free India by 2025, five years ahead of the Sustainable Development Goal target.

When COVID-19 reached India, the PM, in his first address to the nation on March 19 last year, appealed to the public to observe physical distancing to prevent infection. Later, he urged for the universal use of face masks and emphasised rigorous testing, contact tracing, and prompt treatment. For a nation with six major religions, 28 states, 1,600 languages, and over 6,00,000 villages, inducing behaviour change amongst the masses was not easy. But Indians responded with considerable discipline. Despite a harsher winter, India has not witnessed a spike in COVID-19 like many other countries are experiencing.

India can successfully deploy lessons learned from containing the coronavirus for TB control. Since TB spreads through droplets of infected persons, physical distancing can reduce disease transmission. Patients with TB must wear a mask to prevent the spread of infection, and persons in the patient's regular contact should wear a mask for self-protection. Early diagnosis and treatment are the keys to success. The new diagnostic techniques give rapid and ultraprecise results compared to the traditional sputum test. Finally, instant case notification helps in better case tracking and contact monitoring.

A successful community-driven strategy, as shown during the Swachh Bharat campaign or COVID-19 control, if dovetailed with the existing TB control programme, which provides free diagnosis and treatment, can accelerate TB elimination. The fight against COVID-19 has led to increased awareness of respiratory infections, which may help remove the stigma associated with TB. Further, India's efforts to contain the coronavirus succeeded due to improved

coordination among central and state governments and innovative media campaigns. This momentum should not be allowed to dissipate when India has another respiratory disease killing two-and-a-half times as many people every year.

Timely intervention saved Shruti. After discharge from the hospital, she was put on anti-TB medicines. If citizens like her can practise physical distancing, use a face mask, seek prompt diagnosis, and complete the treatment, they can surely propel the growth story of the world's largest democracy.

This article first appeared in the print edition on February 19, 2021 under the title 'The other scourge'. The writer is a member of the Indian Administrative Service and is pursuing MPA at Harvard Kennedy School. He was involved in drafting the revised national strategy for TB control in 2017.

## Coronavirus (Hindustan: 20210219)

[https://epaper.livehindustan.com/imageview\\_648554\\_85392746\\_4\\_1\\_19-02-2021\\_3\\_i\\_1\\_sf.html](https://epaper.livehindustan.com/imageview_648554_85392746_4_1_19-02-2021_3_i_1_sf.html)

# कोरोना से जीतने को भारत ने दिए नौ मंत्र

नई दिल्ली | विशेष संवाददाता

दुनिया की मदद करने में जुटे भारत ने गुरुवार को संयुक्त राष्ट्र के माध्यम से कोरोना से जंग जीतने के लिए नौ सूत्रीय फॉर्मूला दिया है।

जयशंकर कोरोना के मद्देनजर देशों के शत्रुता उन्मूलन प्रस्ताव 2532 (2020) के क्रियान्वयन पर आयोजित संयुक्त राष्ट्र सुरक्षा परिषद की डिजिटल खुली बहस में बोल रहे थे। उन्होंने श्रीमद् भगवद्गीता के दर्शन से दुनिया का परिचय कराते हुए कहा- अपना काम हमेशा दूसरों के कल्याण को ध्यान में रखकर करें।

## फॉर्मूला : टीकाकरण चलता रहे, दुष्प्रचार रोकें

1. टीकाकरण अभियान तेज गति से चलते रहना चाहिए।
2. वायरस के रूपांतरण और अन्य प्रकार को ट्रैक करने के लिए जीनोमिक निगरानी की जाए।
3. टीके की प्रतिरोधक क्षमता के बारे में सार्वजनिक तौर पर प्रभावी ढंग से लोगों को बताना चाहिए।
4. सार्वजनिक स्वास्थ्य के बुनियादी ढांचे में सुधार करते हुए प्रभावी प्रशिक्षण कार्यक्रम चलाए जाए।
5. वैक्सीन राष्ट्रवाद बंद कर विश्व बंधुत्व का भाव बढ़ाना होगा।
6. कोवैक्स सुविधा को मजबूत करने की जरूरत है, जिससे न्यायसंगत तरीके से टीकों का वितरण हो।
7. दुनियाभर में अन्य बीमारियों का भी टीकाकरण कार्यक्रम फिर शुरू हो।
8. टीकाकरण पर दुष्प्रचार करने वाले अभियानों पर रोक लगाया जाए।
9. देशों को क्षमता में सुधार करते हुए प्रोटोकॉल विकसित कर ज्ञान आधारित विशेषज्ञता का निर्माण करना चाहिए।

**Vaccination ((Hindustan: 20210219)**

[https://epaper.livehindustan.com/imageview\\_648557\\_85825434\\_4\\_1\\_19-02-2021\\_6\\_i\\_1\\_sf.html](https://epaper.livehindustan.com/imageview_648557_85825434_4_1_19-02-2021_6_i_1_sf.html)

# एम्स में 600 लोगों को टीका लगाया गया



नई दिल्ली | वरिष्ठ संवाददाता

एम्स में गुरुवार को रिकॉर्ड 600 लोगों को टीका लगाया गया। इनमें स्वास्थ्यकर्मियों की संख्या फ्रंटलाइन पर काम करने वाले कर्मियों से अधिक रही। यह पहली बार है जब एम्स में एक

## 130 नए मरीज मिले

दिल्ली में 130 नए कोरोना संक्रमित मिले। बुधवार को हुए 60,441 सैंपल की जांच में 0.22 फीसदी संक्रमित मिले। वहीं, स्वास्थ्य विभाग के अनुसार गुरुवार को 153 मरीजों को छुट्टी मिली।

दिन में इतनी बड़ी संख्या में लोगों का टीकाकरण हुआ है।

वहीं, दिल्ली में गुरुवार को रिकॉर्ड कुल 24,417 कर्मचारियों को टीका लगाया गया। गुरुवार को कुल 302 केंद्रों पर टीकाकरण किया गया।