



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Thursday 20210603

Third wave

Third wave? Govt to ramp up health infra for children (The Tribune: 20210603)

<https://www.tribuneindia.com/news/coronavirus/third-wave-govt-to-ramp-up-health-infra-for-children-261833>

Amid fears that the potential third wave of Covid-19 might impact children more, India is in the process of adopting fresh guidelines on pediatric Covid disease with a group of experts telling the government to prepare for the worst and ramp up hospital infrastructure for children.

VK Paul, Member, Health, NITI Aayog, today said though there was no evidence of serious Covid disease in children, the impact could increase if the virus changed its behaviour.

“Our focus on pediatric Covid disease is gaining attention. We will strengthen our systems for children and audit what is required and what might be required in a worst case scenario,” said Paul.

He said a national expert group on pediatric Covid had given a detailed report which would be adopted soon.

The push in the direction follows realisation that 2-3 per cent of the children infected with Covid might need hospitalisation. Paul said the plan was to ramp up pediatric hospital facilities by 2.5 times.

He also shared evidence of a new serious post-Covid disease among children which showed up two to six weeks after recovery and could turn into an emergency situation.

COVID-19 vaccines

Over 1.64 crore COVID-19 vaccines still available with states: Centre (The Tribune: 20210603)

<https://www.tribuneindia.com/news/coronavirus/over-1-64-crore-covid-19-vaccines-still-available-with-states-centre-262305>

Centre has so far provided 23 crore vaccine doses to states and UTs

Over 1.64 crore COVID-19 vaccines still available with states: Centre

Centre has so far provided 23 crore vaccine doses to states and UTs

More than 1.64 crore COVID-19 vaccine doses are still available with the states and UTs to be administered, the Union Health Ministry said on Wednesday.

The Centre has so far provided, both through the free of cost and through direct state procurement categories, more than 23 crore vaccine doses to states and UTs.

Of this, the total consumption, including wastages, is 21,71,44,022 doses, the ministry said.

A total of 1,64,42,938 COVID-19 vaccine doses are still available with the states and UTs to be administered, it said.

As part of the nationwide vaccination drive, the Centre has been supporting the states and UTs by providing them COVID-19 vaccines free of cost. PTI

New Cases

India records single-day spike of 1.65 lakh Covid cases, lowest in 46 days(The Tribune: 20210603)

<https://www.tribuneindia.com/news/coronavirus/india-records-single-day-spike-of-1-65-lakh-covid-cases-lowest-in-46-days-260687>

Tally reaches 2,78,94,800; death toll climbs to 3,25,972 with 3,460 fatalities

India records single-day spike of 1.65 lakh Covid cases, lowest in 46 days

Doctors perform surgery on a patient infected with black and white fungus at a hospital in Ajmer on May 29, 2021. PTI

India recorded a single-day rise of 1,65,553 new Covid-19 cases, the lowest in 46 days, taking the country's infection tally to 2,78,94,800, according to Union Health Ministry data updated on Sunday.

The daily positivity declined to 8.02 per cent, remaining below the 10 per cent-mark for the sixth consecutive day, while the weekly positivity rate dropped to 9.36 per cent, it said.

The death toll due to the disease climbed to 3,25,972 in the country with 3,460 fatalities being recorded in a span of 24 hours, the data updated at 8 am showed.

Also, 20,63,839 Covid-19 tests were conducted in the country on Saturday, taking the total number of such exams so far to 34,31,83,748, the ministry said.

The number of active cases has reduced to 21,14,508, comprising 7.58 per cent of the total infections, while the national Covid-19 recovery rate has improved to 91.25 per cent, it said.

The count of the daily new cases is the lowest in 46 days. India had recorded 1,61, 736 infections on April 13.

The number of people who have recuperated from the disease has surged to 2,54,54,320, while the case fatality rate stands at 1.17 per cent, the data stated.

India's Covid-19 tally had crossed the 20-lakh mark on August 7 last year, 30 lakh on August 23, 40 lakh on September 5, 50 lakh on September 16, 60 lakh on September 28, 70 lakh on October 11, 80 lakh on October 29, 90 lakh on November 20 and one crore on December 19.

India crossed the grim milestone of two crore infections on May 4.

Vaccine policy for 18-45 ‘

Vaccine policy for 18-45 ‘arbitrary, irrational’: SC (Hindustan Times: 20210603)

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

10 key points raised by the apex court

1 Vaccination of India's entire eligible population is the singular most important task

2 Paid system of inoculation for states/UTs is 'prima facie arbitrary and irrational'

3 Policy conflicts with the constitutional balance of responsibilities between Centre and states

4 Existing vaccination policy should be tested on anvil of right to equality under Article 14

5 Why can't Centre spend ₹35,000cr from Budget to vaccinate 18-45 age group?

6 Current policy benefits economically privileged sections of society

7 Marginalised sections will bear the brunt due to mandatory registration on Co-WIN

8 Place all documents, file notings to show 'thinking' behind the vaccination policy

9 Undertake a fresh review of the vaccination policy

10 Submit all data on inoculation done, and plan to vaccinate rest of the populace in 2 weeks



The Union government's coronavirus vaccination policy that has put the onus of giving doses to adults in the below-45 years age group entirely on states and private hospitals is "prima facie arbitrary and irrational", the Supreme Court said on Wednesday, ordering the Union government to submit within two weeks "all relevant documents and file notings" that reflect how the strategy came about.

Picking holes in the national vaccination policy, the top court held that the liberalised policy introduced on May 1 "conflicts with the constitutional balance of responsibilities between the Centre and states".

"...due to the importance of vaccinating individuals in the 18-44 age group, the policy of the central government for conducting free vaccination themselves for groups under the first 2 phases, and replacing it with paid vaccination by the State/UT Governments and private hospitals for the persons between 18-44 years, is, prima facie, arbitrary and irrational," said the order by the bench headed by justice Dhananjaya Y Chandrachud.

The issue has also sparked a row between some states and the Union government. States such as Delhi and West Bengal have said that they have been left to fend for themselves to secure doses for the under-45 age group, alluding to Centre's stand that doses can directly be bought from vaccine makers also based outside of India. Several state governments opened bids for purchase orders, but the response has been muted with most key vaccine makers saying they deal only with national governments.

The bench, which also included justices L Nageswara Rao and S Ravindra Bhat, asked the Union government to explain how ₹35,000 crore, earmarked for procuring vaccines in the

Union Budget for 2021-2022, have been spent so far and why they could not be utilised for vaccinating persons in the 18-45 age group.

It called on the Centre to submit an affidavit within two weeks with details of percentage of people vaccinated (single dose and double dose) as against all eligible people in rural and urban areas; an outline for how and when the Centre seeks to vaccinate the remaining population; complete data on purchase history, orders placed and projected dates of supplies, as well as the steps being taken to ensure drug availability for mucormycosis.

The court further requisitioned copies of all relevant documents and file noting from the government, “reflecting its thinking and culminating in the vaccination policy”.

States and UTs have also been directed to clarify through affidavits before the next date of hearing on June 30 if they have decided to vaccinate their population for free.

The court, which noted submissions may be the Union government on May 9, said that if the Union government’s “unique monopolistic buyer position” was the only reason for it to be receiving doses at a lower price, it was important for the so-called liberalised vaccination policy to be examined under Article 14 of the Constitution since “it could place severe burdens, particularly on States/UTs suffering from financial distress”.

Article 14 guarantees the fundamental right to equality in India.

The order came following a hearing on Monday in a suo motu (on its own) case initiated by the top court. The bench began its 32-page order by rejecting the Union government’s contention that any “overzealous judicial intervention” by the Supreme Court in the vaccination policy may lead to unintended circumstances.

“Our Constitution does not envisage courts to be silent spectators when constitutional rights of citizens are infringed by executive policies. Judicial review and soliciting constitutional justification for policies formulated by the executive is an essential function, which the courts are entrusted to perform,” said the bench.

The Union government effected significant changes to its Covid-19 vaccination protocol from May 1 in a set of decisions it called the liberalised vaccination policy. This change paved for people in the 18-45 age group to get doses, as long as these shots were acquired directly by the states or private hospitals from the manufacturers.

The government decided the doses will be split in a ratio of 50:25:25 between the Centre, states/UTs, and private hospitals. While the Centre is paying manufacturers ₹150 per dose for Covishield, states are buying it for ₹300 a dose. Similar disparity in prices apply to Covaxin as well

The order went into what it said were several issues with the government’s vaccination policy and directed the Centre “to undertake a fresh review of its vaccination policy” since vaccination of the nation’s entire eligible population, it emphasised, “is the singular most important task in effectively combating the Covid-19 pandemic in the long run”.

The number of issues regarding the procurement process, distribution and availability of vaccines must be clarified and the government must disclose a roadmap on how it planned to vaccinate all eligible persons by the year-end, the order said.

Solicitor general Tushar Mehta on Monday said all eligible people will be given doses by December 31.

Some of the issues the bench raised were those relating to equity of access. “Marginalised sections of the society would bear the brunt of the accessibility barrier” under the policy since it exclusively relied on a digital platform (Co-WIN) for registration and therefore, may cause “serious implications on the fundamental right to equality and the right to health of people”.

“...the present system of allowing only digital registration and booking of appointment on CoWIN, coupled with the current scarcity of vaccines, will ultimately ensure that initially all vaccines, whether free or paid, are first availed by the economically privileged sections of the society,” it said.

The court also asked why inoculation was open for 18-45 group in the third phase on a payment basis even though the experience of the second Covid-19 wave showed people of this age group were also affected.

It also asked the Centre to clarify the rationale behind equal apportionment of vaccines between states and private hospitals by specifying whether there was any mechanism to oversee how the hospitals were administering the jabs, in addition to ensuring equitable distribution of vaccines across sections of the society.

The bench was further not convinced by the Centre’s justification that vaccine prices were allowed to be more for states and private hospitals in order to spur competition that would attract more private manufacturers and eventually lower prices.

“The liberalised vaccination policy may not be able to yield the desired results of spurring competitive prices and higher quantities of vaccines... Prima facie, the only room for negotiation with the two vaccine manufacturers was on price and quantity, both of which have been pre-fixed by the central government. This casts serious doubts on UoI’s justification for enabling higher prices as a competitive measure,” said the court.

It asked why the Centre did not procure 100% vaccines when large purchase orders for vaccines helped them get vaccines at lower prices.

Nudging the Centre to utilise its position as the monopolistic buyer in the market and pass down the benefit to all persons in the country, the court said that the “avoidable expense” due to the differential pricing will eventually hurt the welfare of individuals residing within those states and UTs.

About the pricing of the vaccine, the court questioned the Centre for intervening in pre-fixing procurement prices and quantities for states and private hospitals but choosing not to impose statutory price ceilings.

It asked the government to mention in its affidavit a comparison between the prices of vaccines being made available in India, to their prices internationally.

Covid-19: What you need to know today (Hindustan Times: 20210603)

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

India has avoided a potential superspreader event by cancelling the CBSE Class 12 exams, with the ISE board following suit, and other boards expected to do the same. This is the best possible outcome from the perspective of containing a pandemic and preventing a third wave.

Unlike some experts, who are convinced a third wave is inevitable, I believe it is possible for India to avoid a third wave, but this is contingent on four actions.

The first is on deciding when and where to ease lockdowns and restrictions on movement and activities that now cover most parts of the country. Some states and Union territories have already started the process; others have announced plans and deadlines for doing so; but none of these is based on the one parameter that matters.

This is simply the proportion of the eligible population in a district that has been vaccinated. Ideally, this parameter should be read in consonance with the positivity rate. Some states and UTs are looking at the latter, but none appears to be basing its decision on the former. Given that the Union government no longer wants to be associated with lockdowns — the economic pain caused by the 68-day hard lockdown last year is still fresh in everyone's memories — it is unlikely that either the health ministry, or the Indian Council of Medical Research, or any of the empowered groups dealing with the pandemic, will prescribe guidelines for this. Therefore, it is up to the states. I'd suggest a benchmark for opening up that is a combination of a positivity rate (it needs to be either declining or stable) of a maximum of 5% for at least two weeks, and a vaccine coverage (at least one dose) of a minimum of 20% of the current eligible population (those over the age of 18). As of Tuesday night, this proportion was 18.4% for the nation as a whole, which means there will be districts that have exceeded 20%, and those that have done far less.

The second, which is related to the first, is to keep pushing ahead with the vaccine programme — in terms of approving more vaccines, lining up supplies, and enhancing delivery capacity — with the immediate target being coverage of at least 40% of the entire eligible population as soon as possible. Once India approves vaccines for those under the age of 18 years, the new target will be covering 40% of the entire population. Several countries have already done this. Israel has covered 62% of its entire population, the US, 51%, and Canada and the UK, 58%. Even Brazil has done 22%. India has covered around 13%. An honest effort to increase this number is required — not empty statements about administering 10 million vaccines a day from July or August (an unrealistic target given the supply situation).

The third is to link the stringency of non-pharmaceutical interventions in place in a district to the proportion of the population that has been vaccinated. More than anything else, this will give states the framework to decide when they can open up for certain activities. For instance, I believe that at 40%, most activities, including physical schooling, can be allowed, with masking and social distancing. It may still not make sense to allow large religious, cultural, or social events (including weddings). As a corollary, states should also decide which activities they will curtail in case of a flare-up in infections.

The fourth is to enhance surveillance, including sequencing enough viral genomes to identify potential threats from new variants of concern (new variants of the virus that are potentially more infectious), and acting on this knowledge. For instance, the UK, which, earlier this week celebrated zero deaths from Covid-19 for the first time since last March, is seeing an average of 3,300 cases a day, with almost 75% of these being caused by B.1.617.2 or Delta, the Sars-CoV-2 variant that was first spotted in India — and there are signs that the country may not end its lockdown on June 21 as it was scheduled to do on account of this.

post-Covid complications

Hospitals see a rise in cases of post-Covid complications (Hindustan Times: 20210603)

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



Health workers transfer a Covid-19 patient from Sri Guru Teg Bahadur Covid-19 care centre to Lok Nayak Hospital in Delhi on Tuesday. RAJ K RAJ/HT PHOTO

After Delhi witnessed a massive surge in Covid-19 infections in the second wave, patients are now returning to hospitals with not just the fungal infection, mucormycosis, but a myriad of symptoms, city doctors said. Extreme fatigue, lethargy, body and joint pain, brain fog, and fever are the most common, but there have also been cases of pneumonia, collapsed lungs, heart attacks, and strokes.

Cases of mucormycosis, referred to as black fungus, have shot up across the country with the disease being declared an epidemic in Delhi and several other states. So far, at least 848 cases of the infection have been reported by Delhi hospitals.

But doctors say that nearly 15-20% of hospitalised Covid-19 patients return with some complications; and that some who were not hospitalised when they got Covid may need hospital care for a second bout of health problems. “I would say around 15-20% of the hospitalised Covid-19 patients are returning with some or the other health problem. The number of people experiencing long Covid symptoms could be higher because many with lethargy, fever, body and joint ache might not be coming back to hospitals,” said Dr Vivek Nangia, head of the department of respiratory medicine at Max hospital, Saket. Long Covid has been described as a range of symptoms such as fatigue, headache, loss of smell, dizziness, chest pain, fever, depression that Covid-19 patients may experience up to 12 weeks after recovery.

Dr Suranjit Chatterjee, senior consultant of internal medicine at Indraprastha Apollo hospital, said almost 80% of the current hospitalisations are because of complications arising out of Covid-19. He added that many patients were coming in with high grade fever ranging between 102-104 degrees Fahrenheit, seven to 14 days after recovering from Covid-19. “Now, the fever can be because of the increased inflammation due to Covid-19 or it could be because of secondary infections. People must visit a doctor if they have persistent fever. We are seeing bacterial and fungal infections causing pneumonia. Aside from mucormycosis, I have also seen rare infection like nocardia (which can affect the lungs, brain, and skin) that usually affects those who are immuno-compromised,” Chatterjee said.

Diabetes

Use of steroids to treat Covid-19 patients has also led to many people developing high blood sugar, and for many, it is unlikely to be resolved, said Dr Anoop Misra, chairman, Fortis-CDOC Centre for Diabetes, Metabolic Diseases and Endocrinology. He said seven of every 10 new diabetes patients who consulted him last month were linked to Covid-19.

“Over 90% of the new-onset diabetes cases linked to Covid-19 was because of the use of steroids which drives up the blood glucose level. Among these people, there are some who have family history of diabetes, are obese, were pre-diabetics. Diabetes induced by steroids in these people is unlikely to resolve. It may resolve in those who are not overweight and do not have other risk factors for diabetes,” said Dr Misra.

He added that it was a fast-changing scenario and the numbers were likely to reduce this month as steroid use has gone down. He said the use of steroids was also leading to fluctuations in blood pressure that could lead to heart conditions.

Lung diseases

Dr Nangia has also been treating patients with secondary pneumonia caused by bacteria and fungus developed after recovering from Covid-19 pneumonia. At the post-Covid clinic, he said that he gets patients who are unable to get off oxygen even after weeks of being discharged from the hospital.

“Today, I saw a 25-year-old patient who was unable to get off oxygen six weeks after she was discharged. This is because of fibrosis or scarring of the lung tissues. Now, theories state that the fibrosis resolves on its own after several weeks without any specific treatment. But, there are likely to be some people who will have permanent fibrosis as well,” said Dr Nangia.

The damage to the lungs, especially during the inflammatory phase of Covid-19, also makes the tissue prone to injuries. “Another serious post-Covid complication is pulmonary embolism where a clot blocks the blood supply to the lungs. It can be life-threatening with patients dying within minutes, if the clot is big,” he said.

He said that people with sudden chest pain, breathlessness, and drop in oxygen saturation should go to hospital.

Heart ailments

Dr RR Kasliwal, chairman of cardiology department at Medanta hospital, said those who have recovered from Covid-19 should carefully monitor their heart for six months to a year.

“We’ve been seeing people develop heart dysfunction, high and irregular heart rhythm,” he said. This is in addition to some people who get heart attacks due to clotting in the inflammatory phase of Covid.

“After recovering from Covid-19, people should not sit at home and gain weight, but they should also not jump back in. They should go slow, start with light workout and then scale it up,” he said.

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Vaccination Policy (The Asian Age: 20210603)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=15627559>

SC slams Centre's vaccination policy as 'irrational', asks for purchase data

PARMOD KUMAR
NEW DELHI, JUNE 2

The Supreme Court on Wednesday slammed the Centre for asking it to keep its hands off the Covid vaccination policy and termed the government's decision to provide free vaccination to 45-plus, health care and frontline workers in Phase I, but in Phase II allowing private hospitals to charge those in 18-45 group as "irrational" and "arbitrary". In a stern order, the top court asked the Centre to furnish details of the purchase of all vaccines — Covaxin, Covishield and Sputnik V — till date, including "file notings reflecting its thinking and culminating in the vaccination policy", dates of all procurement orders placed and the quantity of vaccines procured. It also asked the Centre to "place on record a roadmap of projected availability of vaccines till 31 December 2021".

Saying that the issue of vaccination is absolutely essential and is the "singular most important task" for the government, the top court asked the Centre to furnish the complete vaccine purchase data within two weeks' time. The top court also sought data on the percentage of population that has been vaccinated (with one dose and both doses), as against eligible persons in the first three phases of the vaccination drive.

"Policy of Centre for conducting free vaccination for groups under first two phases and replacing it with paid vaccination by states/UTs and private hospitals for persons in 18-

44 years age group is prima facie arbitrary, irrational," said a special bench of Justices D.Y. Chandrachud, L.N. Rao and S. Ravindra Bhat hearing a suo motu case on Covid-19 management.

Referring to the Union Budget for 2021-22 which earmarked Rs 35,000 crore for procuring vaccines, the Supreme Court also asked Centre to clarify "how these funds have been spent so far and why these funds cannot be utilised for vaccinating all (free of cost) in the 18-44 group".

"While filing its affidavit, UoI (Union of India) shall also ensure that copies of all the relevant documents and file notings reflecting its thinking and culminating in the vaccination policy are also annexed on the vaccination policy. Hence, we

direct the UoI to file its affidavit within two weeks," the bench said in its May 31 order, which was uploaded on Wednesday on its website.

The top court objected to the Centre's affidavit claiming that "any over-zealous judicial intervention, though well-meaning, in the absence of expert advice or administrative experience may lead to unintended circumstances where the executive is left with little room to explore innovative solutions."

Justice D.Y. Chandrachud, who was heading the bench, told the Centre that "it is trite to state that separation of powers is a part of the basic structure of the Constitution," asserting that "the separation of power does not result in

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Health workers help Covid-19 patients during their admission at the Calcutta Medical College hospital on Wednesday. —PTI

COVID WATCH

1.32L

ACTIVE CASES IN INDIA IN 24 HOURS

3,207

DEATHS IN A DAY

₹35,000 cr Referring to Budget 2021-22 which earmarked ₹35,000 cr for procuring vaccines, SC has asked the Centre to explain "how these funds have been spent and why these funds cannot be utilised for vaccinating all (free of cost) in the 18-44 group"

Vaccination so far SC further asked the Centre to provide data on percentage of population that has been vaccinated (single and double dose) and indicate the percentage of rural population vaccinated so far

Purchase history Supreme Court also sought complete data on Centre's purchase history of all vaccines — Covishield, Covaxin and Sputnik V — till date

100%, how Referring to the Centre's assertion that all eligible persons would be vaccinated by year end, SC asked government to provide "an outline for how and when the government seeks to vaccinate the remaining population"

Naveen writes to CMs, wants Centre to procure all vaccines

Odisha CM changes stand as states face more challenges

AKSHAYA KUMAR SAHOO
BHUBANESWAR, JUNE 2

Odisha chief minister Naveen Patnaik on Tuesday wrote a letter to all his fellow CMs seeking a consensus on the centralised procurement of Covid-19 vaccines by the Centre in view of the challenges faced by states.

In his letter, Mr Patnaik said no state is safe unless all the states adopt vaccination as a top priority

and execute it on a war footing. "However, the states should not compete against each other to procure the vaccines. United efforts are required for vaccine procurement and states should have the flexibility to implement the vaccination drive based on the local circumstances," Mr Patnaik wrote.

The CM has highlighted the fact that many states have floated global tenders for vaccine procurement but it was quite clear that

global vaccine manufacturers are looking forward to the Centre for clearances as well as assurances. The manufacturers are unwilling to get into supply contracts with the state governments, he said.

"Under the circumstances, the best option available for the Government of India is to centrally procure vaccines and distribute the same among the states so that

■ Turn to Page 4

Post Covid Inflammatory (The Asian Age: 20210603)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=15627666>



A Covid-19 patient receives treatment inside CWG covid care centre in New Delhi on Wednesday. — PTI

Post-Covid inflammatory syndrome rises among kids

AGE CORRESPONDENT
NEW DELHI, JUNE 2

Even as coronavirus cases in Delhi have begun to decline, the national capital is witnessing a surge of another disease affecting children. According to several doctors, the disease, called multi-organ inflammatory syndrome in children (MIS-C), has escalated due to post-Covid complications. Amid the rise in MIS-C cases, Delhi's Sir

▶ ACCORDING TO doctors, the disease, called multi-organ inflammatory syndrome in children (MIS-C), has escalated due to post-Covid complications

Ganga Ram Hospital has set up a dedicated ward for such children.

Dr. Dhiren Gupta, Covid Specialist, and Paediatric Pulmonologist, and Intensivist, Senior consultant at Sir Ganga Ram

Hospital said that almost 70% of MIS-C patients require ICU bed. Dr Gupta said the hospital has been witnessing at least 10 cases in 24 hours. Cases of MIS-C have been seen in children during the recovery phase or after two to four weeks of acute Covid. "Last year, we also had MIS-C cases but this time the cases are much higher. At Ganga Ram, we have seen as many as 10 cases in 24 hours," he said.

Free Vaccines for All (The Asian Age: 20210603)

<http://onlinepaper.asianage.com/article/detailpage.aspx?id=15627495>

■ Rahul urges people to speak up ■ Priyanka highlights flaws in distribution Cong calls for free vaccines for all

AGE CORRESPONDENT
NEW DELHI, JUNE 2

The Congress on Wednesday urged the citizens of the country to speak up for free universal vaccination. The party took to social media to highlight its position.

Congress leader Rahul Gandhi tweeted in Hindi, "Vaccine is the strongest protection against Covid pandemic. You should also raise your voice to provide free vaccination to everybody and to wake the government up."

He also started the

#SpeakUp and attached a video with his tweet to underscore the shortage of vaccines and how faulty policies of the center are responsible for the "slow pace" of vaccination in the country.

Meanwhile, Congress general secretary Priyanka Gandhi highlighted the flaws in vaccine distribution. She tweeted, "We are one of the biggest vaccine manufacturers in the world. Yet only 3.4% of our population is fully vaccinated. Who is responsible for India's confused and dithering vaccination

6 Vaccine is the strongest protection... You should also raise your voice to provide free vaccination to everybody and to wake the govt up.

— Rahul Gandhi,
Cong leader



program? #SpeakUpForFreeUniversalVaccination." She also attached a video

along with her tweet. In her Facebook post she wrote, "Experts believe that to defeat coronavirus, vaccination is the key and the countries which have vaccinated its people have seen less impact of the second wave, but in our country it was 320 per cent more than the first wave." She further added that the citizens are asking why the situation has come to this that the state governments have to go for global tender and compete for different rates for the same vaccine. How the government is claiming to vacci-

nate every Indian by the end of this year and what is the plan to vaccinate those who are deprived of digital connectivity?"

Party leader and Rajasthan chief minister Ashok Gehlot also said free universal vaccination is the right of every Indian.

"All previous Central governments have been taking this programme forward. Now when the nation is grappling with an unprecedented health crisis, to deny vaccination to all is totally unjust," Mr Gehlot tweeted.

Vaccines (Hindustan: 20210603)

https://epaper.livehindustan.com/imageview_844711_110744890_4_1_03-06-2021_0_i_1_sf.html

सख्ती: शीर्ष अदालत ने कहा- सरकार की नीति मनमानी और तर्कहीन, पूछा-35 हजार करोड़ के बजट से कितना खर्च किया

सुप्रीम कोर्ट ने टीकों का हिसाब मांगा

नई दिल्ली | विशेष संवाददाता
कोरोना टीकाकरण व दवाओं को लेकर सुप्रीम कोर्ट ने केंद्र से कई सवाल पूछे हैं। अबलत ने कहा कि 18 से 44 वर्ष के लोगों के लिए टीकाकरण की नीति क्या है, सरकार को इस बारे में सोच क्या है और अब तक क्या-क्या फैसले लिए गए हैं, इसकी पूरी जानकारी दस्तावेजों और फाइलों को नोटिंग के साथ रिकॉर्ड पर रखी जाए। साथ ही, कोवैक्सीन और कोविशील्ड समेत अब तक कितने टीके कब-कब खरीदे गए, इसका भी ब्योरा अदालत के सामने पेश किया जाए।
नीति मनमानी: जस्टिस डीवाई चंद्रचूड़, एलएन गव और श्रीपति रवींद्र भट्ट की विशेष पीठ ने सरकार को 'पैसे देकर टीका लगवाने की नीति' को प्रथमदृष्टया मनमानी और तर्कहीन बताते हुए स्पष्ट करने का निर्देश दिया। पीठ ने पूछा कि कोरोना टीकाकरण के लिए आपने 35 हजार करोड़ का बजट रखा है, अब तक इसे कहाँ खर्च किया।
राज्यों से भी जवाब-तलाब: पीठ ने कहा कि केंद्र ने नौ मई को हलाफनामे में बताया था कि सभी राज्य/केंद्रशासित प्रदेश अपने यहां निशुल्क टीका लगवा रहे हैं, ऐसे में राज्य सरकारें भी दो हफ्ते



“ जब सरकार की नीतियों के जरिये नागरिकों के सवैधानिक अधिकारों का हनन हो रहा हो तो हमारा संविधान, अदालत को मूक दर्शक बनने रहने की इजाजत नहीं देता। - सुप्रीम कोर्ट

तीन अहम सवाल

- 1 टीकों के लिए ऑर्डर कब-कब दिया गया कोवैक्सीन, कोविशील्ड और स्पूनिक वी टीकों की खरीद के लिए केंद्र सरकार ने कब-कब ऑर्डर दिया जारीख के साथ बताएं। कितने टीकों का ऑर्डर दिया गया।
- 2 वैक्सीन की आपूर्ति की तारीख क्या है सुप्रीम कोर्ट ने सरकार से यह भी पूछा है कि जिन कोरोना टीकों का आपने ऑर्डर दिया है वे कब तक मिल जाएंगे और उनसे कितने लोगों को टीका लगाया जा सकेगा।
- 3 दिसंबर तक देशभर में टीकाकरण कैसे सरकार का दावा है कि दिसंबर तक देशभर में सभी लोगों को टीका लग जाएगा पर कैसे, सरकार 31 दिसंबर तक वैक्सीन की उपलब्धता का रीडमिशन भी कोर्ट के सामने दे।

ब्लैक फंगस की दवा पर भी जवाब-तलाब
राज्य अदालत ने म्यूकरमायकोसिस (ब्लैक फंगस) की दवा की उपलब्धता सुनिश्चित करने को उठाए गए कदमों के बारे में भी बताने को कहा है ताकि फैसला लिया जा सके

'अफसरों पर हत्या का आरोप क्यों न लगे'
दिल्ली हाईकोर्ट ने कहा कि कुछ लोग (अफसर) अगर टीका उत्पादन क्षमता का पूरा तरह से इस्तेमाल नहीं कर पा रहे तो उन पर हत्या का आरोप क्यों न लगे। **ब्योरा पृष्ठ 03**

के अंदर अपना रुख स्पष्ट करें। इसका भी ब्योरा दिया जाए कि कितनी प्रतिशत आबादी का टीकाकरण हो चुका है। इसमें पहली खुगक और दूसरी खुगक के संबंध में भी जानकारी देनी होगी। इस संबंध में आंकड़े भी मुहैया कराना है कि ग्रामीण आबादी और शहरी आबादी के

कितने प्रतिशत हिस्से का टीकाकरण हुआ है। शेष आबादी के टीकाकरण के बारे में भी जानकारी देनी होगी।
दो हफ्ते में जवाब मांगा: अदालत ने यह आदेश 31 मई को दिया था पर सुप्रीम कोर्ट की वेबसाइट पर बुधवार को अपलोड किया गया। आदेश में पीठ ने कहा, हम केंद्र सरकार को दो सप्ताह में हलाफनामा दाखिल करने का निर्देश देते हैं। पीठ ने केंद्र सरकार से यह सुनिश्चित करने को कहा कि आदेश में प्रत्येक मुद्दे पर अलग-अलग जवाब दिया जाए। सुप्रीम कोर्ट में केंद्र सरकार की वैक्सीन नीति को चुनौती दी गई है।

रियायत: विदेशी वैक्सीन को देश में परीक्षण से छूट

नई दिल्ली | विशेष संवाददाता
केंद्र सरकार ने विदेशों टीकों को देश में ब्रिज ट्रायल की अनिवार्यता से भी छूट दे दी है। इससे पहले अप्रैल में फैसला लिया गया था कि चुनिंदा देशों में मंजूर टीकों को बिना क्लिनिकल ट्रायल के आपात इस्तेमाल की मंजूरी दी जाएगी पर उन्हें बाद में ब्रिज ट्रायल करने होंगे।
ड्रग कंट्रोलर जनरल ऑफ इंडिया (डीसीजीआई) ने 15 अप्रैल को जारी आदेश में कहा है कि जो टीके अमेरिका, ब्रिटेन, यूरोप, जापान के नियामकों द्वारा स्वीकृत हो चुके हैं या डब्ल्यूएचओ की आपात इस्तेमाल की सूची में शामिल हैं, उन्हें बिना क्लिनिकल ट्रायल के भारत में मंजूरी दी जाएगी। इन टीकों को पहले 100 लोगों को दिया जाएगा और सात दिन तक निगरानी की जाएगी। सब ठीक रहा तो उनसे टीकाकरण किया जाएगा। मंजूरी के बाद कंपनियों को ब्रिज ट्रायल करने होंगे। इसे फेस-4 ट्रायल भी कहते

फायदा: फैसलों से टीके मिलने की उम्मीद बढी
भारत फाइजर, मॉडर्ना, जॉनसन एंड जॉनसन समेत कई विदेशी कंपनियों से टीका खरीदने का इच्छुक है पर ये कंपनियां नई-नई शर्तें लगा रही हैं। इसी के चलते इन्हें छूट दी गई है। फाइजर ने यह भी याग की है कि टीकों से होने वाले नुकसान की भरपाई से भी छूट मिले, पर इस पर फैसला नहीं हुआ। इन छूट से विदेशी टीके आने की उम्मीद बढी है।
यह टीके के इस्तेमाल होने के साथ-साथ यह चलता रहता है। सरकार ने यह भी छूट दे दी है कि यदि टीके के हर बैच को उनका देश की लेब में प्रमाणित किया है तो उन्हें भारत टेस्ट की जरूरत नहीं होगी। दरअसल, विदेशों से आने वाली दवाओं को सेंट्रल ड्रग लेबोरेटरी कसौली में टेस्ट के बाद ही इजाजत मिलती है।
➤ 2 .38 करोड़ खुराक पृष्ठ 07

Infection (Hindustan: 20210603)

https://epaper.livehindustan.com/imageview_844711_110736114_4_1_03-06-2021_0_i_1_sf.html

संक्रमण दर में कमी पर मौते फिर तीन हजार से ऊपर पहुंची

नई दिल्ली | हिन्दुस्तान टीम

देश में कोरोना संक्रमण दर में लगातार गिरावट दर्ज की जा रही है। मंगलवार के 6.6 फीसदी के मुकाबले बुधवार को यह दर मामूली घटकर 6.5% पर आ गई। देश में 23 दिन पहले संक्रमण दर 24.8 फीसदी के करीब थी। हालांकि, कोरोना से रोजाना मौते एक बार फिर तीन हजार के पार पहुंच गई।

स्वास्थ्य मंत्रालय के बुधवार को जारी आंकड़ों के अनुसार, भारत में एक दिन में 1.32 लाख नए मामले सामने

0.78 फीसदी
संक्रमण दर
दिल्ली में

0.50 प्रतिशत यूपी
में संक्रमण
की दर पहुंची

आए। हालांकि, इस दौरान 3,207 और लोगों ने जान गंवा दी। एक दिन पहले 2800 से कम मौते दर्ज की गई थी। रोजाना संक्रमण के मामले मंगलवार को 1.27 लाख दर्ज किए गए थे।

➤ शून्य पर ब्रिटेन पेज 07

Health Care Services (Hindustan: 20210603)

https://epaper.livehindustan.com/imageview_844722_111014338_4_1_03-06-2021_3_i_1_sf.html

उच्च न्यायालय ने पर्याप्त मात्रा में वैक्सीन उपलब्ध नहीं होने पर नाराजगी जताई

जब टीका नहीं था तो टीकाकरण इतनी धूमधाम से क्यों शुरू किया

फटकार

नई दिल्ली | प्रमुख संवाददाता

कोरोना से बचाव के लिए पर्याप्त मात्रा में टीका उपलब्ध नहीं होने पर उच्च न्यायालय ने बुधवार को नाराजगी जाहिर की। पीठ ने कहा कि जब आप यह सुनिश्चित नहीं कर सकते कि लोगों को कोवैक्सीन की दोनों खुराक समय सीमा के भीतर लग जाएं, तो फिर इतने धूमधाम से काफ़ी संख्या में टीकाकरण केंद्र नहीं खोलने चाहिए थे।

जस्टिस रेखा पल्ली ने दिल्ली सरकार से पूछा कि क्या आप टीके की पहले पहली खुराक ले चुके लोगों को छह सप्ताह की अवधि समाप्त होने से पहले कोवैक्सीन की दूसरी खुराक दे सकते हैं। पीठ ने दो लोगों की ओर से दाखिल याचिका पर सुनवाई के दौरान यह टिप्पणी की। टीके की पहली खुराक ले चुके याचिकाकर्ताओं ने केंद्र व दिल्ली को समय सीमा के भीतर टीके की दूसरी डोज लगाने का पर्याप्त प्रबंध करने का आदेश देने की मांग की है।

उच्च न्यायालय ने केंद्र व दिल्ली सरकार को नोटिस जारी कर टीकों की पर्याप्त उपलब्धता सुनिश्चित करने की मांग पर जवाब मांगा है।



50 हजार 382 लोगों (45 से अधिक आयु वाले) को वैक्सीन की डोज लगाई गई राजधानी दिल्ली में एक जून को

54 लाख 60 हजार 10 लोगों को वैक्सीन की डोज लग चुकी है, 42 लाख को पहली और 12.41 लाख को दोनों डोज लगीं

समय से नहीं मिल रही डोज : याचिका में कहा गया है कि राजधानी में कोरोना संक्रमण से बचाव के लिए लगाए जा रहे टीका कोवैक्सीन और कोविशील्ड दोनों की कमी है और पहली खुराक ले चुके लोगों को दूसरी डोज समय से नहीं मिल रही है। याचिका में कहा गया है कि पहली डोज ले चुके लोग इसके लिए परेशान हो रहे हैं।

कंपनी से बात चल रही : दिल्ली सरकार की ओर से अतिरिक्त स्थायी अधिवक्ता अनुज अग्रवाल ने न्यायालय को बताया कि टीकों की पर्याप्त आपूर्ति के लिए उत्पादक कंपनियों से बात चल रही है।

‘कुछ अफसरों पर हत्या का आरोप लगाया जाना चाहिए’

नई दिल्ली | प्रमुख संवाददाता

उच्च न्यायालय ने बुधवार को देश में कोरोना संक्रमण से बचाव का टीका उत्पादन की क्षमता का पूरी तरह से इस्तेमाल नहीं किए जाने पर केंद्र सरकार को कड़ी फटकार लगाई। न्यायालय ने तीखी टिप्पणी करते हुए कहा कि ‘कुछ लोगों (अधिकारियों) पर हत्या का आरोप लगाया जाना चाहिए, यदि वे देश के टीका बनाने की क्षमता का इस्तेमाल नहीं करते हैं तो।’

जस्टिस मनमोहन और नज्मी वजीरी की पीठ ने कहा कि देश में टीकों के उत्पादन के लिए बहुत अधिक गुंजाइश और बुनियादी ढांचा उपलब्ध है। पीठ ने कहा कि हमें अप्रयुक्त क्षमता का उपयोग करना होगा, आपके (केंद्र) अधिकारियों को इसका एहसास नहीं हो रहा है। पीठ ने कहा कि कोरोना संक्रमण से बचाव के लिए देश में टीका को लेकर एक स्पष्ट बेचैनी है, वैक्सीन की जरूरत सबको है। न्यायालय ने सरकार से कहा कि आपके पास संप्रभु

मूलतः समस्या अधिकारियों में सतर्कता जांच, ऑडिट और अन्य पुलिस जांच की डर के अनौचित्य की है। सरकार के अधिकारियों को इस स्तर पर इन पूछताछों से थकना नहीं चाहिए। इस तरह का रवैया लोगों को मौतों की ओर ले जा रहा है, वास्तव में कुछ लोगों पर हत्या का आरोप लगाया जाना चाहिए, यदि वे टीका उत्पादन की अप्रयुक्त क्षमता का इस्तेमाल करने के बजाए इस पर बैठे हैं।

- अदालत की टिप्पणी

शक्तियां हैं।

उच्च न्यायालय ने दिल्ली की पेनासिया बायोटेक की ओर से दाखिल याचिका पर सुनवाई के दौरान यह टिप्पणी की है। इस कंपनी ने कोरोना से बचाव के लिए रूस की वैक्सीन स्पुतनिक वी के उत्पादन के लिए रूसियन डाइरेक्ट इन्वेस्टमेंट फंड (आरडीआईएफ) से करार किया है।

Coronavirus Patient (Hindustan: 20210603)

https://epaper.livehindustan.com/imageview_844722_110868096_4_1_03-06-2021_3_i_1_sf.html

राजधानी में 10 हजार से कम रह गए सक्रिय मरीज

राजधानी में महीनेभर में कोरोना के सक्रिय मरीजों की संख्या लगभग एक लाख से घटकर 10 हजार से भी कम रह गई है। दिल्ली के स्वास्थ्य विभाग की ओर से बुधवार को जारी आंकड़ों के मुताबिक राज्य में सक्रिय मरीजों की संख्या घटकर 9,314 रह गई है। दिल्ली में 30 अप्रैल को सक्रिय मरीजों की संख्या सबसे अधिक थी। इस दौरान 99361 सक्रिय मरीज थे। वरिष्ठ संवाददाता की रिपोर्ट...

ऐसे कम होती गई संख्या



01 महीने में राजधानी में सक्रिय मरीजों की संख्या में भारी कमी आई

अस्पतालों में 4012 पीड़ित

दिल्ली में कोरोना के मामले घटने पर अस्पतालों में भर्ती मरीजों की संख्या भी कम होने लगी है। दिल्ली के अस्पतालों में भर्ती कोरोना मरीजों की संख्या घटकर 4012 रह गई है। अभी कोरोना के कुल 24584 बेड हैं और इनमें से 20572 बेड खाली हैं। दिल्ली में 30 अप्रैल को 19739 कोरोना संक्रमित मरीज अस्पतालों में भर्ती थे।

कंटेमेंट जोन भी 18 हजार से कम हुए

दिल्ली में कोरोना के घटते मामलों के साथ कंटेमेंट जोन भी तेजी से कम हो रहे हैं। 16 मई को दिल्ली में सबसे अधिक 57,309 कंटेमेंट जोन थे लेकिन अगले 19 दिनों में इनकी संख्या घटकर 17770 रह गई है। बुधवार को जारी आंकड़ों के मुताबिक दिल्ली में 17770 कंटेमेंट जोन ही बचे हैं।