

Coronavirus

Europe reopens

ICU teams stick with the 'sick and dying'

PARIS, April 24, (Agencies): Cradling the head of the deeply sedated COVID-19 patient like a precious jewel in his hands, Dr. Alexy Tran Dinh steered his intensive-care nurses through the delicate process of rolling the woman off her stomach and onto her back, guiding the team like a dance instructor.

They moved only on Tran Dinh's count, in unison and with extreme care, because the unconscious patient could die within minutes should they inadvertently rip the breathing tube from her mouth.

"One, two and three - onto the side," the doctor instructed.

His next order quickly followed: "Onto the back."

"Perfect," he concluded when the move was done.

Pulling in three nurses and a burly care worker from another section of the Paris hospital, the series of coordinated movements was just one of thousands of medical interventions

- big and small, human, mechanical and pharmaceutical - that were maintaining the 64-year-old retired waitress on the threshold of life, while she fought to heal her diseased lungs.

And she was just one of nearly 6,000 critically ill patients still in French intensive care units this week as the country embarked on the perilous process of gingerly easing out of its latest lockdown - too prematurely for some frontline workers in hospitals.



Macron

French President **Emmanuel Macron's** decision to reopen elementary schools on Monday and allow people to move about more freely again in May - even though ICU numbers have remained stubbornly higher than at any point since the pandemic's catastrophic first surge - marks a shift away from prioritizing hospitals that is taking place in multiple European capitals.

In France, Greece and elsewhere, the cursor is moving toward other economic, social and educational imperatives. Governments are using ramped-up vaccinations to bolster arguments to ease restrictions, although just one-quarter of adults in Europe have received a first dose.

With record-high numbers of COVID-19 patients in critical care, Greece announced the reopening of its tourism industry from mid-May.

Emergency

Spain's prime minister says the state of emergency that allowed for curfews and travel bans won't be extended when it expires May 9, in part because vaccinations are allowing for a safe de-escalation of restrictions. This despite more than 2,200 critically ill COVID-19 patients still occupying one-fifth of Spain's ICU beds.

Beginning Monday, in low-risk zones, Italy's schools can reopen for full-time, in-person learning, and restaurants and bars can offer sit-down, outdoor service. The Netherlands is ending a night curfew and reopening the outdoor terraces of bars and cafes for the first time since mid-October, even as hospitals scale back non-urgent care to increase ICU beds for COVID-19 patients.

In France, Prime Minister Jean Castex said the latest infection surge that pushed the country's COVID-19-related death toll beyond 100,000 people has begun a slow retreat, allowing for all schools to reopen and day-time travel restrictions to end starting May 3. Castex also raised the prospect that stores and outdoor service at restaurants and cafes closed since October could reopen in mid-May.

"The peak of the third wave appears to be behind us, and the epidemic's pressure is lifting," Castex said Thursday.

That's not how it feels to Nadia Boudra, a critical care nurse at Bichat Hospital in Paris. Her 12-hour shift Thursday started with the unpleasant job of sealing the corpse of a 69-year-old man who died overnight with COVID-19 in a body bag, just hours before his daughter flew in from Canada hoping to see him alive.

"We have our noses in it. We see what's happening, we see that people are dying - a lot," she said. For her, reopened schools and, possibly, outdoor eating and drinking in May are "too soon" - a misleading message that "things are getting better."

"Clearly," she said, "that is not the case."

After sending the man's body to the hospital morgue, Boudra tended to the critically sick retired waitress, now the solitary occupant of the makeshift ICU set up for COVID-19 patients in what had been an operating room. The tender care, expertise and technology poured into keeping this one woman alive offered a micro-level look at the momentous national efforts - human, medical, financial - that France and other countries are still expending in ICUs as healthy people now plan May getaways and drinks with friends.

As the woman lay unconscious, 5,980 other gravely ill patients were also being kept alive with round-the-clock human and mechanical devotion in other critical care units across France. Automated drips supplied sedatives, painkillers and drugs to prevent deadly blood clots and leaks from the woman's veins. Enriched oxygen, first bubbled through water to warm and humidify it, pumped mechanically into her lungs. The ICU team also took a call from the woman's daughter, who telephoned morning and night for news. It was bad on Thursday morning: Tran Dinh told the daughter her mother's breathing had deteriorated.

"If you took away the machines, she would die in a few minutes, perhaps less," the doctor said. "There is no room for error."

Yet this patient wasn't even the most fragile. An artificial lung, a last resort for patients with lungs ravaged by the disease, was keeping a 53-year-old man alive. Costly and resource-intensive, the state-of-the-art treatment is reserved for patients thought strong enough to have a chance of surviving. About 50% still die, said Dr. Philippe Montravers, who heads the surgical ICU department at Bichat, run by Paris' hospital authority, AP-HP.

His unit has four of the ECMO machines - all of them used for COVID-19 patients. The man has been hooked up to his for over a month but "is not improving at all," Montravers said.

"This machine only buys time," he said. "It's a life buoy, nothing more."

Nurse Lea Jourdan said tending to someone so fragile is physically and mentally wearing.

"You have to be careful about everything, all the tubes, not ripping anything out when you turn him over," she said. "It's tough to see the positive and say to oneself, 'He will survive.'"

Also:

ANKARA: Greece on Friday reported the first case of the "double mutant" variant of coronavirus, which was discovered first in India.

The Greek News Agency quoted the national network to oversee the coronavirus genes mutations stating that the symptoms appeared on the patient on March, where he did not need to be hospitalized.

Prime Minister **Kyriakos Mitsotakis** stated on Wednesday of reducing restrictions imposed for combating the coronavirus.

The Greek Health Authority reported 76 new COVID-19 fatalities, and 2,754 infections over the past 24 hours.

The total death toll reached 9,864, along with 329,134 infections since the pandemic outbreak, it added.

Meanwhile **Italy's** Ministry of Health, on Friday, recorded 342 deaths and 14,761 new cases of COVID-19 in the last 24-hours, putting the country with a rate of 4.7 percent of positive tests.

The Ministry's daily COVID-19 report confirmed that the death toll has amounted to 118,699 while cases have risen to 3,935,703.

As for the recoveries, 3,351,461 in total are recovered with 21,069 recently logged.

About 19.9 percent of the population have been administered with the COVID-19 vaccine, 4,962,725 have taken two doses while 6,904,364 have taken only one dose.



Nurse Nadia Boudra, (left), Doctor Alexy Tran Dinh, (center), and nurse Yvana Faro, (right), care for a patient inside an operating room transformed as a room for COVID-19 unconscious patients at Bichat Hospital, AP-HP, in Paris, April 22. France still had nearly 6,000 critically ill patients in ICUs this week as the government embarked on the perilous process of gingerly easing the country out of its latest lockdown, too prematurely for those on pandemic frontlines in hospitals. (AP)



A health worker drags an oxygen cylinder at Sir Ganga Ram Hospital in New Delhi, India, April 23. The Press Trust of India reported 25 COVID-19 patients died at Sir Ganga Ram Hospital in the past 24 hours and the lives of another 60 were at risk amid a serious oxygen supply crisis. The news agency quoted unnamed officials as saying "low pressure oxygen" could be the likely cause for their deaths. However, Ajoy Sehgal, a hospital spokesperson, would not comment on whether the 25 patients died from a lack of oxygen. (AP)

Health

India reports 300K virus cases: Authorities scrambled anew Saturday to supply medical oxygen to Indian hospitals where COVID-19 patients were suffocating amid low supplies as the country with the world's worst coronavirus surge set a new global daily record of infections for the third straight day.

The 346,786 infections over the past day brought India's total past 16 million, behind only the United States. The Health Ministry reported another 2,624 deaths in the past 24 hours, pushing India's COVID-19 fatalities to 189,544.

Hospitals in the capital, New Delhi, and some of the worst-hit states like Maharashtra reported being critically short of beds and oxygen. Families were waiting for days to cremate their loved ones at overburdened crematoriums, with many turning to makeshift facilities for last rites.

"Every hospital is running out (of oxygen). We are running out," Dr. Sudhanshu Bankata, executive director of Bhatra Hospital, a leading hospital in the capital, told New Delhi Television channel.

At least 20 COVID-19 patients at the critical care unit of New Delhi's Jaipur Golden Hospital died overnight as "oxygen pressure was low," the Indian Express newspaper reported.

But the crisis in the country of nearly 1.4 billion people was deepening, amid criticism of the government's response and allegations that the scarce supplies of oxygen had been diverted by local officials to hospitals in their areas. The Supreme Court told Prime Minister **Narendra Modi's** government last week that it wanted a national plan for the supply of oxygen and essential drugs for the treatment of coronavirus patients.

Daily deaths soar in Pakistan: Pakistan on Saturday reported its highest COVID-19 death toll in a single day.

Authorities reported 157 deaths, bringing the overall fatalities to 16,999. A total of 5,908 additional cases pushed the toll to 790,016, as authorities complain of routine violations of social distancing and mask-wearing rules.

Prime Minister **Imran Khan** on Friday announced that military troops will be called to help police enforce the restrictions in public places.

Authorities also decided to keep educational institutions closed until the situation improved.

Information Minister Fawad Chaudhry said in a talk show Saturday that despite the increasing cases and deaths, Pakistan's situation was better than in neighboring India. He said a panel of 500,000 doses of China's Sinovac vaccines arrived on Friday. (AP)

Thailand new cases exceed 2K: Thailand's health authorities announced Friday they have confirmed 2,070 new COVID-19 cases, a new daily record that brings the country's total to 50,183.

The rising numbers are severely straining

Coronavirus

'Benefits outweigh a rare risk of blood clot'

US to resume J&J COVID shots

NEW YORK, April 24, (AP): US health officials lifted an 11-day pause on COVID-19 vaccinations using Johnson & Johnson's single-dose shot on Friday, after scientific advisers decided its benefits outweigh a rare risk of blood clot.

The government uncovered 15 vaccine recipients who developed a highly unusual kind of blood clot out of nearly 8 million people given the J&J shot. All were women, most under age 50. Three died, and seven remain hospitalized.

But ultimately, federal health officials decided that J&J's one-and-done vaccine is critical to fight the pandemic - and that the small clot risk could be handled with warnings to help younger women decide if they should use that shot or an alternative.

The Centers for Disease Control and Prevention said the J&J vaccine has important advantages for some people who were anxiously awaiting its return. And the Food and Drug Administration updated online vaccine information leaflets for would-be recipients and health workers, so that shots could resume as early as Saturday.

Decision

"This is not a decision the agencies reached lightly," FDA Acting Commissioner Janet Woodcock told reporters late Friday.

CDC Director Dr. Rochelle Walensky added that the pause should increase confidence in vaccine safety, showing "that we are taking every one of those needles in a haystack that we find seriously."

The US decision - similar to how European regulators are rolling out J&J's shot - comes after advisers to the CDC debated in a daylong meeting just how serious the risk really is. Panelists voted 10-4 to resume vaccinations without outright age restrictions, but made clear that the shots must come with clear warnings about the clots.

"Responsibility (cross head)

"I think we have a responsibility to be certain that they know this," said Dr. Sarah Long of Drexel University College of Medicine, who voted against the proposal because she felt it did not go far enough in warning younger women.

The committee members all agreed the J&J vaccine "should be put back into circulation," panel chairman Dr. Jose Romero, Arkansas' health secretary, said in an interview after the vote. "The difference was how you convey the risk ... It does not absolve us from making sure that people who receive this vaccine, if they are in the risk group, that we inform them of that."

European regulators earlier this week made a similar decision, deciding the clot risk was small enough to allow the rollout of J&J's shot. But how Americans ultimately handle J&J's vaccine will influence other countries that don't have as much access to other vaccination options.

Dr. Paul Stoffels, J&J's chief scientific officer, pledged that the company would work with US and global authorities "to ensure this very rare event can be identified early and treated effectively."

At issue is a weird kind of blood clot that forms in unusual places, such as veins that drain blood from the

EU agency says people should get 'second dose' of AstraZeneca too

LONDON, April 24, (AP): The European Medicines Agency said Friday that people who have received a first dose of AstraZeneca's COVID-19 vaccine should also get the second one despite the rare risk of blood clots that have been linked to the shot.

In new guidance, the European Union's drug regulator said people should still get a second AstraZeneca dose four to 12 weeks after their first shot and that the benefits of immunization far outweighed the risks of the unusual clotting disorder.

"At this stage, the available data supports continuing to give a second dose of the vaccine," said Noél Wathion, the agency's deputy executive director.

The regulator said it wasn't known whether the risk of a rare blood clot after a second dose might be different than that engendered by the first shot.

In its analysis of Europe-wide AstraZeneca data, the EMA also said there wasn't enough information to know whether age or gender might make some people more susceptible to the unusual clots.

Earlier this month, the Amsterdam-based drug regulator for the 27-nation EU said there was a "possible link" between the AstraZeneca vaccine and rare blood clotting disorders, but that the vaccine dramatically reduced the risk of being hospitalized or killed by COVID-19.

The EMA previously described the clots as "very rare" side effects and said the vaccine labels should be modified to make doctors and patients aware.

brain, and in patients with abnormally low levels of the platelets that form clots. Symptoms of the unusual clots, dubbed "thrombosis with thrombocytopenia syndrome," include severe headaches a week or two after the J&J vaccination - not right away - as well as abdominal pain and nausea.

The government initially spotted six cases of the rare clots, with nine more cases coming to light in the last week or so. But even the first handful of reports raised alarm because European regulators already had uncovered similar rare clots among recipients of another COVID-19 vaccine, from AstraZeneca. The AstraZeneca and J&J shots, while not identical, are made with the same technology.

Immune

European scientists found clues that an abnormal platelet-harming immune response to AstraZeneca's vaccine might be to blame -- and if so, then doctors should avoid the most common clot treatment, a blood thinner called heparin.

That added to US authorities' urgency in pausing J&J vaccinations so they could tell doctors how to diagnose and treat these rare clots. Six patients were treated with heparin before anyone realized that might harm instead of help.

It's still uncertain exactly how frequently the rare blood clots occur. According to data from the U.K., which has administered more AZ vaccines than any other country, there were 30 such cases among 18 million inoculations, as of late March.

Last month, more than a dozen countries, mostly in Europe, suspended their use of the AstraZeneca jab over the blood clot issue. Most restarted - some with age restrictions - after the EMA said countries should continue using the vaccine.

The agency this week identified a similar connection between blood clots and the COVID-19 vaccine developed by Johnson & Johnson. As with the AstraZeneca product, the EMA recommended labeling changes but said the benefits of getting vaccinated outweighed the risks. To date, most of the rare clotting disorders have been reported in women aged under 60.

Both the AstraZeneca and J&J vaccines are made using similar technology, and it's unclear whether that might be partly responsible for the rare clotting disorders.

EU health commissioner Stella Kyriakides said she hoped the EMA advice would reassure countries about the AstraZeneca vaccine. She said she had written to all of the EU's health ministers to try to obtain "the maximum possible coordination of our (vaccination) approaches, based on science."

In recent months, countries across Europe have taken wildly different approaches to the AstraZeneca vaccine, despite guidance from the EMA and other health authorities.

Dr. Jesse Goodman of Georgetown University closely watched Friday's deliberations and said people should be made aware of the clotting risk but that it shouldn't overshadow the benefits of COVID-19 protection.

"We need to treat people as adults, tell them what the information is and give them these choices," said Goodman, a former vaccine specialist at the FDA.

Two-dose vaccines from Pfizer and Moderna, which are made differently and haven't been linked to clot risks, are the mainstay of the U.S. vaccination effort. But many states had been counting on the easier-to-store, one-dose option to also help protect hard-to-reach populations including people who are homeless or disabled.

The CDC's advisers struggled to put the rare clot cases into perspective. COVID-19 itself can cause a different type of blood clots. So can everyday medications, such as birth control pills.

The side effect debate isn't the only hurdle facing J&J. The FDA separately uncovered manufacturing violations at a Baltimore factory the company had hired to help brew the vaccine. No shots made by Emergent BioSciences have been used - J&J's production so far has come from Europe.

numbers skyrocketing.

Taweasilp Visanuoyothin, a spokesman for the Center for COVID-19 Situation Administration, said Bangkok, with the highest number of cases, has only 69 empty ICU beds left out of a total of more than 400. He said that is enough for the next six to eight days according to the projected demand of 10-13 additional ICU beds per day. (AP)



Modi



Khan

the supply of hospital beds and ICU capacity.

The record number of new infections came a day after a new daily high of seven deaths was announced. Four more deaths were announced Friday, bringing Thailand's total to 121.

At the beginning of March, Thailand had 26,031 cases with double-digit daily increases, but a new outbreak sent the