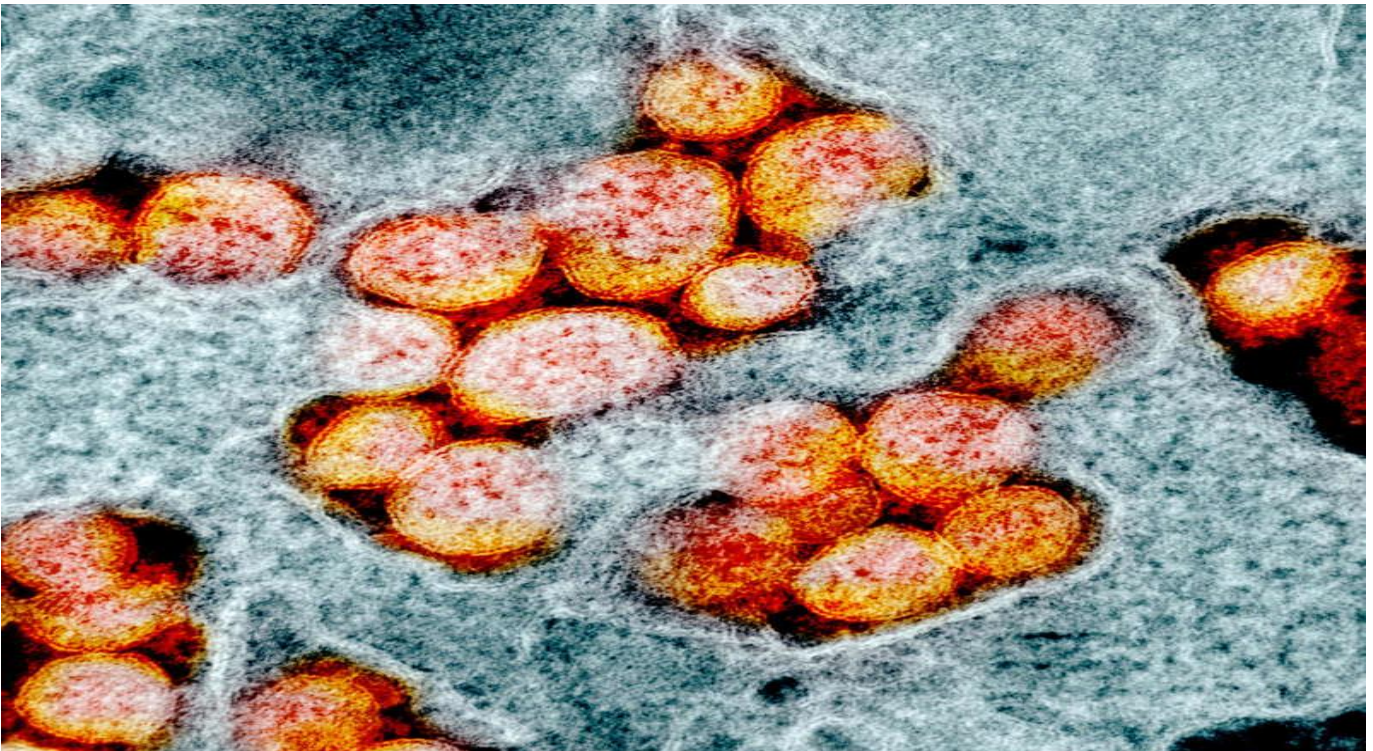
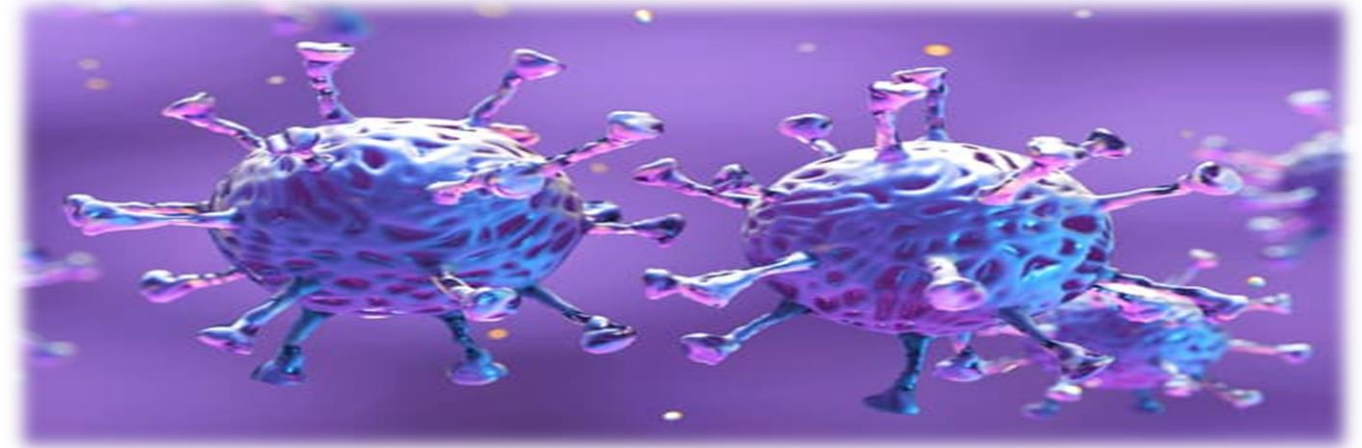


CORONAVIRUS NEWS BRIEF

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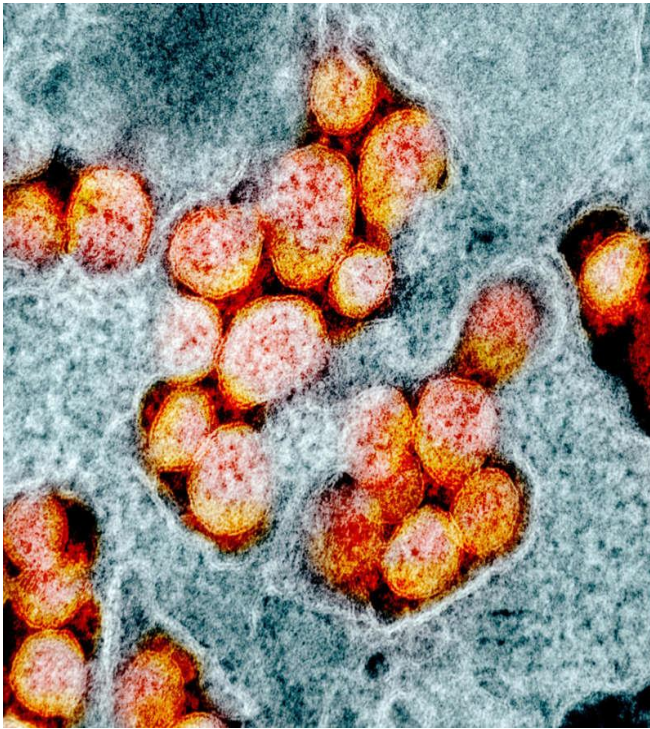
***Health officials keeping "very close eye"
on new COVID variant***

(Report on Page: 2)

Health officials keeping "very close eye" on new COVID variant

Li Cohen

As the [Delta variant](#) of COVID-19 continues its deadly sweep across the U.S., officials say that they are keeping a "very close eye" on a new variant that may be able to bypass existing coronavirus antibodies.



Transmission electron micrograph of SARS-CoV-2 virus particles, isolated from a patient

Dr. Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases, said on Thursday that the U.S. is taking the variant, dubbed Mu, "very seriously," but that it hasn't taken an extensive hold in this country.

"We're keeping a very close eye on it. It is really seen here, but it is not at all even close to being dominant," Fauci said. "As you know, the Delta is more than 99% dominant."

Fauci said the Mu variant, technically known as B.1.621, has mutations suggesting "it would evade certain antibodies," potentially including those from vaccines.

"But there isn't a lot of clinical data to suggest that. It is mostly laboratory in vitro data," he added. "...We don't consider it an immediate threat right now."

The World Health Organization designated Mu a "variant of interest" this week, and said more studies need to be done to confirm whether the variant could evade existing antibodies.

Viruses are known to mutate over time as they spread, and not all variants will be able to persist. If a variant of SARS-CoV-2, the virus that causes COVID-19, proves to spread faster, cause more severe illness or lessen the effectiveness of current prevention or treatment options, it gets categorized as a more serious "variant of concern."

There are currently four "variants of concern": Alpha, Beta, Gamma and Delta. Delta, which turned up in the U.S. in the spring, is more contagious and now makes up the overwhelming majority of U.S. cases.

Mu has been detected sporadically since it was first identified in Colombia in January, WHO officials said. Colombian health official Marcela Mercado told a local radio station on Thursday that Mu was responsible for the country's third wave of coronavirus infections from April to June. She said there were nearly 700 deaths per day during this time, and nearly two-thirds of tests from people who died came back positive for the Mu variant, according to AFP.

In the past week, Colombia has seen just under 14,000 new cases of COVID-19 and 530 new deaths, according to Johns Hopkins University. Less than 30% of the country's citizens are fully vaccinated.

There have been "some larger outbreaks" of the variant reported in South America and Europe, according to WHO. The primary regions for the variant are in Colombia and Ecuador.

"Although the global prevalence of the Mu variant among sequenced cases has declined and is currently below 0.1%, the prevalence in Colombia (39%) and Ecuador (13%) has consistently increased," the WHO said.

As Delta Surges, Contact Tracing Re-Takes COVID Center Stage

By Kathleen Doheny

As the pandemic raged last year, Ilish Pérez, a contact tracer and case interviewer for the Los Angeles County Department of Public Health, would often reach out to more than 100 people a day. She would talk to people about their positive COVID test result and tell others that they had been exposed to COVID.

"Our shifts were generally 8 hours," says Pérez, an experienced health educator who worked in HIV and other sexually transmitted diseases before being transferred to the COVID-19 effort. But "sometimes we would do overtime. At the end of the day, I was exhausted not only physically, but mentally as well. All the emotions you go through with each different call can be quite exhausting. And during the peak, there was no downtime between calls to reset your mind."

Once the vaccines became available, and new cases slowed, her call list grew shorter. Just a few months ago, she sometimes had as few as 10 contacts a day to reach.

But now, with the Delta variant triggering a dramatic uptick in cases, Pérez and other public health workers and officials nationwide involved in contact tracing have geared back up.

While contact tracing -- the process of identifying people potentially exposed to someone infected and advising them to quarantine and test -- has taken a back seat in recent months to pandemic control plans, experts say it's time to ramp it up again. It's also time, some say, to do contact tracing smarter. That means merging it with testing and vaccination efforts.

The public perception of contact tracing may need to change, too.

"Contact tracing is so much more than getting ahold of someone and telling them to quarantine," says True Beck, a COVID-19 response manager for the Los Angeles County Department of Public Health. Ideally, she says, it begins with a call from a compassionate person who is able to personalize the advice.

"Anyone can Google 'What to do if I am COVID-positive,'" Beck says. An effective contact tracer will go much beyond that. For instance, she says, "Our contact tracers will ask, 'Do you live in a one-bedroom apartment?'" If so, they give advice about how to isolate or, if needed, help people find a hotel. They also connect people to services. And now, of course,

contact tracers should help people get vaccinated, she says.

Contact Tracing, Done Right

Many other countries have the U.S. beat at contact tracing of infectious diseases, says K.J. Seung, MD, a senior health and policy adviser for Partners in Health, a global nonprofit health organization involved with COVID-19 efforts.

That's partly because those countries have more practice, he says, as they frequently trace tuberculosis and Ebola, for instance. Even so, the contact tracing protocol common in the U.S. is outdated, he says.

"It's clear we are going to have contact tracing going forward," he says. "But we have to do it smarter than we were doing it before," says Seung, also an assistant professor of global health and social medicine at Harvard Medical School. One way is to stop "siloing" testing, tracing, and vaccination as three separate measures and instead integrate them, as Seung and Natalie Dean, PhD, an assistant professor of biostatistics and bioinformatics at Emory University in Atlanta, wrote recently in Stat News.

While the call from a contact tracer covers a lot of ground, such as if and when people should get tested or quarantine, it is also a perfect opportunity to suggest getting vaccinated right away, Seung and Dean contend. "Linking testing and tracing to vaccination might seem obvious," the two write, "but the reality is that it is not happening nationally."

In an interview with WebMD, Seung says public health officials should consider another approach to contact tracing recognized by the CDC. It's known as source investigation, and it involves looking back at patient movements 14 days before symptoms started and identifying interactions with people, places, and events that might have been the source of the infection.

"Instead of trying to figure out who [the infected person] may have infected in the last 48 hours," he says, the question is "Where do you think you got infected? Camp? Day care? A bar?"

Benjamin J. Ryan, PhD, an environmental health specialist and clinical associate professor of environmental health science at Baylor University in Waco, TX, knows contact tracing is important. But, he says, it can be a particular challenge to identify everyone who may have been exposed.

One solution, he suggests, is to use Bluetooth devices and advanced data analytics. Participants would wear the device as a condition of entry to an event or facility. It would identify others who come within 6 feet of another person for a cumulative 15 minutes of contact. The device would deactivate once people left the venue. Then, if participants later tested positive, the venue could give public health officials a limited list of close contacts, rather than the list of the thousands who attended.

Understanding Culture, Language Differences

"Contact tracing is fundamentally an exercise in trust building," says Emily Henke, executive director of the Oregon Public Health Institute (OPHI). She's also director of the local office of Tracing Health, a partnership between OPHI and the Public Health Institute that focuses on advancing health equity.

It's difficult to build that trust if the contact tracer doesn't understand the language or the culture of the person they are calling.

The Tracing Health approach, Henke says, is to match its 293 contact tracers, culturally and linguistically, with the people they call.

"We are also looking at this as an investment in economic recovery of communities of color," she says, with 72% of its workforce Black, Indigenous, or people of color. Its team members speak 52 languages.

"When you speak the same language as someone else and you share their culture, you are better able to meet their needs," says Vadim Gaynaliy, a Tracing Health contact tracer fluent in Russian and English.

Without the need for an interpreter, he gains the trust of the people he calls more easily, he says.

Efforts to Ramp Up Contact Tracing

Approaches to contact tracing vary among states. Some states have their own employees doing it, others contract it out, and some states partner with other organizations. With the surge of the Delta variant, many states are increasing efforts.

In Arkansas, where the 7-day average cases rose from 173 at the end of May to more than 2,000 by the end of August, contact tracing is also on the rise.

"When case volume was lower, staffing was also modified to match the lower workload," says Danyelle McNeill, a spokesperson for the state Department of Health. "Now that the case volume has escalated, the vendors [that the state contracts with] are adding staff to meet the growing caseload."

With funding an issue for many public health efforts, partnering with universities can be one solution, says Ryan, the environmental health specialist. "Tap into

universities and have universities do the contact tracing in partnership with the county," he says.

How Much Can Contact Tracing Help?

"Any amount of contact tracing can help to interrupt the chains of transmission," says Amesh Adalja, MD, a senior scholar at the Johns Hopkins Center for Health Security in Baltimore.

No expert would argue with that, but the lack of funding is an ongoing obstacle, he says. "Public health infrastructure is something that has been under-resourced and undervalued for decades," he says, so it is a surprise many are having a hard time now.

Adalja bemoans the lack of cooperation early on, when many phone calls from contact tracers went unanswered. "This was likely the result of politics and conspiracy theories about privacy issues being injected into the response from the very start," he says.

Even though the Delta variant is more than twice as contagious as previous variants, according to the CDC, contact tracing can help reduce transmission, Ryan says.

Research on prior variants found that good contact tracing could lead to a reduction in the virus's "reproductive number," or the number of secondary infections that occur, by 3 to 4 times, Ryan says. So he would expect the same reduction for Delta, but of course the overall transmission reduction would not be as great.

"Remember we are not going for [a goal of] zero COVID. We are trying to suppress the level among the unvaccinated."

Enough Exhaustion to Go Around

Contact tracers aren't the only ones who are exhausted, Henke says. Many of the people her contact tracers call are, too.

"They are exhausted and over it," she says. "That definitely affects the mood they bring into these phone calls."

Even so, Henke says, "What makes a good contact tracer is someone who can be there for that person and move the conversation forward, to help them understand there are supports out there to help them."

Pérez, the L.A. County contact tracer, notices some progress, compared to last year.

"I feel people are more willing to help," she says

That's a welcome relief from her experience last year, when family members sometimes urged COVID-positive patients to hang up and stop giving her requested information. She also senses less stigma.

"They are more comfortable telling their contacts themselves," she says.

CDC Finds Over 83 Percent of Americans Had COVID Antibodies before Delta Surge

More than 83 percent of Americans had COVID-19 antibodies before the surge of the Delta variant began, according to a new study of blood sample specimens by the Centers for Disease Control and Prevention (CDC).

The CDC released the findings of the study on Thursday and noted that the percentage of the U.S. population with COVID antibodies increased significantly after the vaccine rollout began.

The Delta variant has seen a surge in cases in the U.S. and though it is difficult to know with certainty when the first Delta cases hit the country, reports indicate [the variant was in the U.S. by May at the latest](#).



A patient receives his booster dose of the Pfizer-BioNTech coronavirus (COVID-19) vaccine during an Oakland County Health Department vaccination clinic at the Southfield Pavilion on August 24, 2021 in Southfield, Michigan. A new study shows that the percentage of Americans with antibodies increased significantly following the vaccine rollout.

The CDC tweeted on Thursday: "Data from blood donations show Americans w/ COVID-19 antibodies increased from 20.5% to 83.3% after the rollout of #COVID19 vaccines."

"CDC is learning more about how many people need antibodies before the population can be considered protected," the agency said. The CDC shared a graphic showing that the percentage of

Americans with antibodies from vaccination has increased from 4.6 percent in January to 63.1 percent in May. By contrast, the percentage of people without antibodies has fallen from 79.5 percent to 16.7 percent.

The study examined 1,443,519 blood donation specimens "from a catchment area representing 74% of the US population" between July 2020 and May 2021.

The study was investigating seroprevalence of the novel coronavirus SARS-CoV-2. Seroprevalence is defined as the "overall occurrence of a disease or condition within a defined population at one time, as measured by blood tests," according to the National Institutes of Health (NIH).

The authors wrote that "estimated SARS-CoV-2 seroprevalence weighted for differences between the study sample and general population increased from 3.5% in July 2020 to 20.2% for infection-induced antibodies and 83.3% for combined infection- and vaccine-induced antibodies in May 2021."

The study also noted that "the findings in this analysis predate the surge in SARS-CoV-2 infection in the US related to transmission of the Delta variant."

"Despite weighting to adjust for demographic differences, these findings from a national sample of blood donors may not be representative of the entire US population," the study's authors cautioned.

Administration of the COVID-19 vaccine began on December 14, 2020 and is ongoing with 74.5 percent of the population aged over 18 having received at least one shot. However, vaccination rates vary from the state to state and vaccine hesitancy has proven a problem during the rollout.

"Estimates show the Delta variant causing more than 99% of recent #COVID19 cases in the United States," the CDC tweeted on Thursday. "Help protect yourself against Delta & other variants by getting vaccinated."

What Flight Attendants Wish You Knew About Flying Right Now

This time last year, flying seemed like a risky proposition. When I flew in July of 2020, I essentially looked like a beekeeper: two medical-grade face masks, a face shield, and a value-sized tub of sanitizing wipes and gel. It was a lot, and sitting next to strangers in the thick of a pandemic was an unnerving experience. But that's all starting to change. Now that a significant portion of the population has been vaccinated, a number that's growing each and every day, people are taking to the skies again. But air travel looks and feels different than it did pre-pandemic. There are still a ton of unvaccinated travelers who remain at risk, and even for the fully vaccinated who are now well protected, sitting in close quarters next to strangers can still feel uncomfortable.

And even if you're fully vaccinated and feeling safe, that doesn't mean the traveler or flight attendant next to you feels the same. Many flight attendants were grounded during the pandemic and, like us, are just now entering the skies again. We talked to three flight attendants and one infectious disease specialist for their advice on how to be a respectful air traveler right now.

Keep your mask on

The easiest thing you can do is continue to wear your mask properly, even if you've been vaccinated. "People love to have it under their nose," says Andrew Collins, a flight attendant based in New York. You're allowed to take the mask off when eating or drinking, Collins says, but you should really be pulling it back up in between bites and sips, not keeping it down for 45 minutes while you work through your meal. Don't forget: The TSA's federal mask mandate is in place through September 13. It can be tough to make out what people are saying when they've got a mask on, so it's tempting to pull it down while speaking to help others hear you. But, again, flight attendants wish you wouldn't. Cabin crew can get pretty close to the faces of passengers, and really expose themselves to people's large respiratory droplets, says Dean Winslow, an infectious disease physician at Stanford Health Care. In these situations, keep your mask up. Instead of eye contact, aim for ear contact, says Keely Scott, a flight attendant based in Portland. Put your ear closer to someone to hear them better.

Throw your dirty wipes in the trash or sick bag

If you use disinfecting wipes to sanitize your seat or tray table, toss them in the sick bag or wait for the flight attendants to come around with a trash bag. This goes for dirty tissues, too. Collins says some

passengers hand their dirty wipes and tissues directly to the flight attendants. "Please put it into that trash bag instead of trying to give me your gross towelette," he says. According to Winslow, the coronavirus doesn't primarily spread through contaminated surfaces—but nonetheless, no one wants to touch other people's germy tissues and wipes. Pandemic or no pandemic, try to keep your germs to yourself.

Wait to eat until the flight attendants have passed your row

Service remains limited on many flights, but most trips now include at least water and a snack. But before you tear open your bag of pretzels, take note of who's around you. "Please wait to sip or snack until flight attendants have passed your row, just to limit the time that the mask is off," says Scott. Though most flight attendants are vaccinated by now, they're still exposed to hundreds of people each day, some of whom may be carriers of COVID-19. This little effort can go a long way and help limit their exposure and help.

Be patient and mindful when deplaning

Deplaning tends to be a chaotic experience, as many passengers are eager to get to their destination and jump up as soon as the seatbelt light clicks off.

During the pandemic, flight attendants are asking passengers to stay seated until it's your row's turn in order to maintain physical distancing. "We're trying to keep social distance still," says a flight attendant based in New York who wished to remain anonymous. Wait at your seat until the first couple of rows ahead of you have deplaned.

Listen to the announcements—really

Pre-COVID, no one really listened to the announcements, says Collins, and if he had one tip for people traveling again it would be to actually pay attention to them now. The flying experience, after all, has changed. "Everything has been modified, all of our services," says Collins. If it's your first time flying in a long time, or your first time flying during COVID, the announcements will spell out the entire service process for you. The most important thing is to be courteous. People are finally traveling for pleasure and leisure again, but others are flying for work, weddings, or even funerals. For many, this is their first time flying in more than a year, and they might be nervous about doing so. You don't know if your fellow passengers or flight attendants are vaccinated. We're all still trying to navigate life in a pandemic. "It's all about mutual respect right now," says Collins.

News from India:

*** SC issues deadline to Centre on Covid-19 death certificates.**

Giving an ultimatum to the Centre, the Supreme Court (SC) on Friday asked the government to frame guidelines for simplifying the process of issuing death certificates for those who died due to Covid-19 by September 11.

The court, on August 16, had asked for a compliance affidavit to be filed by September 3. However, Solicitor General of India Tushar Mehta asked for a week's extension, which led to the SC slamming the Centre for the delay despite its order on June 30. The SC said it had "passed the order long time back" and "already extended the time once", caustically remarking that by the time the government came out with the guidelines, "the third phase will also be over." In its June 30 order, the SC had directed the government to "issue simplified guidelines for issuance of Death Certificates/official document stating the exact cause of death, i.e., "Death due to Covid-19", to the family members of the deceased who died due to Covid-19." It had also clarified that even those who died due to complications arising out of Covid-19 will have "Death due to Covid-19" mentioned on their death certificate. In the same order, it had also asked the National Disaster Management Authority (NDMA) to come up with guidelines within 6 weeks for awarding compensation to next of kin of those who died due to Covid-19.

Meanwhile...

* Observing that "cases in Kerala are about 70% cases of the country, with around 35,000 daily", the SC on Friday stayed the Kerala government's decision to conduct exams for Class 11 from September 6, noting that "there is an alarming" situation in the state and as such, "children of this age cannot be exposed to this risk."

* The apex court passed the stay order after the counsel for the state government refused to give an assurance to the bench that "no student will be infected with Covid or else the state will be held accountable."

***Vaccination reduces risk of long Covid, even when infected**

People who are fully vaccinated against Covid-19 appear to have a much lower likelihood of developing long Covid than unvaccinated people even when they contract the coronavirus, a study has indicated.

The research is among the earliest evidence that immunization substantially decreases the risk of long Covid even when a breakthrough infection occurs.

Researchers had said that by preventing many infections entirely, vaccines would reduce the number of cases of long Covid, but it wasn't clear what the risk would be for people who still got infected after vaccination.



"We found that the odds of having symptoms for 28 days or more after post-vaccination infection were approximately halved [reduced by 50%] by having two vaccine doses," the researchers wrote. "This result suggests that the risk of long Covid is reduced in individuals who have received double vaccination, when additionally considering the already documented reduced risk of infection overall."

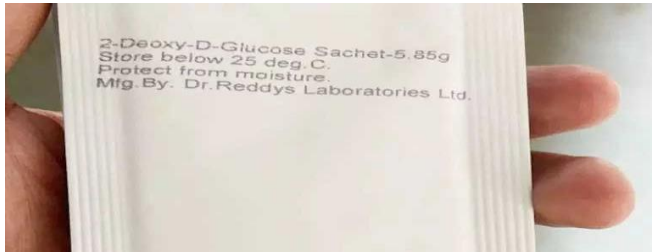
The study out of the UK was conducted from December 2020 to early July 2021, a stretch that included the beginning of the country's spike in cases from Delta. The study relied on data submitted by millions of adults who self-reported on the Covid Symptom Study phone app.

However: The study did not distinguish the risk of long Covid after a breakthrough infection by a variant.

Despite vaccination reducing the risk of long Covid, many questions remain about the cases of long Covid that do occur among people who have been infected after vaccination. It's not clear if, overall, the symptoms will look different, be milder, or resolve faster than those that strike people who aren't vaccinated.

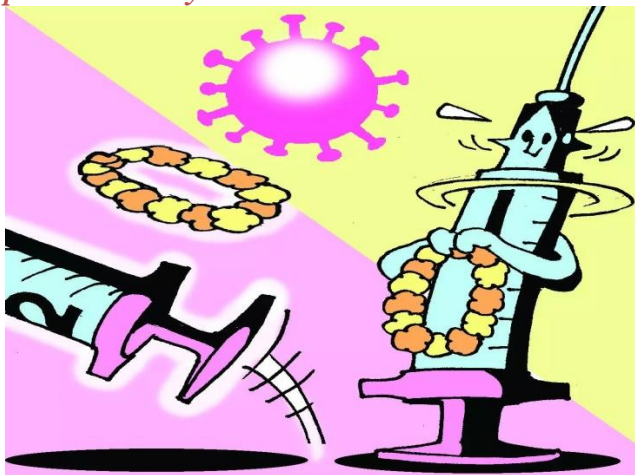
What's long Covid again? Also called typically defined as the persistence of some symptoms — including fatigue, forgetfulness, and body aches — for an extended period of time. Some people have milder symptoms — perhaps their senses of taste and smell haven't fully returned — but some people remain debilitated for months, unable to work or go about their lives. People can become "long haulers" even after mild initial infections.

**Granules to make DRDO's Covid drug.*



Hyderabad-based Granules India said it has received a license from Defence Research & Development Organization (DRDO) to manufacture and market Covid-19 treatment drug 2- Deoxy-D-Glucose, or 2-DG. India's regulator had earlier granted emergency approval to use 2-DG as an adjunct therapy in moderate to severe Covid patients. A study published by DRDO in June said the drug enabled faster recovery of hospitalized patients — by reducing hospital stay by an average of two and a half days — and reduced the need for supplemental oxygen, by about 40%. The drug, available in powder form that dissolves in water and is consumed orally, is also made available in the market by Dr Reddy's Laboratory.

**Antibody count and immunity low in recovered patients: Study*



A study by Northwestern University, US says that people who have been infected with Covid-19 and recovered neither have a guarantee of a high level of antibodies nor are they immune from reinfection.

The study, which underlines the imperative to get vaccinated fully — taking both doses — found that just two months after the second dose of Pfizer or Moderna vaccine was administered to people with a prior history of Covid-19, the antibody count was down 20%.

The study also found that prior exposure to Covid-19 does not ensure a strong antibody response even after the first dose of the vaccine is administered. This contradicts earlier studies that suggest that people who have earlier been infected with SARS-Cov-2 will naturally be immune to reinfection.

In order to test how long the immunity from vaccines lasts against the new variants of novel coronavirus, the research team tested blood samples of the participants three weeks after their second vaccine dose. It found that the average level of inhibition was 98%, indicating a very high level of neutralising antibodies.

However, against the emerging variants — B.1.1351 (Beta), B.1.1.7 (Alpha) and P.1 (Gamma) — the inhibition level was way down, ranging between 67% to 92%.

**A single shot may be enough post infection*



A single dose of Covishield vaccine after Covid-19 infection gives 'hybrid immunity' that's more potent

than two jabs or infection alone, shows a new study in Kerala.

The results showed patients who received a single dose of Covishield after they had contracted the virus had 30 times higher antibody levels compared with those who received two jabs but were not infected. Read those with 'hybrid immunity' (hybrid of natural infection with one dose of vaccine) could neutralise the virus much better than those who have received two doses of vaccine or had prior infection alone.

The high level of hybrid immunity was anticipated to last in the person's body for a longer time, providing long lasting immunity.

"We found that in patients with autoimmune inflammatory rheumatic diseases (AIRD), who had Covid-19 before, a single dose of the vaccine provided 10 to 50 fold higher humoral immunity than two doses of vaccine in infection naive patients. Those who develop hybrid immunity have such high levels of immunity and protection that they may not need a second dose or booster dose," said lead investigator Dr Padmanabha Shenoy, a clinical immunologist and rheumatologist.

A cohort study was conducted in 120 patients with AIRD, who had Covid or were vaccinated or both and had the highest level of antibodies. They were divided into four equal groups of 30 each. Serum was collected from each patient nearly 30 days after the last vaccine dose or since the onset of Covid-19 symptoms (in the unvaccinated group).

"Giving a single dose instead of two doses to those already infected, may save close to 3 crore vaccine doses and these doses can be used to help ease the supply crunch the world is facing currently," added Dr Sakir Ahmed, co-investigator, associate professor, Kalinga Institute of Medical Sciences (KIMS), Bhubaneswar.

***A molecule in viper venom could inhibit coronavirus.**

A molecule in the venom of pit viper inhibited coronavirus reproduction in monkey cells, a Brazilian study has found.

The findings published in the journal *Molecules* said peptide, which is a chain of amino acids, can link to an enzyme of the coronavirus, inhibiting its ability to replicate by 75%. "We were able to show this component of snake venom was able to inhibit a very important protein from the virus," said Rafael Guido, a professor at the University of Sao Paulo and an author of the study.



Researchers will next evaluate the efficiency of different doses of the molecule and whether it is able to prevent the virus from entering cells in the first place. Peptides are already known for their antibacterial qualities and can be synthesised in the laboratory, making the capture or raising of the snakes unnecessary. "We're wary about people going out to hunt the jararacussu around Brazil, thinking they're going to save the world ... That's not it!" said Giuseppe Puerto, a herpetologist at the Butantan Institute. "It's not the venom itself that will cure the coronavirus.

(Editor's note: Please use your common sense to donate to the right organization. If possible, give priority to your own family, neighbors and your village/Town or area healthcare systems directly. There are fraudulent organizations be aware of them. Look into the need and response to those priorities. Get some advice from your Doctors or helping organizations. Many time Cash Donations are more effective than kind. I would recommend donating to Red Cross of India, UNICEF, Oxfam India, and Care India. In my personal opinion, do not send any contributions to India's Prime Minister Narendra Modi's PM Care Fund as its not transparent and has no accountability. -Kaushik Amin.)

Gandhian Society, USA and GOPIO

organize Indian Independence Day as Swaraj with Vinoba and Bapu in New Jersey, Raise Funds for Ambulances for Rural India



The Gandhian Society (New Jersey) along with GOPIO chapters (Manhattan and Central Jersey) hosted an event to celebrate Indian Independence Day - Swaraj with Bapu and Vinoba at the Royal Albert Palace, Fords, New Jersey on August 15th attended by dignitaries and with a Khadi Fashion Show and a Musical Competition based on Patriotic songs and those based on Gandhian Ideology.

The event also raised funds for providing ambulances to help the secondary health sector in rural and tribal areas of India. Gandhian Society founder Bhadra Butala said that the society has committed to provide 50 ambulances this year, which will be run and maintained by Gandhian groups in the rural and tribal areas. The event on August 15th raised funds for 10 ambulances.

The ceremonial program started with Gandhiji's favorite Vaishnav Bhajan. The chief guest at the event was Mr. A.K. Vijayakrishnan, Consul for Community Affairs at the Indian Consulate. Other dignitaries were GOPIO International Chairman Dr. Thomas Abraham, NJ State Representative Raj Mukerji, Democratic Party nominee for Mayor in Edison Sam Joshi, former Assemblyman and NJ Assembly Speaker and current Public Utilities Commissioner Upendra Chivukula, Indian Consul Vijayakrishnan appreciated the work done by Gandhian Society and GOPIO in keeping the

Gandhian philosophy and values alive. He also said that Mahatma Gandhi's belief in non-violence had also inspired the modern leaders like Martin Luther King Jr. in the US and Nelson Mandela in South Africa.

"The Gandhian Society was playing an important role in making the younger generation aware of the values and principles of the Mahatma Gandhi and the importance of non-violence," Said Vijayakrishnan. The Consul also thanked both the organizations for their valuable contribution during the COVID crises in India.

GOPIO Chairman Dr. Thomas Abraham said that while Mahatma Gandhi's non-violent Satyagraha movement brought independence to India, many in India and outside doubted whether the new republic will sustain itself, due to widespread ignorance, poverty and divisiveness of our people, however, India made progress under a democratic rule in all the seven decades and now moving forward to become the third largest economy in the world in this decade. "When India was hit badly with the second wave of Covid, the Indian Diaspora came forward to help by sending oxygen concentrators and medical supplies and GOPIO chapters are supporting the noble cause of the Gandhian Society to provide ambulances to underserved rural, tribal areas," Dr. Abraham added.



Rep. Raj Mukerji said, “Mahatma Gandhi has been an inspiration to many leaders in the USA like Martin Luther King, President Obama and he himself is a big admirer of the Mahatma for the values that he propagated during his lifetime.”

NJ Utilities Commissioner Chivukula said “the teachings of Mahatma are still relevant today and that the values system of the mahatma is identified with the Diaspora.” Chivukula hoped that the future generation will continue to uphold and keep these values of the greatest man from India.

Democratic mayoral candidate Sam Joshi has said that he is committed to ensuring that the Gandhi Museum comes up in Edison, New Jersey and he will extend all support to the project. He also said he will help with the logistics in land and resources needed for the project.

Gandhian Society Director Rajendar Dichpally spoke about the work of the Gandhian Society during the pandemic and sending oxygen concentrators during the second wave of the pandemic, especially to rural and tribal areas. He also said that the Gandhian Society is planning to send 50 ambulances to rural and tribal areas in India and he announced that the society was able to get 10 commitments for ambulances so far.

New Jersey State Senator Vin Gopal was represented by his staff. There were many community leaders who participated at the celebration including GOPIO International Coordinator-at-Large Asha Samant, hoteliers Maganbhai Patel and Dalpat Patel, GOPIO-Manhattan Executive VP Prof. Rajasekhara Vangapaty and Dr. Ravinder K. Thota of American Telugu Association (ATA).



Fashion with Khadi presented by Sonal Gadhavi

The Fashion show was coordinated by Sonal Gadhavi and Aric Damiani. The show stopper and main model for the fashion show was Aryan Vaid (Former Mr. World) and participated by many Indian American Children. The fashion show was done to promote

Khadi fabric, which was the fabric preferred by Mahatma Gandhi and was the fabric used by all Satyagrahis during Indian Freedom struggle, in a modern manner so that the younger generation could identify with the fabric and continue to wear the fabric.

The Music Competition was Organized by famous Singer Varsha Joshi and had Bollywood Lyricist Swanand Kirkire as one of the main judges for the show. The music competition had over 40 children participate from different cities in America. The local judges were Gerry Cutinoh, Anirban Roy Chowdhary.

The event saw 10 people coming forward to donate ambulances with their generous donations. Those who donated ambulances include Bhadra Butala, Hasmukh Patel, Krishna Pirlamarla, Dr. Prabhu Rachakonda, Maganbhai Patel, Gita Butala and others.



Key organizers, Mahesh Wani of Gandhian Society and Siddharth Jain of GOPIO-Manhattan at the exhibition

The event had an excellent pictorial exhibition of Mahatma Gandhi and quotes from his life and other leaders that took him as their inspiration. A simple breakfast and lunch were served at the event. The Gandhian Society Team comprised of Dr. Deepak Naran, Rajendar Dichpally, Balaji Jilla, Mahesh Wani, Shiva Kumar, Sravan Natakala and GOPIO team included Dr. Asha Samant, Prof. Rajasekhara Vangapaty, Siddharth Jain, Chitraranjan Sahay Belwariar, Kunal Mehta, Dr. Tushar Patel, Vijay Garg and Shivendra Sofat.

Gandhian Society is looking for more sponsors of ambulances to the remote rural areas of India. Sponsor's name will be inscribed on the ambulance. Contact us at 201-889-8888.

(Curtsey: Bhadra Butala & India Life.)

CORONA VIRUS: NEWS FROM AROUND THE WORLD:

**** Hurricane Ida's remnants hit N.Y., N.J. with historic rains***

The remnants of Hurricane Ida hit the New York City region with heavy rains on Wednesday night, disrupting subway service, delaying the U.S. Open in Queens, and prompting the National Weather Service to issue a flash flood emergency in the city for the first time. Central Park got 3.1 inches of rain within an hour, shattering the record of 1.94 inches set just last week during Tropical Storm Henri. Ida was blamed for one death in Queens and another in Passaic, New Jersey. New York City Mayor Bill de Blasio issued a travel ban lasting from just before 1 a.m. to 5 a.m. Thursday. "All non-emergency vehicles must be off NYC streets and highways," the emergency management office said on Twitter. New Jersey Transit said all rail service except the Atlantic City line was suspended.

****Kidney issues and long Covid.***



A large new study found that Covid-19 survivors were 35% more likely than other patients to have long-term kidney damage.

The study, based on data from 89,000 veterans who survived the first 30 days of Covid, suggests that renal issues can last for months after patients recover from the initial infection, and may even lead to a serious lifelong reduction of kidney function.

Researchers found that the sicker Covid patients were initially, the more likely they were to experience

lingering kidney damage. People with less severe initial infections could be vulnerable, but the risk for Covid patients who never needed hospitalization was very small.

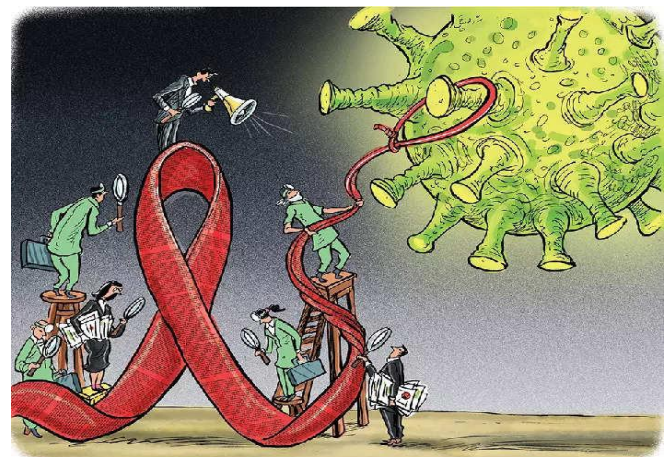
"People who are at highest risk are the people who really had it bad to start with," said Dr Ziyad Al-Aly, chief of the research and development service at the V.A. St. Louis Health Care System in Missouri, USA, and senior author of the study, told The New York Times. "But really, no one is spared the risk."

A link between kidneys and Covid is not new: Doctors have seen kidney problems in seriously ill patients since the beginning of the pandemic. Still, they are unsure why Covid can cause kidney damage.

Kidneys, which regulate and clean the blood, might be especially sensitive to surges of inflammation or immune system activation. Experts also said that blood-clotting problems often seen in Covid patients might disturb kidney function.

Either way, if even a small percentage of the millions of Covid survivors in a particular country developed lasting kidney problems, it could have a profound impact on its healthcare systems.

****WHO concerned about mu, labels it variant of interest.***



A new variant of SARS-CoV-2, called **Mu** or B.1.621, **first identified in Colombia**, has been labelled a new "variant of interest" by the World Health Organisation (WHO), which said that the new variant

has mutations which are capable of withstanding natural immunity, immunity via vaccines and monoclonal antibody treatments.

While the WHO has clarified that more detailed studies are required in order to determine if Mu is more contagious, more deadly or more resistant to current vaccines or treatments, the variant has already spread to 39 countries. Moreover, while globally, the prevalence of this variant among sequenced cases has fallen and is currently less than 0.1%, Colombia and Ecuador have seen its prevalence increase.

In its weekly epidemiological *report*, WHO said Mu "has a constellation of mutations that indicate potential properties of immune escape" and as per initial data, it demonstrates "a reduction in neutralisation capacity of convalescent and vaccine sera similar to that seen for the Beta variant."

South America, in fact, may be turning into a breeding ground for new variants of the novel coronavirus as another variant of interest — lambda — was also first identified there, in Peru. Earlier, gamma, which is now a variant of concern, was first identified in Brazil. Including gamma, there are currently four variants of concern — alpha, first identified in the UK; beta, which was detected first in South Africa; and delta, which originated from India.

**** Survey: 52 percent of companies plan vaccine mandates by year's end***

A new survey of U.S. companies found that 52 percent plan to impose COVID-19 vaccine mandates by the end of 2021, up from 21 percent that currently require the shots. The survey polled 961 companies that employ a total of 9.7 million people. Many companies already have adopted mask mandates to curb infections in the latest coronavirus surge, which has been driven by the highly infectious Delta variant. Google-parent Alphabet, Wal-Mart, Goldman Sachs, and a growing number of major companies also have started requiring workers to get vaccinated, a trend that has picked up since federal regulators last week gave full approval for the Pfizer-BioNTech vaccine. "We expect even more employers to institute vaccine mandates in the wake of FDA approval of the Pfizer vaccine," Willis Towers Watson's population health leader, Jeff Levin-Scherz, said.

**** Air travel falls to lowest level since May***

The number of people passing through airport security has fallen to a four-month low as summer travel season

ends and rising coronavirus cases reduce demand at airlines. The Transportation Security Administration screened just under 1.35 million people on Tuesday, falling to the lowest point since May 11. Business travel normally picks up after summer vacation season ends and schools reopen, but airline executives at Frontier, Southwest, American, and Spirit airlines last month warned that their revenue and profit could be weaker than previously forecast as rising coronavirus cases fueled by the highly contagious Delta variant resulted in weakening bookings. Centers for Disease Control and Prevention leaders this week urged unvaccinated people not to travel over the coming Labor Day weekend.

**** Poll: Most vaccinated people want COVID-19 booster shot***

Most vaccinated Americans want to get a coronavirus booster shot when they become available, according to a Reuters/Ipsos poll released Wednesday. The Biden administration hopes to launch a national campaign to make an additional dose available to eligible people starting Sept. 20, provided health regulators give their approval. Studies show protection against COVID-19 infections gradually wanes, but a booster shot after six to eight months can dramatically increase protection, although some scientists argue the need hasn't been proven. The Reuters/Ipsos survey found that 76 percent of adults who have received at least one dose want to get a booster. Six percent didn't want one, and 18 percent were undecided. The government has already started offering third shots to immunocompromised adults.

****EU Authorities Say No Urgent Need For Covid Booster Shots.***

European Union health authorities said there's no urgent need for widespread use of Covid-19 vaccine booster shots, though people with weakened immune systems should be offered a third dose.

The priority now should be to vaccinate the roughly one-third of Europe's adults who aren't fully inoculated, the European Medicines Agency said on Thursday, citing a report by the European Center for Disease Prevention and Control. Older and frail people,

particularly those in care homes, could also be given an extra dose, the agency said.

The EMA's statement is in line with guidance issued this week in the U.K., which is so far focusing its booster shot efforts on those whose immune systems aren't able to react strongly to the first two doses, such as organ-transplant recipients.



More contentious is the question of whether to give a top-up to healthy, fully-vaccinated people, potentially to ward off the more contagious delta variant. That's something the Biden administration has sought in the U.S., even as some public health experts warn that reaching the unvaccinated should remain a higher priority.

Countries should hold off on widespread use of boosters until at least next month, though some at-risk people may need third doses, World Health Organization Director-General Tedros Adhanom Ghebreyesus said in Berlin on Wednesday.

The EMA said it will keep looking at the data on booster shots. While that review continues, EU countries may begin making plans for administering additional doses -- and have the prerogative to make their own decisions whether and how broadly to use them, the agency said.

****Millions to lose extra jobless aid as Delta variant threatens recovery***

Millions of jobless Americans will lose extra pandemic-era jobless benefits on Monday, just as the Delta variant of the coronavirus threatens to hamper

the economic recovery. Oxford Economics estimates that 8.9 million people will lose benefits from two jobless-aid programs — one for self-employed and gig workers, the other for people unemployed for more than six months. Another 2.1 million will lose a \$300-a-week federal supplemental unemployment payment, although they can continue to receive state unemployment benefits. The programs are ending as hiring increases and layoffs ease. New applications for unemployment benefits fell by 14,000 last week to 340,000, the lowest level since the pandemic hit in March 2020.

****White House may need to scale back booster shot plan***

Top health officials are urging the White House to scale back the COVID-19 booster shot plan because more time is needed to review the data, The New York Times reported. CNN also reported that the Biden administration is discussing whether to scale the plan back, citing an official as saying the FDA doesn't currently have enough data to recommend a third dose of the Moderna vaccine. A White House spokesperson told the Times that "we always said we would follow the science, and this is all part of a process that is now underway." When announcing the booster rollout last month, health officials said all Americans would be eligible for an extra shot starting Sept. 20, with individual appointments taking place sometime around six to eight months after the last dose.

****Coronavirus: USA.***

More than 80% of Americans 16 and older have some level of immunity against the coronavirus -- mostly through vaccination, a new survey shows. The Centers for Disease Control and Prevention conducted the survey of blood donations. The results also indicated that about twice as many people have been infected with the virus as have been officially counted. More than 39 million Americans have been diagnosed with coronavirus since the pandemic started last year. With the latest Covid-19 surge upending American life, Dr. Anthony Fauci said the rollout of booster doses could begin within weeks pending FDA authorization.

COVID19: Weekly Update.

The numbers below are from
Saturday 09-04-2021 * 12pm US East coast Time...

Compiled Periodically By:

Kaushik Amin, USA.

201-936-4927/Kaushikamin@hotmail.com

There are likely false data & variations in data most of the time, so,

Please use the data wisely.

Details are compiled from various sources.

Marked "" are not reliable data.*

World:

220,903,564. Cases. / 4,571,517. Deaths.

Recovered till today:

197,429,759.

01. U.S. A.:

40,708,457. Cases. / 664,961. Deaths.

02. India** (???)

32,986,887. Cases. / 440,552. Deaths.

03. Brazil:

20,856,060 Cases. / 582,753. Deaths.

05. UK:

6,941,611. Cases. / 133,161. Deaths.

28. Canada.

1,511,212. Cases. / 27,006. Deaths.

00 (India): Gujarat* : (???)

825,461. (???) Cases. / 10,082. (???) Deaths.

USA States:

01. California:

4,408,744. Cases. / 66,321. Deaths

02. Texas*:

3,686,000. Cases. / 58,239. Deaths.

03. Florida:

3,354,253. Cases / 46,324. Deaths.

04. New York*:

2,365,088. Cases / 54,922. Deaths.

05. Illinois:

1,538,324. Cases. / 26,614. Deaths.

06. Georgia:

1,433,714. Cases. / 23,120. Deaths.

07: Pennsylvania:

1,316,505. Cases / 28,452. Deaths.

08. Ohio

1,241,268 Cases / 20,947. Deaths.

10. New Jersey*:

1,098,526. Cases. / 26,929. Deaths.

17. Massachusetts:

765,584. Cases. / 18,286. Deaths.

34. Connecticut:

375,135. Cases / 8,394. Deaths.



COVID19: DOS AND DON'TS.

***More than 4** Covid19 vaccines are available now nationwide in the US. Find out how to get yours.

Be prepared for a third booster dose(for Pfizer and Moderna, and may be a second booster for Jhonsons'.) More serious Delta and Delta Plus (Indian), Lambda and now Kappa variants are around & can create another pandemic, so be careful & follow religiously the Guidelines given by the Medical Authorities of your country.

* Finally Vaccine is available all time in the US; India and many parts of world, many of us got both the doses, or single dose in case of Jhonson & Jhonson's vaccine. Yet post vaccination results/effects are not known to the research/medico community fully. We are still in a Pandemic Period, of Phase 2 and 3, also possible invasion of new 4 or more strains of UK, Brazil, South Africa, and now India Coronavirus.

* Entering the new wave of Delta and Delta Plus and three other virus variants, the number of cases are still on a higher side, yet to achieve the flat curve, world over most of us are just ignoring the pandemic do's & don'ts, particularly when we are with festivity mode in Summer days of 2021, so please take Extreme Care, Stay Safe & Stay Home. Yet not an easy time for every one! * Corona is still around, & may remain lifelong! It's not as simple as viral flu. It's as dangerous as like a contest of survival of the fittest.

* Vaccine is available now, first to the frontline medico fraternity, patients in need, & nursing home/long term care facilities residents on a priority, so be careful & protect yourself & your loved ones for

good. Mask, frequent hand wash with soap & social distancing only is the option for now

* **Now Mask is not needed in the USA, if you are vaccinated.** But it is advised one must use Mask, even if you have taken Covid shots, Vaccine is just protection, it's not a cure! Also wear Gloves, Sunglasses & the most important: keep safe distance, keep washing your hands frequently with soap or use reliable sanitizer either one at least for 30 seconds.

* ***In India nasal steam (Naas) is recommended by the Government authorities, Ayurvedic practitioners, & also is a traditional remedy, but the US CDC and other Western Health Authorities doesn't recommend it due to a probable risk to the brain.***

* ***If you can, use Mouth Rinse, twice a day, will help to boost your oral health.***

* ***If you have young kids/minors attending the school or college, it's advised to put on the mask for everyone inside the home.***

* We are passing through a tough time of Life & Death. Follow Social Distancing, but stay in for Social Contacts. If you know any one suffering with Corona, your nearer or dearer, call and talk to them frequently, we don't know whether they will return safely with us. Call other relatives/friends, at least ten persons a week. We are social & want to take care of those who are cut off due to Corona self-imposed lockdowns. Also keep busy yourself & family members with plenty of daily activities like yog, exercise & Stay Physically Fit, Pursue Your Hobby, Get Adequate, at least 6 to 8 hrs. of Sleep, & Eat Healthy Balance Diet.

**** Yet it's a long march to finish, no one knows when we will.....!!!!***

Take care, & Stay Safe.