



BRUHAT BENGALURU MAHANAGARA PALIKE, BANGALORE

ENGLISH NEWS PAPER CLIPPINGS
13-12-2020



INDEX

1. THE HINDU
2. DECCAN HERALD
3. TIMES OF INDIA
4. BANGALORE MIRROR
5. THE NEW INDIAN EXPRESS

1,203 new cases, 11 deaths

Bengaluru Urban reports 606 cases, taking tally to 3,77,857

SPECIAL CORRESPONDENT
BENGALURU

The State on Saturday reported 1,203 new cases of COVID-19, taking the total number of cases to 9,00,214. With 11 deaths, the toll rose to 11,939. This is apart from 19 deaths of patients due to non-COVID-19 reasons.

As many as 1,531 persons were discharged on Saturday, taking the total number

COVID-19

of recoveries to 8,70,002. Of the remaining 18,254 active patients, 244 were being monitored in the ICU. While the positivity rate for the day stood at 1.17 %, the Case Fatality Rate (CFR) touched 0.91%.

Bengaluru Urban report-

ed 606 cases, taking its tally to 3,77,857.

With six deaths coming from Bengaluru, the toll in this district rose to 4,230. Active cases in Bengaluru reduced to 12,902.

As many as 1,02,229 tests were conducted in the last 24 hours, including 88,503 RT-PCR tests. With this, the total tests rose to 1,22,66,816.

Can vaccines with EUA be used at the population level?

The emergency use approval has been based on safety and efficacy data from limited follow-up

R. PRASAD

Pfizer's mRNA vaccine has been approved for emergency use by the UK, Bahrain, Canada, Mexico and the U.S. The company has also applied for emergency use approval in India. The emergency use approval has been based on safety and efficacy data from limited follow-up. Vaccines tested and manufactured in India would take a little longer to reach the stage where data are available to support emergency use approval.

Meanwhile, the Indian government has spelt out four high-risk groups — health-care workers, frontline workers, those over 50 years of age and those aged below 50 years but with co-morbidities — would get the vaccine on priority. Most countries too identified the priority groups that would receive the vaccine first.

Pfizer has already indicated that it plans to file for full FDA approval in April next year; it was granted an EUA by the U.S. FDA on December 11. Moderna and AstraZeneca

too are likely to apply for full approval sometime next year once the trial is complete; vaccines from these two manufacturers are yet to be approved for emergency use by any country. In all likelihood, vaccines including the Indian ones granted emergency use approval in the next couple of months are likely to have safety and efficacy data to seek full approval at least by the end of next year.

Eligibility questions

With the focus on breaking the transmission chain by vaccinating a "critical mass of people", the question is whether people who do not belong to the priority groups will be eligible to get the vaccine even before a full approval is granted. "The special authorisation for use of vaccines at the population level based on early/interim data should be done with adequate oversight and by paying adequate attention to the need for collecting data on safety, efficacy through good quality pharmacovigilance," says Dr. Anant Bhan, a re-



Home truths: Vaccines tested and manufactured in India would take some more time to reach the stage where data are available to support emergency use approval. — GETTY IMAGES

searcher in global health and bioethics in an email. He feels that it is not important for COVID-19 vaccines usage permission to be restricted only to high-risk populations if there is close oversight.

Virologist Dr. Shahid Jameel, Director of the Trivedi School of Biosciences at Ashoka University too shares the same idea that vaccines ap-

proved for emergency use should be available to all. "My understanding is that EUA is given during public health emergencies. That emergency is the same for everyone," he says in an email. "What is the point in developing vaccines while the pandemic is on and then not deploying them to control the pandemic? Seems

silly."

Safety data

Dr. Jameel then goes on to stress that safety data from limited follow-up would be sufficient even for universal vaccination. "When is safety testing enough? Data for many prior vaccines show that most adverse events take place within six weeks of im-

munisation. That is the logic for two months (US FDA) or 70 days (Europe Medicines Agency) waiting before EUA is granted," Dr. Jameel says.

Evidence-based usage

However, Dr. Giridhara Babu, epidemiologist with the Public Health Foundation of India, Bengaluru does not agree with universal vaccination based on emergency use approval. "Full approval is needed before beginning universal vaccination. Mass vaccination with any vaccine for which only partial data is available is unethical," Dr. Babu says in an email. "Evidence-based implementation is essential for mass vaccination. Therefore, vaccines that have only emergency use approval cannot be considered for mass vaccination."

Also, the DCGI has to clarify under what rule will it grant permissions for widespread usage since emergency use approval is not as such mentioned in Indian drugs/vaccines related laws and rules, says Dr. Bhan.

But no country including

India has plans for widespread vaccination based on emergency use approval. Also, the high-risk groups in India earmarked for vaccination on a priority basis once vaccines get emergency use approval works out to 300 million people. It might very well take a year to vaccinate the priority groups.

In mid-November, Serum had manufactured 40 million doses and was to soon begin making Novavax vaccine. Clinical trials of other vaccines are currently under way in India. Vaccines such as the ones tested by Pfizer and Moderna will be expensive when available in India and might not be used by the government to vaccinate high risk groups.

Pfizer had however told the media that it would not make the vaccine available in the private market during the pandemic phase. The question really is whether such vaccines with emergency use approval should be available in the open market for anyone to purchase and get vaccinated, says Dr. Jameel.

Emergency use of COVID-19 vaccines

What information has the Indian regulator sought from Serum Institute and Bharat Biotech?

JACOB KOSHY

The story so far: The Pune-based Serum Institute of India and Bharat Biotech of Hyderabad, frontrunners among Indian vaccine makers, have been advised by India's drugs regulator – the Drugs Controller General of India (DCGI) – to furnish more evidence that their vaccine candidates were safe and capable of preventing COVID-19. Neither company has finished testing its vaccines, but they chose to approach the drug regulator seeking 'emergency use' provisions.

What is emergency use authorisation (EUA) for drugs and vaccines?

The conventional process to approve new drugs or vaccines is to subject them to a clinical trial process. This means that after a prospective drug has been determined safe in animals, it is progressively tested in larger groups of people – healthy ones, if it is a vaccine – or patients, in case of a new drug.

The trials in phase 1, 2 and 3 are designed to establish the drug's safety and efficacy, and promoters of the new drug or vaccine must furnish data from each phase to a country's drugs regulators to satisfy them that the results are promising enough to move to the next stage. This process and the logistics of execution and evaluation are long, and it often takes years for a new entry to be commercially approved.

However, there may be several situations when the approval process must be hastened – for instance, a potential drug may be available to treat an extremely debilitating and rare disease, but there are too few potential patients to devise appropriate clinical trials; or there is an outbreak that is putting several lives at risk and no proven drugs or vaccines are at hand; or a drug or vaccine has been properly tested in one country and known to save lives and will evidently be useful in another country which has neither the resources nor expertise to subject it to a similar evaluation. It is under such circumstances that health regulators allow accelerated approvals under EUA. The latter is terminology specific to the United States Food and Drug Administration – it has just given emergency approval to a vaccine developed by Pfizer and BioNTech, the first vaccine to prevent COVID-19 approved in the U.S. – but several countries have similar provisions under similar names.

What is the process in India?

India does not have an explicit EUA provision. However, a section in the rules governing the use and regulation of



Vials of Covishield before they are packaged at a lab at the Serum Institute of India in Pune on November 30. ■AFP

Depending on the severity of the disease, urgency, rarity or the lack of alternative treatments, the regulator has the right to waive local clinical trials if a drug has been approved elsewhere

in the case of a new drug, the medical benefits of the drug are evaluated based on the first two phases of the testing and the larger – usually more time-consuming and expensive – phase 3 trial can be deferred. It is under such provisions that first pharmaceutical companies, and then vaccine firms, were able to offer drugs such as hydroxychloroquine, Remdesivir and Favipiravir to COVID-19 patients, even though there was little evidence to show that they worked.

Vaccine makers such as Serum Institute of India (SII), Bharat Biotech (BB), and Zydus Cadila, too, have been allowed to rely on the efficacy of data from other countries, or limited human trials to accelerate their testing process.

Why did India's drugs regulator seek more data?

The DCGI has a Subject Expert Committee (SEC) which evaluates technical data from trials. At its meeting on Wednesday, the committee said that in the case of SII, it would need "updated" safety data from the company's ongoing combined phase-2/3 trial on 1,500 volunteers in

India. Because the SII's vaccine, 'Covishield', is a version of the Oxford-AstraZeneca ChAdOx1 vaccine candidate, whose early results from its phase 3 trials are being scrutinised by the United Kingdom's drugs regulators, the Indian committee also wanted to evaluate this data as well as wait for that country's decision on the vaccine. In the case of Bharat Biotech, the regulator wanted to see data from the company's ongoing trial on 28,500 volunteers across India.

The committee has not laid bare its reasoning, but the rules say it is free to ask for any data it terms necessary to evaluate the risk-benefit ratio of approving an untested vaccine candidate.

What lies ahead?

Drugs regulators are not enjoined to approve a drug just because there is a pandemic. However, this is a rare historic moment when drugs and vaccines anywhere, even with the slightest promise, are being given unprecedented leeway and are nudged by the government to rapidly bring an effective vaccine to market. Companies are allowed to furnish 'interim' data – they do not have to wait for trials to end before approaching the regulator. In the case of SII, the approval of the ChAdOx1 vaccine in the United Kingdom could potentially mean almost immediate approval in India.

Another factor would be the frequency of adverse events and reactions. While there have been reports of volunteers in global trials – and in India too – experiencing severe reactions, none has been definitely linked to the administration of the vaccine. Being convinced that Indians, if not significantly benefited, would not come to harm at least, will be a key factor influencing the committee's decision.

Health inspector caught red-handed accepting bribe

BENGALURU, DHNS: Anti-Corruption Bureau officials on Friday arrested a senior BBMP health inspector, T Dasarahalli zone, red-handed while accepting a bribe from a man who needed a licence to run an oil mill. VR Praveen Kumar, a resident of Doddabidarakallu, is the arrested.

According to ACB officials, Jayanth, a resident of Mallasandra, had applied for a licence to run an oil mill in the T Dasarahalli zonal office limits.

Kumar told Jayanth it would take at least a month to issue the licence. Jayanth requested him to issue the licence at the earliest. Kumar said he would issue it in a day or two if Jayanth paid him Rs 12,000.

Kumar took Rs 3,000 as an advance and asked Jayanth to pay the remaining to speed up the process.

Jayanth, who had lost his job during the lockdown and had no income, decided to approach the ACB and file a complaint. ACB officials asked Jayanth to strike a deal



Senior BBMP health inspector Praveen Kumar (inset) demanded a bribe of Rs 12,000 from a man who needed a licence issued to start an oil mill (in pic).

with Kumar and pay Rs 7,000.

As Kumar was taking the money, the officials charged in and caught him red-handed and seized the amount. Fur-

ther investigation is on.

Jayanth said he wanted to start his own business so that he could provide jobs to a few people at his mill.



Sappers from MEG along with BBMP personnel pull in weeds and waste collected during the clean-up drive at Ulsoor Lake on Saturday. DH PHOTO/PUSHKAR V

BBMP, MEG personnel breathe fresh air into polluted Ulsoor Lake

Clean-up drive on for over a week, BBMP Commissioner lauds efforts

BENGALURU, DHNS

Giving a fresh lease of life to the polluted and weed-infested Halasuru Lake in the heart of the city, the BBMP and Madras Engineering Group (MEG) on Saturday took up a massive cleaning drive along the waterbody.

According to sources, as many as 50 BBMP and 50 MEG personnel have been working for over a week to clean up the lake, spread across 113 acres.

Joining the team on Saturday, an addi-

tional 130 volunteers, including 30 from BBMP along with 100 soldiers of MEG, removed weeds and other pollutants from the lake.

The staff were provided with five boats, life jackets and other essential tools. The team managed to remove about 30 loads of silt, plastic, weed and other waste from the lake and its banks.

Inspecting the cleanliness drive, BBMP Commissioner N Manjunatha Prasad lauded the work taken up by his men and MEG personnel.

"Ulsoor Lake, being the training centre for MEG and also a popular spot in the city, requires maintenance round the year. We will have more facilities for walkers and joggers in the coming days. We will take up beautification work by allocating a separate budget in the next BBMP budget," Prasad said. Brigadier TPS Wadhwa, Commandant of MEG, was also present.



Karnataka's Covid tally breaches 9-lakh mark

BENGALURU, DHNS: Karnataka's Covid-19 tally on Saturday breached the nine-lakh mark on Saturday with 1,203 fresh Covid-19 infections. Eleven fatalities in the day took the toll to 11,939.

As on December 12, the case tally in the state reached 9,00,214. This includes 8,70,002 discharges. There are 18,254 active carriers of the virus in the state, of which, 244 were in ICUs.

On Saturday, Bengaluru Urban reported 606 Covid in-

fections and six related deaths. The number of Covid cases in the city went up to 3,77,857. There are 12,902 active cases in the state capital, as on Dec 12.

Outside Bengaluru, Mysuru reported next highest new cases with 59 followed by Dakshina Kannada 53, Chitradurga 51 and Chikkaballapur 39.

A total of 1,02,229 Covid tests were carried out in the state on Saturday. So far, 1.23 crore-plus tests have been conducted in the state since the outbreak of novel coronavirus in March.

Covid more fatal for men, finds K'taka data

Most deaths in the state occurred in ICUs, says ongoing assessment

AKHIL KADIDAL
BENGALURU, DHNS

The death rate among men with Covid-19 is nearly 2.1 times that of women, an assessment by state health authorities has found.

The finding tallies with an international study that finds

that men hit with Covid-19 are more prone to going into ICU, and also that most of the deaths that have happened in ICUs are of men.

Dr Thirlok Chandra, head of the Critical Care Support Unit (CCSU), said the finding has been made as the result of an ongoing assessment of deaths.

"Within the limits of the BBMP alone, 3,25,999 men were infected with Covid-19 as opposed to 1,40,993 women up to December 9. Out of this, 2,876 who died were men. This is 2.1 times the number of women who died (1,334)," he said.

Dr Chandra said the numbers corroborate an interna-

INDIA COVID CASES ON SATURDAY	30,264	381 DEATHS
Friday's cases:	30,006	Deaths: 442
KARNATAKA CASES ON SATURDAY	1,203	11 DEATHS
Friday's cases:	1,210	Deaths: 16
TILL 9.45 PM, SOURCE: DHNS/PTI		

tional study which has found that males are more prone to developing serious complications due to the disease.

In Karnataka, official data shows that out of 11,880 people who died up to December 8, 40 were children, out of which 24 were males. Among

adults, the gap increased significantly. Another 557 people had either died at home or had been brought dead. Out of the remaining 11,283 who had succumbed in hospitals, 7,843 were males aged 19 and above while 3,440 were females.

"In Karnataka, most Cov-

id-19 deaths are ICU deaths," Dr Chandra clarified.

Why women fare better

Dr Anoop Amarnath, also of the CCSU and head of Clinical Research and Scientific Review Board at Manipal Hospitals, said fundamental differences in immune response between males and females could be responsible for why women are largely spared the lethal effects. "For example, the estradiol hormone which is found in women plays a role in curtailment of cytokine storms. In contrast, the male testosterone hormone suppresses the immune system," he said.

How vaccine myths are spreading in India

Not everyone is cheering the Covid vaccine rollout. A small but growing bunch of Indian anti-vaxxers is circulating misinformation on social media

Sonam Joshi @timesgroup.com

The video begins with a hit song from Bobby in which Rishi Kapoor and Dimple Kapadia croon 'Pehle tum, pehle tum'. Cut to a shot of a grim-looking man named Biswaroop Roy Chowdhury who says the lyrics describe the attitude of doctors when it comes to the Covid vaccine in India. He goes on to list alleged adverse reactions of vaccines. "If anyone influences you to take the vaccine, he is part of a group that wants to end your life and property. Save yourself and your loved ones," he declares.

This is one of the most widely circulated videos in anti-vaccine groups (or anti-vaxxers as they are known) on Facebook and messaging app Telegram. Over the last few months, Chowdhury, who says he has a PhD in diabetes from a university in Zambia, has put out several videos claiming that the Covid-19 vaccines are a strategy for population control and dubbing it just a flu. After his YouTube and social media channels were banned, he now shares these videos on his personal website and Telegram groups with thousands of followers.

Syed Nazakat, founder of fact-checking platforms DataLeads and Health Analytics Asia, which is working with doctors in 18

There are groups in India who discredit vaccines, mostly due to religious beliefs or their interest in alternative medicine

— SYED NAZAKAT
FOUNDER OF HEALTH ANALYTICS ASIA

Asian countries to fact-check health and COVID-19 related content, says they have noticed conspiracy theories related to vaccinations in full swing. "Unlike Europe and the US where the anti-vaccine lobby is big, powerful and organised, there are splinter interest groups in India who discredit vaccines, mostly due to religious beliefs or their interest in alternative medicine. A lot of homeopaths and naturopaths are behind this anti-vaccine rhetoric."

While India's anti-vaccine movement is small, social media has connected many skeptics. Their posts are often amplified by Facebook, Telegram and WhatsApp groups.



What doctor's says about COVID-19 Vaccine
पहले तुम पहले तुम

Biswaroop Roy Chowdhury's videos make many unverified claims

- Social media accounts held by so-called anti-vaxxers have increased following by at least 7-8m people since 2019
- 31m follow anti-vaccine groups on Facebook, with 17m subscribing to similar accounts on YouTube

Source: Report by Centre for Countering Digital Hate

Aware of the problem, social networks like Facebook and YouTube say they are removing debunked claims about vaccines.

When TOI spoke to Chowdhury, he described Covid as a "scam" and a "Wall Street pandemic". "Vaccines are not needed for anyone but only for financial gains at the cost of making people sick." He added that his seven-year-old daughter hasn't been vaccinated except for a BCG vaccine given by the hospital without his permission.

Nazakat says much of the misleading content about vaccines goes unnoticed because it is in local languages. "The main target of the anti-vaccine community is the MMR vaccine, which protects against measles, mumps and rubella. Last year, parents of more than 240,000 children in a southern state refused to get their children MMR vaccine after a fake message circulated on WhatsApp and Facebook claimed that the vaccine can harm children," he says. "The immunisation drive was stalled for nearly two months."

Many can't distinguish between real information and false claims. Pune-based nutritionist Mugdha Pradhan is convinced that vaccines contain toxins. "My daughter was diagnosed with Attention Deficit Hyperactivity Disorder, which worsened after she received the H1N1 vaccine in

2014." What about the new Covid vaccine? "Nobody in my family is getting it. It is not tried and tested enough and we don't want to be guinea pigs," says the 42-year-old.

Like Pradhan, Mumbai-based sales and marketing professional Nisha Kolri, 47, says no one in her family will take the Covid vaccine because "it is so dangerous". Kolri began questioning vaccines after being diagnosed with breast cancer in 2016. Instead of a mastectomy and chemotherapy, she opted for naturopathy and dietary changes such as turning vegan. She says she's now healthy and her cancer has stopped growing. In 2018, when her daughter's school asked her to take a MMR vaccine, Kolri refused, along with parents of seven other children in her class. She says her sister-in-law too refused her daughter's booster MMR dose. "Vaccines are artificial—they are not medicines but drugs," she believes.

This lack of trust is what India had to overcome to finally eradicate polio in 2014. Many in the Muslim community thought the vaccine was a plot to make them infertile. But with the help of clerics and community leaders who appeared on local TV channels to make appeals, people were persuaded to drop their resistance. But in this internet age, there's no inoculation against misinformation.

Residents catch tanker dumping effluents in river

Nithya.Mandiyam
@timesgroup.com

Bengaluru: Two Rajarajeshwari Nagar residents caught a tanker discharging chemical effluents into Vrishabhavathi river, that has turned into a storm water drain (SWD) in the locality, in the wee hours of Friday. However, the culprits, including the tanker driver, managed to give residents the slip and vanish.

Vishal Suresh and Vadiraj S waited at the spot along with three Karnataka State Pollution Control Board (KSPCB) staffers and managed to catch the tanker around 3.15am.

"For a few days, many residents had been complaining about a toxic smell lingering in their homes and a yellowish discharge in the river," said Vishal. On his morning walk, he recently spotted a truck passing the spot where the stink was unbearable.

"I later spoke to my friend Vadiraj, who also complained of the foul smell, and we decided to track down the tanker," Vishal said. The duo found a spot near Banashankari 2nd Stage where chemical effluents were spilt on the street.

On Monday evening, they informed KSPCB officials about the spot and sought their help to catch the culprits. Around 3am on Friday, the residents and KSPCB staffers lay in wait.

"A cab passed by twice and stopped near the drain. In a few minutes, a truck (KA 50 2826) arrived at the spot with its headlights turned off and discharged the effluents," sa-



A CESSPOOL: Many RR Nagar residents have been complaining about toxic smell and a yellowish discharge in the river

id Gangadharswamy Gowda, a KSPCB guard.

The residents and guards immediately rushed to catch the tanker driver and other people in the cab. While the driver was caught, the others fled. "The driver immediately called someone, who came in a cab with four other people. We then alerted police. But in less than two minutes, the tanker driver got into the cab and escaped," said one of the KSPCB guards.

Senior KSPCB officials said they will look into the matter and in case any industrial unit is found guilty, action will be initiated against it. "An FIR has been lodged against the tanker owner and driver, but no details are known yet," an official added.

Why you shouldn't worry too much about vaccine side effects

It's true that Covid vaccines in some cases can cause fever and pain, but such reactions only show a vaccine is working

TIMES NEWS NETWORK

The vaccines are coming but they'll be no good without willing arms to take shots. For policymakers, the next challenge is to coax people to the vaccination centres. Rumours flying around on social media don't make their task easier.

In the US, a Pew survey shows 60% of people will "probably" or "definitely" take the vaccine — up from 51% in September — but only 37% are willing to be among the first to take it. They are afraid of the many rumoured and real side effects.

This fear is a known derailer of vaccination programmes. It keeps people from taking their annual flu shots, which have only mild side effects. But as the former US FDA commissioner Mark McClellan tells *The Washington Post*, Covid vaccines are likely to be "more unpleasant than flu vaccines."

About 2-10% of vaccine recipients can expect a reaction, data from the ongoing trials shows. It seems a small figure, but if 1 crore people take a shot, we are looking at 2 lakh to 10 lakh of them feeling sick for a day or two afterwards. As with most vaccines, some people may experience more severe side effects. But such cases tend to be rare and don't outweigh the benefits of getting vaccinated.

That's why it is important to address people's fears early. If they know what's coming — and that fever and pain for a couple of days is preferable to Covid — they will not be swayed by the anti-vaxxers.

TIP Don't schedule anything important for a couple of days after your vaccination. Let your office know in advance and keep paracetamol at home to deal with pain and fever.

NO GAIN WITHOUT PAIN

'Reactogenic' could be 2021's word of the year if even 5% of the population experiences vaccine side effects. It simply means causing a reaction. The *Post* says all of the major Covid vaccines are reactogenic. So, if you experience side effects after taking



KNOWN SIDE EFFECTS

Moderna

Injection site pain
Fatigue
Muscle pain
Joint pain
Redness at injection site



Pfizer

Fatigue
Headache



AstraZeneca/Oxford

Fatigue
Feverishness
Muscle pain
Injection site pain
Tenderness



TIP Pfizer's two doses are taken 21 days apart, Oxford's after 30 days. What if you fail to keep your second appointment? The *Washington Post* says don't worry but schedule another appointment soon. You won't need to repeat the first dose.

your shot, it's nothing to worry about. It just shows the vaccine is working. "It's absolutely normal," an expert tells the *Post*.

Why do vaccines cause reactions? The immune system does not like strangers floating around. Whether it's a virus or a vaccine, they come under fire, and the by-products of this reaction circulate in blood, causing other reactions, such as rashes and headaches. The mRNA vaccines from Pfizer and Moderna cause side effects for another reason — they deliver the mRNA wrapped in a lipid (fat), which the immune system does not take kindly to.

The immune system gets more tolerant with age. For example, high fever of 105°F is not unusual in children but rare in adults, an article in *Inverse* points out. This explains why older people have reported milder reactions in vaccine trials.

TIP Russian authorities have advised men participating in the Sputnik V trial to not get anyone pregnant for the next three months as the vaccine's effect on sperm is not known.

HOW MUCH PAIN?

It's safe to assume that Covid vaccines can cause some reaction or discomfort for a few days, but how much discomfort?

The *Post* quotes a 34-year-old man who took Moderna's mRNA vaccine. He says he felt pain in his left arm a day after "it felt like somebody had bashed my arm for a solid hour". He also felt tired. These effects went away on the third day.

Deutsche Welle's Russia correspondent Sergey Satanovskiy took the Sputnik V vaccine in Moscow, and described his side effects in detail: "I developed a headache in the evening after leaving work and began to shiver and had a feeling of dizziness... My temperature rose to 38.6 degrees. I took some paracetamol... and went to bed. The next day, my temperature had gone down to 37°C. A day later, I had no more symptoms at all."

Both Pfizer and Moderna have reported stronger side effects in trial participants after the second vaccine dose.

SWITCHING GEAR: A Section Of Healthcare Workers Has Discarded Heavy Suits But Govt Hospitals Caution Against Dropping Guard

Teams at private hospitals swap PPE kits for lighter surgical gowns

Sanjitha.Rao@timesgroup.com

Bengaluru: After working long hours dressed in full personal protection equipment (PPE) for nearly 10 months, staff at some private hospitals have switched to surgical gowns, which are more comfortable. They say the gowns, combined with a mask, a face shield, gloves and shoe covers, offer adequate protection.

Staff members who have recovered from Covid-19 are particularly swapping PPEs for lighter gear, saying they face or pose no infection risk as they have developed immunity.

Scenes of healthcare workers in full body PPEs rushing to help patients have formed some of the most stirring images of the pandemic. A PPE of 70-90 grams per square metre (GSM) quality, approved by the South India Textile Research Association, includes safety goggles,



SPOT THE DIFFERENCE

• **PPE** — Designed to offer maximum protection. A PPE of 70-90 GSM quality includes safety goggles, bodysuit with head cover, shoe covers, gloves and mask.

• **Surgical gown** — Made of relatively lighter material, provides more comfort. May not have a hood. Wearers must combine it with additional components such as face shields.

bodysuit with head cover, shoe covers, gloves and mask. Designed for maximum safety, the kit cost Rs 1,500 to Rs 2,500 in the initial months of the pandemic. The price has now fallen to Rs 350 to Rs 500. Frontline medical workers around the world remain covered in PPE for more than six hours at a stretch.

Many have complained of excessive sweating and exhaustion. One reason, studies say, is that PPE components trap sweat.

Surgical gowns are made of comparatively thin material, offering greater comfort. But unlike PPE suits, they may not necessarily have a hood. "These gowns are also of 60-90 GSM qual-

ity. Compared to PPEs, they are easier to wear and remove. The cost is almost the same," said Dr Prasanna HM, managing director of Pristine Hospital.

According to Dr Prasanna, who heads the Private Hospitals and Nursing Homes' Association, staff at multiple facilities have started wearing gowns. "We now have light-weight surgical gowns, which don't allow fluid penetration. What was sold as a typical PPE suit was uncomfortable and staff experienced suffocation. We are using surgical gowns that are good enough for Covid-19 wards," said Dr Srinivas C, the CEO of Prakritya Hospitals. Employees here have been sporting gowns for the past two months.

Corporate hospitals have eased some rules, but doctors and nurses continue to wear PPEs in Covid-19 wards. "Compared to the initial period of the pandemic, we see many changes. Anxiety

among healthcare workers has come down. In non-Covid areas, they wear a mask and a face shield, but in Covid treating areas, PPEs are mandatory," said Dr Yathoesh Govindasah, chief of medical operations, Apollo Hospitals, Jayanagar.

Government hospitals have also not changed their policy. "We cannot afford to take risks," said Dr C Nagaraja, director, Rajiv Gandhi Institute of Chest Diseases, The Karnataka chapter of the Trained Nurses' Association had alleged loopholes in safety protocols of private hospitals and said healthcare workers should not take things lightly.

"It's fine to wear a gown, a mask, a face shield, gloves and shoe covers instead of a typical PPE. But nobody should have the false belief that once you have recovered, re-infection cannot occur," said Girilamba Devi, the association's general secretary.

K'taka Covid tally crosses 9 lakh mark

TIMES NEWS NETWORK

Bengaluru: The total Covid-19 cases in the state crossed 9 lakh on Saturday, of which more than 8.7 lakh patients have recovered. Karnataka reported the first Co-

► **US approves Pfizer's shot amid record death toll, P 16**

vid case on March 8. The state reported 1,203 new cases, of which 606 were from Bengaluru. The state's daily positivity rate stood at 1.1% and in a relief, the daily fatality rate was below 1%. Of the 11 Covid deaths reported in the past 24 hours, six were from Bengaluru.

Karnataka is 2nd state in country to cross 9L cases

| Sridhar Vivan
@timesgroup.com

TWEETS @sridharVMIRROR

Karnataka became the second state in the country to cross the nine-lakh mark in covid tally, on Saturday. Though the daily covid caseload has been consistently decreasing, it is the previously high caseload that has made the state one of the biggest contributors of covid cases in the country. Only Maharashtra is ahead of our state in the tally.

However, the recovery rate in the state has now touched a whopping 96 per cent, which is a welcome sign according to the experts.

The state's positivity rate is now at 1.3 per cent. Bengaluru rural has the highest positivity rate in the state at 2.5 per



cent, while Bidar has the lowest with just 0.2 per cent positivity. Bengaluru Urban's positivity rate is at 1.6 per cent.

Karnataka is now taking 91 days for its number of cases to double as against the national average of 89 days. Bidar is taking the maximum of 118 days for the cases to double while the lowest is at Kodagu

with 73 days and Bengaluru Urban is 82 days.

Meanwhile, Karnataka reported 1,203 fresh cases and 11 deaths on Saturday, while Bengaluru's contribution was 606 cases and six deaths. Around five out of the 30 districts have reported single-digit cases while deaths have been reported only from five districts.

The ICU admissions have also drastically reduced in the state. Currently, the number of active cases in the state is below 20,000. Of them, 244 patients are in ICUs of various hospitals while Bengaluru accounted for 111 ICU patients. Among the deceased, a 76-year-old man, who was admitted for ILI symptoms, is the oldest victim while the youngest was a 40-year old woman from Dakshina Kannada district.

Palike, MEG team up to clean Ulsoor Lake

EXPRESS NEWS SERVICE
@Bengaluru

THE Bruhat Bengaluru Mahanagara Palike (BBMP) partnered with Madras Engineer Group and Centre (MEG) joined hands once again on Saturday to clean Ulsoor lake.

The difference this time, was that it was decided to install trash barriers near the inlet point so that all the waste can be trapped.

The BBMP and MEG cleared 113 acres of the lake. While earlier 50 BBMP employees and 50 from MEG were deployed, on Saturday, 80 staffers from the Palike and 150 from MEG were roped in to clean



Madras Engineering Group and Centre personnel haul a load of trash fished out from Ulsoor Lake on Saturday | SHRIHARAN

the prime water body. They went around in five boats and collected 25-30 loads of weeds and plastic.

BBMP Commissioner N Manjunatha Prasad, who also participated in the drive, said that it since the MEG uses the water body for training purposes, it needs to be well-maintained always. It is also important to keep the lake clean as it is a prime space for walkers. Funds will be kept aside for cleaning the lake as it is concerned with the health of people.

He also said that 100 feet trash barriers are being erected at the water inlet of the lake so that waste and plastic does not enter the lake.

Govt appeals to SC on BBMP polls

EXPRESS NEWS SERVICE
@Bengaluru

THE Karnataka government has approached the Supreme Court, challenging the Karnataka High Court's orders on holding Bruhat Bengaluru Mahanagara Palike elections at the earliest.

A senior government official told The New Indian Express that the state government had approached the Supreme Court, challenging the High Court order. "The government does not want to hold elections. So, it has approached the apex body seek-

ing more time. Even though the corporation and election commission said that they were ready to hold the elections, the government was not convinced and decided to approach court seeking time.

The appeal was filed on December 10 and the case is yet to come up for hearing," the official said.

Recently, the Karnataka High Court had ordered the state government to conduct elections within six weeks from the date of issuing the reservations notification.

The state government held a meeting under the chairman-

ship of Law Minister J C Madhuswamy on what needs to be done, and it was decided to approach the Supreme Court.

A senior BBMP official said: "It was ideal to hold elections now with 198 wards as the exercise of proper division of all wards would take time. However, the government is keen that the division and elections be completed together. The state government approached the Supreme Court the day the assembly session passed the BBMP Bill. Since the other MLAs were also keen that the elections be done on the new Act, it was decided to file an appeal seeking more time."



in ICU is also low. Of 438 active cases in the district, 30 people are in ICU, including 13 at the designated Covid hospital and three in private hospitals. **ENS**