

The Antiseptic

Estd. 1904

Indexed in
IndMED

A MONTHLY JOURNAL OF MEDICINE AND SURGERY

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www.theantiseptic.in

Vol. 118 • No. 11

NOVEMBER 2021

ISSN 0003-5998 • ₹ 100

The collage features several images related to COVID-19 management, each connected to a central thinking emoji by colored lines:

- Famotidine farce**: A box of Famotidine Tablets USP (20mg) and a blister pack.
- Tocilizumab etcetera**: A box of RoActemra® 20 mg/mL solution à diluer pour perfusion (Tocilizumab) 400 mg/20 mL.
- Remdesivir conundrum**: Several vials of Remdesivir (100 mg/20 mL).
- Ivermectin imbroglio**: A box of Ivermectine Sandoz® 3 mg (4 comprimés).
- Hydroxychloroquine fiasco**: A box of Hydroxychloroquine Sulfate Tablets, USP (200 mg) and a blister pack.
- Disinfectant tunnels**: A photograph of a disinfectant tunnel with the text "DISINFECTANT TUNNEL Indian Institute of Technology Bombay".
- Plasma Therapy**: A photograph of a person in a blue gown holding a large bag of yellow plasma.
- COVID Vaccines**: A photograph of several vials labeled "COVID-19 VACCINE".

The Science and Nonsense around Covid

Page No. 8

Will the Third Wave have an impact on the children?

SANJAY AGARWAL

Since March 2020, unvaccinated children and adults who lived largely indoors may not have had significant exposure to the virus. It's possible that they didn't produce enough antibodies to fight the virus. As a result, it is hypothetically predicted that they are more vulnerable to the third wave. Various viewpoints on the potential influence of the third wave on children have been expressed.

Children under the age of 18 make up a significant portion of the population (39 percent, 472 million) who stayed indoors for more than a year, mainly unaffected by the virus and without a vaccine. However, according to ICMR data from a national serosurvey, 65 percent of them had antibodies. **Furthermore, because children have fewer ACE-2 receptors in their lungs, they may be less sensitive. Despite this, more than 100 children died of COVID-19 in Indonesia every week in July, challenging the widely held belief that children are at low risk from COVID-19.**

Bracing for the third wave, task forces in India are trying to shield children through various proactive measures. Exclusive COVID rooms for pediatric cases have been established in government hospitals in Tamil Nadu based

on the prognosis that youngsters are now in danger. In the state of New York, 94,259 children aged 0 to 12 years have tested positive for Covid. Hence, we must not leave any stone unturned.

Perhaps the introduction of a Nasal Covid Vaccine shortly will considerably alleviate this difficulty. **Bharat Biotech's BBV154 nasal vaccination is expected to be ready by the end of 2021.** This vaccine is expected to be less expensive than conventional vaccines (less than Rs 200 per dose) and more effective. The nasal vaccination is currently in the third round of clinical trials for children. For obvious reasons, this would be more acceptable (without the needle pricks), overcoming the reluctance, and perhaps more important in the context of the third wave.

Vaccinating youngsters, on the basis of prioritization and safety, is also a contentious issue. Contrary to the World Health Organization's assessment (possibly based on serosurvey data and the fact that children do not have well-developed ACE-2 receptors in the lungs that allow the virus to enter), some experts have been claiming that children will be the most afflicted by the third wave (WHO).

With a student population of over 250 million, putting them back in schools is a crucial issue. Already, there has been a yawning disconnect between schools and children jeopardizing their future. The subject of reopening schools has become a nightmare for public

health experts. Zydus Cadila ZycoV-D and Bharat Biotech's Covaxin may get approval soon for use in children. Vaccinating children would mean diverting the already limited stocks of vaccines. One need not blindly emulate the West in this matter. A sound policy decision may be taken in the interests of the entire population, including children.

As the Covid closed schools, most of the students were left behind for more than a year. Despite the potential destruction that the third wave could wreak on unvaccinated children, at least 14 states have decided to reopen schools in August 2021. If the third wave hits hard, millions of children would be permanently pushed into the unorganized labor market - many are already there. We will be cheating our future if we do not find a way out of this morass.

How will this be prevented?

Firstly, the emergency of a severe third wave in India largely depends on the Covid-appropriate behavior of the people, as only around 10 % of the population is fully vaccinated. It would not be possible to accelerate the pace of vaccination much in the next few months. Wearing face masks consistently and correctly (which is not done even by many doctors) is of paramount importance in the prevention.

Over the past 20 months, people have become very aware of the preventive measures and got fatigued by using them. Human beings are social animals, after all. Knowledge about the standards

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Specially Contributed to "The Antiseptic"
Vol. 118 No. 11 & P : 15 - 16

does not mean that people would practice them. Awareness and action often lie at opposite ends. Preaching the same thing over a long time has become equivalent to rewinding to fast forward because masks, distancing, and hygiene- the cheap and best social vaccine are not practicable in India for a long period. We had already witnessed the failure.

We talk a lot about the dangers of a terrible lifestyle these days, but it doesn't take away from a sense of persistent rage at all of the disinformation. A scientific study is released every day, leading us to believe that the unreal has been proven to be real, and the real has been proven fictional.

With the advent of the internet and social media sites, a lot of unauthentic information is spread. **Educating and involving the community is more important than regressing into a target mode to gain a mere data satisfaction** –ground reality outcomes often differ from rosy statistics on paper. To make people literate on these matters and block the third wave, we need to go on a publicity blitzkrieg literally.

Secondly, While detecting early signs of an increasing number of cases in some zones and taking strict action at the micro-level by creating containment zones to prevent further spread is critical; the quality of implementation of measures like the test, track, and treat strategy in India leaves much to be desired. The failure had already been witnessed.

Finally, ergo, the only way forward is to vaccinate 94.4 crore people as fast as possible, free of cost in the public sector, as only around 10 %of all adults have been fully vaccinated. India's steam engine of Covid vaccination

persists along with sporadic bursts of frantic activities.

Despite the disappointing statistics, there is some good news: daily vaccinations averaged 50 lakhs in the first ten days of August 2021. Even still, the daily vaccination rate needed to reach the goal of fully inoculating all adults by December 31, 2021, is approaching one crore.

December 31 appears to be too far away to stop the third wave, which has already arrived on our shores and is expected to roar around October 2021. It is vital to get vaccines as soon as possible to avoid a devastating third wave. There is no way around it. The symptomatic incidence can be lowered if 40% of the population is fully vaccinated within three months of the end of the second wave; however, vaccinating India's vast and very varied population is a monumental challenge.

If a single-dose vaccine-like Johnson & Johnson vaccine could be procured, the coverage and speed would be doubled. Experience during the past few months has shown that the private hospital sector may not contribute to the vaccination drive in a big way. If indemnity issues do not block, we shall have five vaccines in the field soon as per the latest update.

Nasal Covid Vaccine, which is likely to be available by December 2021, is perceived to be a game-changer because of its higher acceptability, especially for children (without a needle prick), low cost, friendly storage conditions, and higher efficacy.

Currently, there are two problems to be solved immediately to prevent an onslaught by a third wave. One is the shortage of vaccines. The other is the hesitancy of people to get vaccinated. A

recent study done in July 2021 by the Directorate of Public Health and Preventive Medicine in Tamil Nadu (a state known for high public health consciousness and high-end medical facilities) revealed a worrying fact that around 20% of people have Covid vaccine hesitancy and that does not foreshadow well to prevent the third wave.

The focus should be on:

- Increasing the pace of vaccination among commoners
- Surveillance approaches are to be used to catch rising hotspots.
- Given the possibility for other variants to emerge, maintaining vigilance through genome sequencing is essential.
- Enhancing our defense by closely adhering to Covid, appropriate standards like mask-wearing, maintaining a safe distance, and maintaining good cleanliness.

The herd immunity, natural immunity, and vaccination immunity present today may avert a serious third wave, provided that no new vicious variants emerge before the next festival season (Diwali/Deepavali) which may turn the situation to be more dangerous. It is critical for parents to stay close by adhering to the crucial guidelines of taking care of their child to combat the entire situation.



Ebstein's anomaly (EA) is a malformation of tricuspid valve characterized by apical displacement of the septal and posterior leaflets from the atrioventricular ring. There is atrialisation of right ventricle (RV)

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