COVID 2021
Nation's S&T Efforts Against COVID-19
UPDATED FORTNIGHTLY
11TH MAY 2021

Compiled by
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An Autonomous Organisation of
Department of Science & Technology,
Government of India

IN THE FACE OF ADVERSITY,
WE HAVE A CHOICE - STAY UPDATED WITH SCIENTIFIC FACTS
In 2020, India dealt the first wave of COVID-19 pandemic with collective measures and scientific approach and awareness. However, the pernicious second wave of the pandemic has aggravated the chasm. Though we have vaccines and some well-defined treatment protocols to fight out it out, we are not out of the woods yet. In India, till May, 16.7 crore doses of vaccines have been given and 3.41 crore people have been fully vaccinated.

We understand that in times of crisis it may not always be possible to obtain all required data, and that reporting may – of necessity – be curtailed. The present edition, COVID 2021: Nation’s S&T Efforts Against COVID-19 has been compiled with the aim to inform readers and strengthen the usefulness of any published information. The scientific community has done extremely well in their fight against the COVID-19 pandemic. However, from the perspective of the media and general public, this could not always be ascertained clearly enough. To bridge this gap and with an aim of taking the message of “Science gathers knowledge faster than society gathers wisdom”, Vigyan Prasar reached out to its audiences in the shape a regular e-newsletter – S&T Efforts in India on COVID-19 – from the early days of the outbreak of the pandemic, taking its mandate of science communication, popularisation and extension to the next level. The present edition is for sensitising the readers on the second wave of the pandemic, recent developments and steps taken to mitigate it.

In the face of adversity, we have a choice: to stay updated with scientific and evidence-based information instead of cluttering our mind with misleading, half-baked information. We wish an engaging reading to our audiences across all strata of the society and look forward to suggestions and feedback from them at covidnewsletter@vigyanprasar.gov.in. This, indeed, will help us add more value to the efforts in taking science to the society.

11 May 2021
National Technology Day

Vigyan Prasar
New Delhi
The e-newsletter is being published on a regular basis by collating all the inputs received till the preceding day of the release.

The older issues of e-newsletter are available in the Archival Section at https://vigyanprasar.gov.in/covid19-newsletters/

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AYUSH-64 found useful in the treatment of mild to moderate COVID-19 infection

29 APR 2021

In the middle of the havoc wreaked by second wave of the pandemic, AYUSH-64 has emerged as a ray of hope for the patients of mild and moderate COVID-19 infection. The scientists of reputed research institutions of the country have found that AYUSH 64, a poly-herbal formulation developed by the Central Council for Research in Ayurvedic Sciences (CCRAS), Ministry of Ayush is useful in the treatment of asymptomatic, mild and moderate COVID-19 infection as an adjunct to standard care. It is worthwhile to mention that initially the drug was developed for Malaria in the year 1980 and now is repurposed for COVID-19.

The Ministry of Ayush - Council of Scientific and Industrial Research (CSIR) collaboration has recently completed a robust multi-centre clinical trial to evaluate the safety and efficacy of AYUSH-64 in the management of mild to moderate COVID-19 patients.

AYUSH-64 comprises of *Alstonia scholaris* (aqueous bark extract), *Picrorhiza kurroa* (aqueous rhizome extract), *Swertia chirata* (aqueous extract of whole plant), and *Caesalpinia crista* (fine-powdered seed pulp). It is extensively studied, scientifically developed, safe and effective Ayurveda formulation. This medicine is also recommended in National Clinical Management Protocol based on Ayurveda and Yoga which is vetted by National Task Force on COVID-19 Management of ICMR.

Dr Arvind Chopra, Director, Centre for Rheumatic Diseases, Pune and honorary chief clinical coordinator of the Ministry of Ayush - CSIR collaboration informed that the trial was conducted at three centres: KGMU, Lucknow; DMIMS, Wardha; and BMC COVID Centre, Mumbai involving 70 participants in each arm. Dr Chopra stated that AYUSH-64 as an adjunct to standard of care (SoC) showed significant improvement and thus lesser period of hospitalization as compared to SoC alone. He also shared that several significant beneficial effects of Ayush-64 on general health, fatigue, anxiety, stress, appetite, general happiness and sleep were also observed. Dr Chopra concluded that this controlled drug trial study has provided substantial evidence that Ayush-64 can be effectively and safely used to treat mild to moderate cases of COVID-19 as adjuvant to SoC. He also added that patients on Ayush-64 will still require monitoring so as to identify any worsening of disease requiring more intensive therapy with oxygen and other treatment measures provided during hospitalization.

Dr Bhushan Patwardhan, National Research Professor, Ayush and Chairman of the Inter-disciplinary Ayush Research and Development Task Force on COVID-19 stated that the results of Ayush-64 study are highly encouraging and in the current crisis situations needy patients should be able to get benefits of it. He also underlined that this multi-centre trial was monitored.
by Ayush-CSIR Joint Monitoring Committee under the chairmanship of Dr V M Katoch, former Secretary, Department of Health Research and former Director General, Indian Council of Medical Research (DG, ICMR). He further added that these clinical studies were periodically reviewed by an independent Data and Safety Management Board (DSMB).

Dr Katoch informed that the committee has carefully reviewed the outcome of Ayush-64 study and recommended it in the management of asymptomatic, mild to moderate COVID-19 cases. It is worthwhile to note that this committee has also recommended the Ministry to communicate to the state licensing authorities/regulators regarding adding new indication of Ayush-64 for repurposing in the management of mild to moderate COVID-19.

Dr N Srikanth, Director General, CCRAS elaborated that additional studies on Ayush-64 are underway at reputed research institutes including CSIR-IIIM, DBT-THSTI, ICMR-NIN, AIIMS Jodhpur and Medical Colleges including Post Graduate Institute of Medical Education & Research, Chandigarh; King George’s Medical University, Lucknow; Government Medical College, Nagpur; and Datta Meghe Institute of Medical Sciences, Nagpur. Results received so far have shown usefulness of Ayush-64 in dealing with mild and moderate COVID-19. He also added that the outcome of the seven clinical studies has revealed that Ayush-64 exhibits early clinical recovery in COVID-19 cases without further progression. In all clinical studies, it was found to be well tolerated and clinically safe.

**Website link:**

**DBT-BIRAC-supported ‘Virafin’ from Zydus gets emergency nod for treating moderate COVID-19 infections in adults**
24 APR 2021

Drug Controller General of India (DCGI) gave a restricted emergency use approval to the Zydus Cadila’s ‘Virafin’ for treating patients showing moderate COVID-19 symptoms. Virafin is a pegylated interferon alpha-2b (PegIFN), which when subcutaneously injected to the patient in the early stages of infection, resulted in their faster recovery.

For the development of Virafin, Zydus appreciated the support provided by DBT-BIRAC COVID 19 Research Consortium through NBM, for conducting the Phase II human clinical trial studies. The studies confirmed safety, tolerability and efficacy of Virafin. The studies also reported that Virafin reduces viral load and aid in managing the disease in a better way, such as reduction in the need for supplemental oxygen, thereby reducing the respiratory tension caused due to low oxygen levels.

Speaking on this achievement Dr Renu Swarup, Secretary, DBT and Chairperson, BIRAC said, “The government has been committed to provide all possible facilitation to our industries to work towards mitigation strategies and interventions against COVID-19 pandemic. The emergency nod provided to Virafin is another milestone which is a boon for the medical facility providers. I highly appreciate the efforts put in for this achievement.”

Excited about this announcement, the Managing Director of Cadila Healthcare Limited, Dr Sharvil Patel added, “The realisation that we can provide a therapy that reduces viral load substantially when given early and can aid in better disease management. It comes at a critical time for patients, and we will continue to give them access to the critical therapies as we together fight against COVID-19.”
Phase III clinical trial studies reported that a larger proportion of patients when administered subcutaneously with Virafin turned out to be RT-PCR negative by day 7, apart from faster recovery as compared to other anti-viral agents.

**Website link:**

**Twenty-five new manufacturing sites approved for Remdesivir production**

23 APR 2021

Minister of State for Chemicals & Fertilizers Shri Mansukh Mandaviya informed that 25 new manufacturing sites for Remdesivir’s production have been approved since 12th April 2021.

He said, “Production capacity is now ramped up to more than 90 lakhs vials per month, earlier it was 40 lakhs vials/month. Very soon, 3 lakh vial/day will be produced. Monitoring is being done on daily basis. We would not leave any stone unturned to supply Remdesivir.”

**Website link:**

**Special ‘Oxygen Express’ trains to run through Green Corridors for transport of liquid medical oxygen**

18 APR 2021

The country has been facing an unprecedented surge in the new daily cases of COVID-19. Medical oxygen is a critical component in the treatment of COVID-19-affected patients. Due to this recent surge, the requirement of oxygen for effective clinical treatment of COVID-19 patients has also witnessed a manifold hike. Department for Promotion of Industry and Internal Trade (DPIIT) has conveyed that this has already reached about 60 per cent of the total daily oxygen production, and is expected to rise further. There have been reports of shortage of medical oxygen from some States and UTs.

Government of India has been regularly monitoring and ensuring smooth supply of essential medical equipment including medical oxygen to the affected states and addressing challenges that arise from time to time. The Empowered Group-II (EG-II) headed by Secretary, Department for Promotion of Industry & Internal Trade (DPIIT) has mandated by Govt. of India to manage requisite supplies of medical equipment and drugs including medical oxygen across the country. Several immediate and timely measures have been taken in the recent days by GoI to address the issue of adequate availability of medical oxygen across the country. While every effort is being made to meet the rising demand for medical oxygen, including augmenting daily production and stocks and States/UTs are taking appropriate steps for optimum and rationalized utilisation of available stock of oxygen, the present trend necessitates additional measures.

The Railways Ministry is gearing up to transport Liquid Medical Oxygen (LMO) and Oxygen Cylinders across the key Corridors and to run OXYGEN Express. To facilities easy and smooth transport of oxygen across the country, a Green Corridor is being created to fast movement of Oxygen Express Trains. This will ensure supply of medical oxygen in bulk and rapidly to patients.

**Website link:**
Union Minister for Education launches DuroKea Series developed by IIT Hyderabad researchers

Union Minister for Education Shri Ramesh Pokhriyal ‘Nishank’ virtually launched “World 1st affordable and long-lasting hygiene product DuroKea Series”, developed by IIT Hyderabad researchers. Led by Dr Jyotsnendu Giri, Associate Professor in Biomedical Engineering and founder EaffoCare Innovation Pvt. Ltd incubating at iTIC, IIT Hyderabad the team has developed innovative DuroKea long-lasting technologies to combat spreading of COVID-19 virus. Chairman, Board of Governors, IIT Hyderabad, Shri B. V. R. Mohan Reddy; Prof. Founder Dean ESIC Medical College and Hospital, Hyderabad, M. Srinivas; Director IIT Hyderabad, Prof. B. S. Murty and other officials from IIT Hyderabad were present on the occasion.

DuroKea is aligned with the vision of Prime Minister Shri Narendra Modi to attain self-reliance. This next generation antimicrobial technology starts at Rs. 189, kills 99.99% of germs instantly, and leaves behind the long-lasting protective nanoscale coating up to 35 days till next wash.

This is a highly effective and affordable research innovation from IIT Hyderabad, developed by a team led by Dr Jyotsnendu Giri, Department of Biomedical Engineering, IIT Hyderabad. Members of the team Dr Sunil Kumar Yadava, Dr Qasim M, Ms. Meenakshi Chauhan, Ms. Ruby Singh, Ms. Suparna Basu, Ms. Uzma Hasan, Mr Jayakkumar and Dr Purandhi Roopmani share a common vision with this innovation.

Website link:

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ICMR releases guidelines to enhance availability of COVID-19 testing kits and newer innovative testing solutions in India

ICMR has proposed to exempt several reputed global agencies from validation criteria for RT-PCR, RAT, home-based testing solution, antigen, antibody ELISA and rapid antibody tests. It further proposed to accord marketing permission by the Drugs Controller General of India on the basis of existing approvals. Several global agencies of Europe, Japan, South Korea, Australia, Brazil, and the agencies listed in the World Health Organization’s emergency use listing will benefit from this move. At present, kits approved by the US Food and Drug Administration under regular or emergency use are exempted from validation in India. It qualifies for direct marketing permission from the Drug Controller General of India. Moreover, this guidance is also applicable for tests using the nasopharyngeal, oropharyngeal, throat, nasal, oral, saliva, mouth rinse, gargle, blood, and serum samples.

Contact Info: drneetu.vijay@icmr.gov.in, ajaysinghdhama@gmail.com

Website Link:

Office of the PSA releases home care tips for managing COVID-19 second wave

The Office of the Principal Scientific Adviser to the Government of India has curated information and brought a simple visual reference to manage mild symptoms of COVID-19 at home – “Home care tips for managing COVID-19”.

The reference advises people not to panic if they experience any COVID-19 symptoms, as the majority of people can manage their infections at home by following self-care measures. It lists the common symptoms of the disease and recommends that at the first sign of experiencing the
symptoms, people should isolate at home and begin following self-care measures. It asks people not to worry or become anxious, as these interfere with the body’s natural immune response to fighting the infection.

The guide outlines the importance of getting vaccinated to reduce the spread of the virus. It also reminds people that even after being vaccinated, it is essential to continue to follow COVID-appropriate behaviour.

**Website links:**

**MyGov released guidelines for effective control of COVID-19 during second wave**
To sustain the second wave of COVID-19, MyGov has released guidelines to curtail the transmission by 4 major steps, that is, enforcement of Test-Track-Treat-Vaccination Protocol.

**Website link:**
https://static.mygov.in/rest/s3fs-public/mygov_161725058451307401.pdf

**Clinical guidance for management of adult COVID-19 patients released to cater to the needs of common people**
The All India Institute of Medical Science (AIIMS) and the Indian Council of Medical Research (ICMR) have jointly issued new guidelines for the treatment of COVID-19 patients depending on the severity of a case — mild, moderate, or severe. It explained in details the treatment for mild, moderate and severe cases which includes way of identification, recommendations, required oxygen support, use of medication or drugs, Dos and Don’ts, supportive measures and monitoring of health parameters, etc. Also mentioned specifically, in the case of moderate infections, India’s apex hospital has recommended that the concerned patient should be admitted into a hospital ward.

**Website Link:**
**CLINICAL GUIDANCE FOR MANAGEMENT OF ADULT COVID-19 PATIENTS**

**COVID-19 patient**

**Mild disease**
- Upper respiratory tract symptoms (fever or cough) _WITHOUT_ shortness of breath or hypoxia

**Home Isolation & Care**
- **MUST DO:**
  - Physical distancing, indoor mask use, strict hand hygiene.
  - Symptomatic management (hydration, anti-pyretics, antitussives, multivitamins).
  - Stay in contact with treating physician.
  - Monitor temperature and oxygen saturation (by applying a SpO2 probe to finger).
- Seek immediate medical attention if:
  - Difficulty in breathing
  - High grade fever/severe cough, particularly if lasting for >5 days
  - A low threshold to be kept for those with any of the high-risk features*

**MAY DO:**
- TheraP based on low certainty of evidence
  - Tab icterdin (200 mg/kg/once a day for 3 days). Avoid in pregnant and lactating women.
  - OR
  - Tab HC1 (800 mg BD for 3 days) if/when contraindicated.
  - Inhalational Budesonide (given via Metered dose Inhaler/ Dry powder inhaler) at a dose of 800 mcg BD for 3 days to be given if symptoms (fever and/or cough) are persistent beyond 5 days of disease onset.

*High-risk for severe disease or mortality
  - Age >60 years
  - Cardiovascular disease, hypertension, and CAD
  - DM (Diabetes mellitus) and other immunocompromised states
  - Chronic lung/diabetes/overt disease
  - Cancer/immune disease
  - Obesity

**Moderate disease**
- Any one of:
  - 1. Respiratory rate >24/min, breathlessness
  - 2. SpO2< 93% on room air

**Severe disease**
- Any one of:
  - 1. Respiratory rate >30/min, breathlessness
  - 2. SpO2< 90% on room air

**ADMIT IN WARD**
- **Oxygen Support:**
  - Target SpO2: 92-96% (98-99% in patients with COPD).
  - Preferred devices for oxygenation: non-rebreathing face mask.
- **Awake patient:** encouraged in all patients requiring supplemental oxygen therapy (sequential position changes every 2 hours).
- **Anti-inflammatory or immunomodulatory therapy:**
  - Inj. Methyprednisolone 0.5 to 1 mg/kg in 2 divided doses (or an equivalent dose of dexamethasone) usually for a duration of 5 to 10 days.
  - Patients may be initiated or switched to oral route if stable and/or improving.
- **Anticoagulation:**
  - Conventional dose prophylactic unfractionated heparin or Low Molecular Weight Heparin (weight based e.g., enoxaparin 0.5 mg/kg per dose SC BD). There should be no contraindication or high risk of bleeding.

**ADMIT IN ICU**
- **Respiratory support:**
  - Consider use of NIV (Helmet or face mask interface depending on availability) in patients with increasing oxygen requirement, if work of breathing is low.
  - Consider use of HFOV in patients with increasing oxygen requirement.
  - Intubation should be prioritized in patients with high work of breathing if NIV is not tolerated.
  - Use conventional ARDSNet protocol for ventilatory management.

**Anti-inflammatory or immunomodulatory therapy:**
- Inj. Methyprednisolone 1 to 2 mg/kg IV in 2 divided doses (or an equivalent dose of dexamethasone) usually for a duration of 5 to 10 days.

**After clinical improvement, discharge as per revised discharge criteria.**

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**EUA/Off-label use Based on limited available evidence and only in specific circumstances:**

- **Remdesivir (RVD):** may be considered only in patients with
  - Moderate to severe disease (requiring SUPPLEMENTAL OXYGEN), AND
  - No renal or hepatic dysfunction (GFR <60 ml/min/1.73 m2). AST/ALT >1.5 times ULN (Not an absolute contraindication), AND
  - Who are within 10 days of onset of symptom(s).
  - Recommended dose: 200 mg IV on day 1 and 100 mg IV OD for next 4 days.
  - Not to be used in patients who are NOT on oxygen support or in home settings.

- **Tocilizumab (OM-Label):** may be considered when ALL of the following criteria are met
  - Presence of severe disease (preferably within 24-48 hours of onset of severe disease/ICU admission).
  - Significant inflammatory markers (CRP >3 or IL-6).
  - Not improving despite use of steroids.
  - No active bacterial/fungal/tubercular infection.
  - Recommended single dose: 4 to 8 mg/kg (400 mg in 60 kg adult) in 100 ml NS over 1 hour.

- **Convalescent plasma (Off-label):** may be considered only when the following criteria are met
  - Early moderate disease (preferably within 7 days of symptom onset, no use after 7 days).
  - Availability of high titre donor plasma (signal to cutoff ratio ≥3.5 or equivalent depending on the test kit being used).
MoHFW releases guidelines for healthcare and frontline workers on COVID-19 vaccination

The Ministry of Health and Family Welfare (MoHFW) have issued COVID-19 vaccination guide for healthcare and frontline workers. It is mentioned in the guide that beneficiaries in phase 1 of COVID-19 vaccination in India are healthcare workers, frontline workers, including personnel from State and Central Police Organisations (CPOs), Armed Forces, home guards, prison staff and civil defence volunteers including disaster management volunteers, municipal workers, revenue officers engaged in containment and surveillance activities etc. This information guide explains why the vaccine is important and how to register for the vaccination.

Website Link:

MoHFW released guidelines for eligible beneficiaries on COVID-19 vaccination

Ministry of Health and Family Welfare (MoHFW) have issued COVID-19 vaccination guide for all eligible beneficiaries. According to the Guidelines beneficiaries in phase 1 of COVID-19 vaccination in India include adults who are over 50 years and persons under 50 years with associated comorbidities such as hypertension/diabetes/HIV/cancer/cardiovascular disease. This information guide explains why the vaccine is important and how to register for the vaccination.

Website Link:

Guidance Guidance for approval of COVID-19 vaccines in India for restricted use in emergency situation

In light of the eruption of the second wave of COVID-19 pandemic, to tackle the emergency situation by increasing the availability of safe and effective vaccines, Central Drugs Standard Control Organization (CDSCO) released guidelines for vaccines, in pursuance of recommendations of the National Expert Group on Vaccine Administration for COVID-19 (NEGVAC). This is for vaccines which are listed in WHO Emergency Use Listing (EUL).

Website link:
https://cdsco.gov.in/opencms/opencms/system/modules/CDSCO.WEB/elements/download_file_division.jsp?num_id=NzE0Mw==
Guidelines by MoHFW for home isolation of mild/asymptomatic COVID-19 cases

Ministry of Health and Family Welfare (MoHFW) has issued guidelines for home isolation of mild/asymptomatic COVID-19 cases. As per the guidelines, the patients who are clinically assigned to be mild/asymptomatic are recommended for home isolation. The asymptomatic cases are laboratory-confirmed cases not experiencing any symptoms and having oxygen saturation at room air of more than 94%. Clinically assigned mild cases are patients with upper respiratory tract symptoms (and/or fever) without shortness of breath and having oxygen saturation at room air of more than 94%. These guidelines are in supersession to the guidelines issued on the subject on 2nd July, 2020.

As per the issued guidelines, home isolation may be provided for those who have been clinically classified as a mild/asymptomatic COVID-19 case by the treating medical officer (Mild – respiratory tract symptoms without shortness of breath or hypoxia), the requisite facility available at their residence for self-isolation and for quarantining family contacts, and a caregiver on 24×7 basis with a regular communication link with a hospital or a doctor.

Website Link: https://www.mohfw.gov.in/pdf/RevisedguidelinesforHomeIsolationofmildasymptomaticCOVID19cases.pdf

Protocol for Management of COVID-19 in the paediatric age group released by MoHFW

Ministry of Health and Family Welfare (MoHFW) has come out with a protocol for the Management of COVID-19 in the paediatric age group. According to the protocol, asymptomatic children are usually identified while screening, if family members are identified. Such children do not require any treatment except monitoring for development of symptoms and subsequent treatment according to assessed severity. Children with mild disease may present with sore throat, rhinorrhea, cough with no breathing difficulty and few children may have gastrointestinal symptoms also. Such children do not need any investigations.

As per the protocol, these children can be managed at home with home isolation and symptomatic treatment. Treatment of mild illness in home isolation is symptomatic. There should be regular communication with the doctor or healthcare worker.

Website Link: https://cdnbbsr.s3waas.gov.in/s3850af92f8d9903e7a4e0559a98ecc857/uploads/2021/04/2021042919.pdf

Ministry of AYUSH releases fresh COVID-19 Guidelines to fight out the second wave

Responding to the need of fresh guidelines in the face of the emergence of the second wave of the pandemic, Ministry of AYUSH has released today the revised guidelines for Ayurveda and Unani practitioners for COVID-19 patients in home isolation and Ayurveda and Unani preventive measures for self-care during COVID-19 pandemic. The main focus is on self-care and home management of COVID-19, as the vast majority of COVID-affected families in the country are forced to negotiate the pandemic out of hospitals.

These guidelines for self-care are based on leads from classical Ayurveda and Unani texts, outcome of research studies and report and recommendations of the interdisciplinary committee and which will further strengthen the fight in combating COVID-19 in the emerging situation.
The present Guidelines and self-care measures provide clear guidance to Ayurveda and Unani practitioners regarding treatment of COVID-19 patients in different conditions of infection. This brings in uniformity and consistency in the Ayush-based responses to the pandemic across the country. It also helps State/UT Governments to plan and incorporate these solutions into the COVID-19 management activities being deployed on the ground. Furthermore, these measures and guidelines contribute to the mainstreaming of Ayush solutions for the management of COVID-19 and will be immensely beneficial to the public since these solutions are easily accessible. These will also help in alleviating the hardships brought in by the pandemic.

These are aimed to increase awareness among the citizens regarding effective home care solutions and recommended Ayush practices, to help them to enhance their immunity along with standard guideline for Ayurveda and Unani practitioners for management of prophylactic, asymptomatic and mild cases of COVID-19 during home isolation.

**Website Link:**

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**Apex body of drug control in India releases list of PCR Kits approved for testing of COVID-19**

Central Drugs Standard Control Organization (CDSCO) has been regularly updating the list of approved COVID-19 testing kits such as polymerase chain reaction (PCR) and RAPID/CLIA/ELISA kits on its website. The CDSCO office issued a updated list of PCR kits approved for COVID-19 testing on various dates and recently updated it on May 4, 2021.

**Website link:**

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**CDSCO released guidance for import of vaccine by private sector or any person**

As per the guidelines on Liberalized Pricing and Accelerated National COVID-19 Vaccination Strategy published by MoHFW w.e.f. 1 May, the ready-to-use imported COVID vaccine would be allowed to be utilized entirely in the other than Govt. of India channel.

In view of above, any private entity or Government sector entity, who wants to import COVID vaccine for vaccination as per the above mentioned guidelines is required to follow the following procedures: -

1. If the vaccine is not yet approved/ licensed in India, the importer / authorized agent of the manufacturer of the vaccine shall obtain the following permission / license from CDSCO.
   a. New Drug Permission under the New Drugs and Clinical Trials Rules, 2019
   b. Import registration under the Drugs Rules, 1945
   c. Import licence under the Drugs Rules, 1945.

2. After obtaining the import licence, the importer / authorized agent can import the vaccine and any including private sector entity can procure the vaccine from them as per the National guidelines.
3. If the vaccine to be imported is already approved and import licence has been obtained from CDSCO, then any entity including private sector entity can procure the vaccine from the importer / licensee for its use as per the National Guidelines

**Website link:**

**CDSCO released list of Rapid / CLIA/ ELISA Kits approved for testing of COVID-19**

The CDSCO has been regularly updating the list of approved COVID-19 testing kits such as polymerase chain reaction (PCR) and RAPID/CLIA/ELISA kits on its website. The CDSCO office issued a updated list of Rapid / CLIA/ ELISA Kits approved for COVID-19 testing on various dates and recently updated it on May 4, 2021.

**Website link:**

**Detailed information with respective links of the specific guidelines for COVID-19 patients in home isolation and self-care are:**

- **Guidelines for Ayurveda Practitioners for COVID-19 Patients in Home Isolation:**

- **Ayurveda Preventive Measures for Self-care during COVID-19 Pandemic:**

- **Guidelines for UNANI Practitioners for COVID-19 Patients in Home Isolation:**

- **Unani Medicine-based Preventive Measures for Self-care during COVID-19 Pandemic:**

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New mutations and proteins of novel coronavirus revealed by IISc team

A recent study from the Indian Institute of Science (IISc), published in the Journal of Proteome Research, has identified multiple mutations and unique proteins in isolates of SARS-CoV-2, the virus that causes COVID-19. It has also shown that the host produces several proteins of their own as their body launches an immunological defense in response to the viral attack.

COVID-19 has claimed over 2.5 million lives in just over a year. Humanity continues to face new challenges with novel strains – or genetic variants – of the virus being reported from around the world. To better understand how the virus is mutating and its protein biology (proteins are made using genetic information), an IISc team led by Utpal Tatu, Professor in the Department of Biochemistry, has carried out a comprehensive “proteo-genomic” investigation – a series of analyses of SARS-CoV-2 isolates. The isolates or viral samples were recovered from nasal secretions of consenting COVID-19-positive individuals in Bengaluru.

The genomic analysis was done using what molecular biologists like Tatu call next generation sequencing (NGS), a technology that allows for rapid sequencing of the entire genome. He says that sequencing the genomes of viral strains from around the world is important because it helps keep track of mutations that are arising constantly. His team’s analysis suggests that the virus is now mutating faster than before – the three Bengaluru isolates had 27 mutations in their genomes with over 11 mutations per sample, more than both the national average and global average.

Contact Info: tatu@iisc.ac.in

Website Link:
Evidence of presence of SARS-CoV-2 virus in atmospheric air and surfaces of dedicated COVID-19 hospital

A collaborative study was conducted by the Departments of Biochemistry, Microbiology, Maulana Azad Medical College in collaboration with the Departments of Medicine and Anaesthesia, Lok Nayak Hospital (LNH), and CSIR-National Physical Laboratory, New Delhi during 1 July 2020 to 25 September 2020 to provide evidences for the presence of SARS-CoV-2 virus in atmospheric air and surfaces of the hospital wards. Swabs from hospital surfaces (patient’s bed, ward floor and nursing stations area) and suspended particulate matters in ambient air were collected by a portable air sampler from medicine ward, ICU and emergency ward admitting COVID-19 patients. By performing RT-PCR for E-gene and RdRp gene, SARS-CoV-2 virus was detected from hospital surfaces and particulate matters from ambient air of various wards collected at 1 and 3 meter distance from active COVID-19 patients. Presence of the virus in air beyond 1 meter distance from the patients and surfaces of hospital indicates that SARS-CoV-2 virus has potential to be transmitted by airborne and surface routes from COVID-19 patients to healthcare workers working in dedicated COVID-19 hospital. This warrants that precautions against airborne and surface transmission of COVID-19 in community should be taken when markets, industries, educational institutions etc. reopen for normal activities.

Contact Info: tuhin@nplindia.org, bckoner@hotmail.com

Website Link:

Role of Favipiravir in the treatment of COVID-19

The coronavirus disease-2019 (COVID-19) outbreak all over the world has led the researchers strive for developing drugs or vaccines to prevent or halt the progression of this ailment. To hasten the treatment process, repurposed drugs are being evaluated. Favipiravir is one such oral drug that was approved for new and re-emerging pandemic influenza in Japan in 2014 and has shown potent in vitro activity against severe acute respiratory syndrome coronavirus-2. It has a wide therapeutic safety margin indicated by a wide CC50/EC50 ratio for a high dose. From the clinical studies in COVID-19, it has shown rapid viral clearance as compared to Lopinavir/Ritonavir (LPV/RTV) and superior recovery rate than umifenovir. Overall, Favipiravir has shown promising results in clinical studies in China, Russia, and Japan, and more trials are underway in multiple countries, including USA, UK, and India. Recently, treatment guidelines from many countries and some states from India have included Favipiravir in the treatment protocol. This review provides insights into the evidence-based evolving role of Favipiravir in the management of COVID-19 infection with emphasis on benefits of initiating an early antiviral therapy with special focus on Favipiravir, its pharmacodynamic, pharmacokinetic, in vitro, clinical data, and inclusion in the treatment protocols of COVID-19.
THSTI researchers find promising vaccine candidate against SARS-CoV-2

Translational Health Science and Technology Institute (THSTI) worked on the SARS-CoV-2, the causative agent of COVID-19 that has proven to be a threat to the human race globally. The receptor binding domain of the spike protein of coronavirus has multiple neutralizing epitopes and is associated with viral entry. A team of researchers has designed and characterized the SARS-CoV-2 spike protein fragment (330-526) as Receptor Binding Domain (RBD330-526) with two native glycosylation sites (N331 and N343); as a potential subunit vaccine candidate. The team initially characterized the RBD330-526 biochemically and investigated its thermal stability, humoral and T cell immune response of various RBD protein formulations (with or without adjuvant) to evaluate the inherent immunogenicity and immunomodulatory effect. Their result showed that the purified RBD immunogen is stable up to 72 hours, without any apparent loss in affinity or specificity of interaction with the ACE2 receptor. Upon immunization in mice, RBD generates high titer humoral response, elevated IFN-α producing CD4+ cells, cytotoxic T cells and robust neutralizing antibodies against live SARS-CoV-2 virus. The results collectively support the potential of RBD330-526 as a promising vaccine candidate against the SARS-CoV-2.

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Ritonavir may inhibit exoribonuclease activity of nsp14 from SARS-CoV-2

SARS-CoV-2 is the causative agent for the on-going COVID-19 pandemic. The nsp14 protein of SARS-CoV-2 houses a 3' to 5' exoribonuclease activity responsible for removing mismatches that arise during genome duplication. A team of researchers at Regional Centre for Biotechnology, Faridabad worked on a homology model of nsp10-nsp14 complex to carry out in silico screening to identify molecules among natural products or FDA-approved drugs...
that can potentially inhibit the activity of nsp14. This exercise showed that ritonavir might bind to the exoribonuclease active site of the nsp14 protein. A model of the SARS-CoV-2-nsp10-nsp14 complex bound to substrate RNA showed that the ritonavir binding site overlaps with that of the 3’ nucleotide of substrate RNA. A comparison of the calculated energies of binding for RNA and ritonavir suggested that the drug may bind to the active site of nsp14 with significant affinity. It is, therefore, possible that ritonavir may prevent association with substrate RNA and thus inhibit the exoribonuclease activity of nsp14. Overall, the computational studies suggest that ritonavir may serve as an effective inhibitor of the nsp14 protein. nsp14 is known to attenuate the inhibitory effect of drugs that function through premature termination of viral genome replication. Hence, ritonavir may potentiate the therapeutic properties of drugs such as Remdesivir, Favipiravir and Ribavirin.

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Website link: https://www.rcb.res.in/index.php?param=research/2021_p

RCB-Faridabad published article on in silico characterization of mutations circulating in SARS-CoV-2 structural proteins

SARS-CoV-2 emerged as the causative agent for the COVID-19 pandemic that has caused more than 2.4 million deaths worldwide. Since the onset of infections, several full-length sequences of viral genome have been made available which have been used to gain insights into viral dynamics. A team of researchers at Regional Centre for Biotechnology, Faridabad utilised a meta-data driven comparative analysis tool for sequences (Meta-CATS) algorithm to identify mutations in 829 SARS-CoV-2 genomes from around the world. The algorithm predicted sixty-one mutations among SARS-CoV-2 genomes. The team observed that most of the mutations were concentrated around three protein-coding genes viz. nsp3 (non-structural protein 3), RdRp (RNA-directed RNA polymerase) and Nucleocapsid (N) proteins of SARS-CoV-2. The team used various computational tools including normal mode analysis (NMA), C-α discrete molecular dynamics (DMD), and all-atom molecular dynamic simulations (MD) to study the effect of mutations on functionality, stability, and flexibility of SARS-CoV-2 structural proteins including envelope (E), N, and spike (S) proteins. PredictSNP predictor suggested that four mutations (L37H in E, R203K and P344S in N and D614G in S) out of seven were predicted to be neutral while the remaining ones (P13L, S197L and G204R in N) were predicted to be deleterious in nature thereby impacting protein functionality. NMA, C-α DMD and all-atom MD suggested some mutations to have stabilizing roles (P13L, S197L and R203K in N protein) where remaining ones were predicted to destabilize mutant protein. In summary, they identified significant mutations in SARS-CoV-2 genomes as well as used computational approaches to further characterize the possible effect of highly significant mutations on SARS-CoV-2 structural proteins.

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Website link: https://pubmed.ncbi.nlm.nih.gov/33797336/

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START-UP SPOTLIGHTS

Start-up at IIT Delhi's Incubator Develops Multipurpose Surface Disinfectant

Ramja Genosensor, a start-up incubated at IIT Delhi, has developed a multipurpose organic hybrid surface disinfectant spray known as NANOSHOT. The spray is based on nanoparticles and is completely free of alcohol or hypochlorite. One shot of NANOSHOT will be effective for 96 hours (4 days). It has been tested and certified that NANOSHOT starts killing microbes, i.e., virus, bacteria, fungi within 30 seconds of its application on the surface and kills 99.9% microbes in 10 minutes. In addition to that it is completely non-toxic as there were no allergic reactions, rashes or irritation observed during the test at NABL-accredited laboratory.

Website Link:
https://home.iitd.ac.in/show.php?id=9&in_sections=Press

Approval for an indigenous One-step COVID-19 Antigen detection test (Cov-Ant) from start-ups through the CAWACH initiative

Patanjali Pharma Pvt. Ltd. recently received ICMR approval for its One-step COVID-19 Antigen Detection Test (Cov-Ant). The test detects presence of viral proteins (antigens) expressed by the COVID-19 virus in a sample from a person's respiratory tract. If the target antigen is present in sufficient concentrations in the sample, it will bind to the specific antibodies fixed to a
paper strip enclosed in a plastic casing and generate a visually detectable signal typically within 30 minutes. Patanjali Pharma Pvt. Ltd. is a Start-up that has been incubated with SINE (Society for Innovation & Entrepreneurship), an incubator at IIT Bombay for supporting tech start-ups. The start-up developed the technology with support from the CAWACH initiative by the National Science & Technology Entrepreneurship Development Board (NSTEDB), DST, implemented by SINE. With the timely advice provided by SINE, the test kit got approval by ICMR and will soon be available for commercialization once CDSCO completes the validation process.

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**SIGNIFICANT EFFORTS**

**IISc develops Mini-COVIDNet, a mobile-friendly point-of-care detection model of COVID-19**

Lung ultrasound imaging has the potential to be an effective point-of-care test for detection of COVID-19, due to its ease of operation with minimal personal protection equipment along with easy disinfection. The current state-of-the-art deep learning models for detection of COVID-19 are heavy models that may not be easy to deploy in commonly utilized mobile platforms in point-of-care testing. In this work, a team of researchers at Indian Institute of Science, Bangalore developed a light weight, mobile-friendly efficient deep learning model for detection of COVID-19 using lung ultrasound images. The developed method was shown to be sensitive to the damage to the pleural surface of the lung, which has been proven to have prognostic value, commonly observed in intensive care unit–admitted and deceased patients. The developed model has utility in the context of a massive COVID-19 pandemic, where it can better triage patients with pulmonary symptoms (suspected of infection).

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**Website link:**

**MoHFW advises Proning for self-care**

The Ministry of Health and Family Welfare has advised ‘proning for self-care’ for coronavirus patients. It states that it is very much beneficial for such patients who have compromised breathing comfort, especially during home isolation. The ministry, in a document, also said proning is the process of turning a patient with precise, safe motions, from their back onto their abdomen so that the individual is lying face down and it is medically accepted position to improve breathing comfort and oxygenation.
Multilayer masks most effective at preventing aerosol generation: IISc

When a person coughs, large droplets (>200 microns) hit the inner surface of a mask at a high speed, penetrate the mask fabric and break up or “atomise” into smaller droplets, which have a greater chance of aerosolisation and thereby carrying viruses like SARS-CoV-2 with them, according to a new study led by researchers at the Indian Institute of Science (IISc).

Using a high-speed camera, a team of researchers at Indian Institute of Science Bangalore closely tracked individual cough-like droplets impinging on single-, double- and multi-layered masks, and noted the size distribution of the “daughter” droplets generated after penetration through the mask fabric. For single- and double-layered masks, most of these atomised daughter droplets were found to be smaller than 100 microns, with the potential to become aerosols, which can remain suspended in the air for a long time and potentially cause infection.

Triple-layered masks – even those made of cloth – and N95 masks were found to successfully prevent atomisation, and therefore offered the best protection. The researchers, however, clarify that when such masks are unavailable, even single-layered masks may offer some protection and hence must be used wherever mandated by health officials.

The team used a pulsed laser to cast shadows of the droplets and a camera and zoom lens to capture images at high speeds (20,000 frames per second). Apart from surgical masks, some locally sourced cloth masks were also tested. The team also investigated the effects of varying the speed at which the droplet is ejected and the impingement angle.

They found that single-layered masks could only block 30% of the initial droplet volume from escaping. Double-layered masks were better (about 91% was blocked), but more than a quarter of the daughter droplets that were generated were in the size range of aerosols.
Droplet transmission and generation was either negligible or zero for triple-layered and N95 masks.

The team also dispersed fluorescent nanoparticles of the same size as the virus in the artificial cough droplets to show how these particles can get entrapped in the mask fibres, underscoring the importance of disposing the masks after use.

The study was carried out in collaboration with scientists Abhishek Saha in UC San Diego and Swetaprovo Chaudhuri in University of Toronto Engineering. The researchers hope to pursue further studies using a full-scale patient simulator that would also allow tracking multiple droplets. “Studies are also going on to propose more robust models to understand how this atomisation is actually taking place,” says Saptarshi Basu, Professor in the Department of Mechanical Engineering and senior author of the study published in Science Advances. “This is a problem not just for COVID-19, but for similar respiratory diseases in the future as well.”

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Website link:
https://www.iisc.ac.in/events/multilayer-masks-most-effective-at-preventing-aerosol-generation/

Phase 3 Clinical Trial of COVAXIN, developed by ICMR & Bharat Biotech, shows 81% efficacy

Phase 3 trial results of the COVAXIN, developed by the Indian Council of Medical Research (ICMR) in partnership with Bharat Biotech International Limited (BBIL), have shown an interim vaccine efficacy of 81% in preventing COVID-19. The Phase 3 trial, jointly initiated by ICMR and BBIL in mid-November 2020, was conducted in a total of 25,800 individuals across 21 sites. The interim efficacy trend of 81%, analysed as per the protocol approved by the DCGI, puts it at par with other global front-runner vaccines.

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IISc develops AI-based software tool for automated diagnosis of COVID-19 lung infection

A new software tool that reveals the severity of lung infections in COVID-19 patients has been developed by researchers from the Departments of Computational and Data Science (CDS) and Instrumentation and Applied Physics at the Indian Institute of Science (IISc), in collaboration with colleagues from the Oslo University Hospital and the University of Agder in Norway.

COVID-19 can cause severe damage to the respiratory systems, especially the lung tissues. Image-based methods such as X-ray or CT scans can prove helpful in determining how bad the infection is.

The software tool developed by the IISc-led team, called AnamNet, can ‘read’ the chest CT scans of COVID-19 patients, and, using a special kind of neural network, estimate how much damage has been caused in the lungs, by searching for specific abnormal features. Such a tool can provide automated assistance to doctors and therefore help in faster diagnosis and better management of COVID-19.

AnamNet employs deep learning and other image processing techniques, which have now become integral to biomedical research and applications. The software can identify infected areas in a chest CT scan with a high degree of accuracy. The researchers trained AnamNet to look for abnormalities and classify areas of the lung scan as either infected or not infected — this is called ‘segmentation’. The tool can judge the severity of the disease by comparing the extent of infected area with healthy area.

The study also compared AnamNet’s performance with other state-of-the-art software tools which perform similar tasks. It not only matched its peers in its accuracy but also performed just as well using fewer parameters. The neural network was also computationally less complex, which allowed the researchers to train it much faster to detect anomalies.

AnamNet holds promise beyond merely identifying lung infections in COVID-19 patients. “We are currently focusing on making our software more robust to handle COVID-19 scans, but we are also looking to diversify to other common lung diseases like pneumonia, fibrosis and even lung cancer in the near future,” Phaneendra Yalavarthy, Associate Professor at CDS says. He suggests that with some changes to the present design, the software could even be used to read brain scans.

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Website link: https://www.iisc.ac.in/events/ai-based-software-tool-for-automated-diagnosis-of-covid-19-lung-infection/
COVID-19: Maharashtra Government teams up with CSIR-IGIB for mutant tracking

The Maharashtra Government has signed a Memorandum of Understanding (MoU) with the Council of Scientific and Industrial Research (CSIR)-Institute of Genomics and Integrative Biology (IGIB) for SARS-CoV-2 genome sequencing. This move is along the lines of the Kerala Government, which had launched a genome sequencing program to study the mutation of the novel coronavirus better and validate the policies implemented to contain its transmission.

Website link: https://www.csir.res.in/sites/default/files/26%20To%2030%20April%202021.pdf

'Delhi Corona App' updated to serve in current crisis

The Delhi government has updated its Corona app, which was launched in early 2020, to help track availability of hospital beds and ventilators for COVID-19 patients, schedule vaccine doses, and more. The updated Delhi Corona app is serving to access e-pass for emergency travelling, booking for vaccination, information regarding beds in Delhi government hospitals, for plasma and many other health-related services.

Website Link: https://library.iitd.ac.in/sites/default/files/2021-04/News%20Clips%2C%20April%201-30%2C%202021.pdf

CSIR-IIP, Dehradun designs oxygen enrichment units that can generate 500 litres per minute

In an effort to provide an inexhaustible supply of oxygen to hospitals, the Council of Scientific and Industrial Research-Indian Institute of Petroleum (CSIR-IIP), Dehradun has developed oxygen enrichment units that can generate up to 500 litres per minute of medical-grade oxygen.

Website link: https://covid19csir.urdip.res.in/control?_nws
A new quicker, Dry Swab RT-PCR COVID test soon: CCMB

The Centre for Cellular and Molecular Biology (CCMB) has licensed dry swab-direct RT-PCR COVID-19 testing method developed by it to Capital Health Services India for commercialization. CCMB Director, Dr Rakesh K Mishra expects the testing method to be available in about a week.

![Figure 1: Dry swab and reagents for carrying out the test in a tube](image1)

![Figure 2: Schematic for dry swab RNA extraction free coronavirus testing](image2)

Website link:
https://covid19csir.urdip.res.in/control?_nws

AFMS to import oxygen generation plants from Germany to tide over current surge in COVID-19 cases

Armed Forces Medical Services (AFMS) has decided to import oxygen generation plants and containers from Germany, amid shortage of oxygen in the hospitals during the second wave of COVID-19 across the country. Twenty-three mobile oxygen generation plants are being airlifted from Germany that will be deployed in AFMS hospitals catering to the COVID-19 patients.

Each plant has a capacity to produce 40 litres of oxygen per minute and 2,400 litres an hour. At this rate, it can cater to 20-25 patients round the clock. The advantage of these plants is that they are easily portable.

Website link:

CSIR-CMERI Oxygen Enrichment Unit – An optimised oxygen administering device amidst the nationwide oxygen shortage

The entire nation is undergoing an unprecedented pandemic situation of COVID-19. Oxygen therapy is recommended for severe illness caused by Coronavirus. There is a massive short supply of medical-grade oxygen across the country. To meet the oxygen demand and minimize the supply chain problem of transportation and storage risks related to oxygen cylinders, CSIR-CMERI has developed ‘Oxygen Enrichment’ technology which has been transferred virtually to M/s. Apollo Computing Laboratories (P) Ltd, Kushaiguda, Hyderabad.
The unit requires easily available oil-free reciprocating compressor, oxygen grade zeolite sieves and pneumatic components. It is capable of delivering medical air in the range of up to 15 LPM with oxygen purity of more than 90%. If required, this unit can even deliver up to 70 LPM at a purity of around 30% and can safely be placed in the isolation ward of the hospital for patients who are in dire need of oxygen. This will help the accessibility of oxygen in remotest places and widest points of need. The Outreach Factor of Oxygen will be multiplied through the adoption of this in-situ and decentralised generation of oxygen.

Mr Jaipal Reddy of M/s Apollo Computing Laboratories during the event of transfer of technology stated that the first prototype would be developed within 10 days and the production would be started from the second week of May. They have presently the manufacturing capacity of 300 units per day which may be augmented on demand. He also informed that their company is planning to develop the unit both as standalone Oxygen Enrichment Unit as well as with integrated version with ‘Swasth Vayu’ technology of CSIR-NAL. Mr Reddy stressed that the unit is essentially required particularly as ‘Mini ICUs’ at small hospitals and isolation centres and at remote villages and places. By use of Oxygen Concentrators, the optimum utilization of oxygen to the needy patients may also be ensured. If this facility is provided to COVID-19 patients at initial stage, their visits to hospitals and further ventilatory support may be avoided in most of the cases. It was also felt that the use of such units is also safe and easier considering the recent risk factors involved with the Oxygen Cylinders. Mr Reddy appreciated the suggestion of Prof. Harish Hirani to conduct an awareness and training programme for use of the OEU through social media for proper guidance and its effective use by all concerned in association with CSIR-CMERI.

Website link:

**DRDO develops SpO\textsubscript{2}-based Supplemental Oxygen Delivery System: A boon in current COVID-19 pandemic**

Defence Research and Development Organisation (DRDO) has developed SpO\textsubscript{2} (Blood Oxygen Saturation) supplemental Oxygen Delivery System for soldiers posted at extreme high-altitude areas. Developed by Defence Bio-Engineering & Electro Medical Laboratory (DEBEL), Bengaluru of DRDO, the system delivers supplemental oxygen based on the SpO\textsubscript{2} levels and...
prevents the person from sinking in to a state of Hypoxia, which is fatal in most cases, if sets in. This automatic system can also prove to be a boon during the current COVID-19 situation.

Hypoxia is a state in which the amount of oxygen reaching the tissues is inadequate to fulfil all the energy requirements of the body. This is exactly the situation that gets replicated in a COVID-19 patient due to the virus infection and has been a leading factor in the current crisis.

The electronic hardware of the system is designed for functioning at extreme altitudes featuring low barometric pressures, low temperatures, and humidity. The software safety checks incorporated into the system are critical in ensuring the functional reliability of the system in field conditions.

The system is a boon in the current pandemic as it can be used in the household for moderate COVID-19 patients for Oxygen flow therapy with flow controlled at 2/5/7/10 lpm flow. The automatic usage has huge advantage in the household, as the oximeter would give an alarm for lower SpO₂ value. It will automatically increase/decrease the O₂ flow based on SpO₂ setting which can be auto adjusted at 2, 5, 7, 10 lpm flow rate. The optimal O₂ flow rate conserves the O₂ resources/O₂ management and greatly increases the endurance.

With its availability and simple-to-use facility by a common person, the system shall greatly reduce the workload and exposure time of doctors and paramedics to monitor the SpO₂ levels of the patient. The automated Calibrated Variable Flow Control for Low O₂ levels (User pre-set, <90%, <80%) through a calibrated Proportional Flow Control Valve (PFCV) will facilitate in economising the oxygen supply (1-10 lpm with ±0.5 lpm). A moderate COVID-19 patient requires O₂ supply 10Litre/150bar–10kg–1500 litres which can sustain up to 750 minutes.

This automated, easy-to-use Oxygen Delivery System now available is a great boon, particularly in these critical times when medical resources are stretched to their limits. Its proliferation would mitigate the crisis in management of such huge number of COVID-19 patients in many ways all across the country.

Website link:

Steel Sector produced 3474 MT of Liquid Medical Oxygen supply in the country

Under the guidance and direction of Union Steel Minister Shri Dharmendra Pradhan, Public Sector Undertakings, under the Ministry of Steel and other private companies in the steel sector
in this hour of need are with the nation and continuing their best to supplement the efforts of the Government in making available Liquid Medical Oxygen.

Total daily Medical Oxygen production capacity of steel plants is 2834 MT. In the steel sector, there are 33 oxygen plants (both with CPSEs and in Private) of which 29 are tapped regularly. As against 2834 MT of daily LMO production capacity in the Steel sector, the production of LMO is 3474 MT as reported on 24 April 2021. This is higher than the LMO production capacity because most units have reduced the production of nitrogen and argon and only producing LMO. With all these efforts, 2894 tonnes were dispatched to different states on 24 April by steel plants in public and private sector as against 1500/1700 Metric Tonnes/day a week earlier.

Steel plants require gaseous oxygen primarily for steel making and for oxygen enrichment in Blast Furnaces, apart from some general purposes like lancing and gas cutting. Hence, Captive Oxygen Plants in integrated steel plants are designed to produce primarily gaseous products of oxygen, nitrogen and argon and then routed through Pressure Reduction & Management System (PRMS) to meet the process need at desired pressure. Such plants can produce 5-6% maximum Liquid Oxygen (LOX) at the peak capacity, which is a highly pure product compared to the industrial oxygen. The plants can only optimize LOX production by sacrificing some gaseous oxygen and optimize process parameters.

In the meantime, all out efforts are being made to enhance the production of liquid oxygen and for dispensing the same for which all oxygen plants whether in private or public are working 24x7 and dispensing oxygen. Steel plants are also filling oxygen cylinders and supplying to the states/hospitals.

Website link:

DRDO setting up 500 Medical Oxygen Plants within three months under PM CARES Fund

The Medical Oxygen Plant (MOP) technology, developed by DRDO for On-Board Oxygen Generation for LCA, Tejas by DEBEL, DRDO will now help in fighting the current crisis of
oxygen for COVID-19 patients. The oxygen plant is designed for a capacity of 1,000 litres per minute (LPM). The system can cater to 190 patients at a flow rate of 5 LPM and charge 195 cylinders per day. Transfer of Technology has been done to M/s Tata Advanced Systems Limited, Bengaluru and M/s Trident Pneumatics Pvt. Ltd., Coimbatore, who will be producing 380 plants for installation across various hospitals in the country. 120 plants of 500 LPM capacity will be produced by industries working with CSIR-Indian Institute of Petroleum, Dehradun.

Oxygen is a very important clinical gas in healthcare centres and hospitals for treatment of COVID-19 patients. Medical Oxygen Plant (MOP) technology is capable of generating oxygen with 93±3% concentration which can be directly supplied to hospital beds or can be used to fill medical oxygen cylinders. It utilizes Pressure Swing Adsorption (PSA) technique and Molecular Sieve (Zeolite) technology to generate oxygen directly from atmospheric air.

The MOP technology will be useful to provide oxygen supply during the COVID-19 pandemic in hospitals in urban and rural areas. Hospitals will be able to generate on-site medical oxygen in a cost-effective manner with this oxygen plant rather than depending upon sourcing it from other places.

Installation of this plant helps in avoiding hospital dependency on scarce oxygen cylinders, especially at high altitude and inaccessible remote areas. MOP has already been installed at some of the Army sites in North East and Leh-Ladakh region. The plant complies with International Standards like ISO 1008, European, US and Indian Pharmacopeia. Site preparation for 5 plants to be installed in Delhi/NCR region has already been initiated.

The DRDO has initiated fabrication of 380 Medical Oxygen Plants with release of Supply Orders for 332 units on M/s Tata Advanced Systems Limited, Bengaluru and 48 units on M/s Trident Pneumatics Pvt. Ltd., Coimbatore with a target of producing 125 plants per month under PM CARES fund. With this it is expected that 500 Medical Oxygen Plants will be installed within three months.

Raksha Mantri Shri Rajnath Singh has appreciated DRDO for using the MOP technology to generate much needed oxygen for COVID-19 patients which will help in overcoming the present crisis. Secretary, Department of Defence R&D and Chairman DRDO Dr G Satheesh Reddy has assured the support of DRDO for use of the technology by hospitals and other health agencies.

Website link:
REACHING OUT TO SOCIETY

Explore CONTAGION-Bengaluru’s online exhibition by DBT-Wellcome Trust India Alliance

CONTAGION is Science Gallery Bengaluru’s online exhibition-season that runs from 30 April 2021 to 13 June 2021. It will explore the infectious nature of not just diseases but emotions, behaviours and information. Through 16 interactive exhibits and more than 40 live programmes audiences are invited to engage with critical questions on contagious phenomena.

The 45-day-long exhibition-season will be hosted entirely online and is freely accessible to everyone across the world. The exhibition-season represents what can happen when experts from across disciplines share and create knowledge about contagion. Equally, the exhibition programmes also bring together experts who critically examine the current experience of living through a pandemic and identify responses for future outbreaks.

Website link:

Indian Railways gears up to provide Covid Care Coaches to State Authorities

Indian Railways is making an all-out effort to supplement the healthcare efforts of Government of India. Total 5601 train coaches were converted as Covid Care Coaches by Indian Railway. Presently, total 3816 coaches are available for the use as Covid Care Coaches. These can be
used for very mild cases that can be clinically assigned to the Covid Care Centers as per guidelines issued by MoHFW. These coaches are being deployed as per demand by State Governments.

Website link:

IAF airlifting oxygen containers, essential medicines, other medical equipment in fight against fresh surge in COVID-19 cases

Indian Air Force (IAF) has swung into action by carrying out sorties from various parts of the country to airlift oxygen containers, cylinders, essential medicines, equipment required for setting up and sustaining COVID hospitals and facilities in the fight against fresh surge in COVID-19 cases. The IAF Transport aircraft and helicopters have been pressed into service for carrying out these tasks.

Website link:

IIT Delhi to set up COVID-19 care facility, with support from doctors staying in campus

The Indian Institute of Technology Delhi (IIT-Delhi) announced that it will set up a COVID-19 care facility for students and staff on its campus, in view of the fact that the city’s medical infrastructure is overburdened by the “unprecedented crisis”. It also sought help from doctors residing on campus to provide consultations.

Website Link:
https://library.iitd.ac.in/sites/default/files/2021-04/News%20Clips%2C%20April%201-30%2C%202021.pdf

IAF airlifts medical equipment to Ladakh to augment COVID-19 testing capacity

In its endeavour to strength the COVID-19 testing facilities at Leh and Kargil in Ladakh Union Territory and promptly acting on the call of Director Health, Ladakh, CSIR-Indian Institute of Integrative Medicine (CSIR-IIIM), Jammu with the help of Air Force, Jammu airtlifted high-end machines to Leh and Kargil to augment the existing COVID-19 testing facilities at both the places.

Since the road link from Jammu to Leh is presently closed, in view of upsurge in the COVID cases and burden on testing, CSIR-IIIM and Indian Air Force have jointly managed to
deliver these equipment at Leh and Kargil which would no doubt increase the daily testing capacities there.

**Website link:**
https://iiim.res.in/machines-for-covid-testing-airlifted-to-ladakh/

IIT Delhi, Michael & Susan Dell Foundation collaborate to support economically weaker students amid COVID-19

IIT Delhi and the Michael & Susan Dell Foundation (MSDF) have come together to bridge the increasing digital divide in education for students from economically weaker backgrounds and support them to complete their education amid the COVID-19 pandemic. It was estimated that a small but significant number of students would find it unaffordable to own required facilities like high-speed internet connection and/or device such as a computer, smartphone, or tablet for the online learning.

To support such economically weaker students, IIT Delhi took initiative to ensure that they have devices like laptop, smartphone, tablet and high-speed internet connection.

**Website Link:**
https://home.iitd.ac.in/news-susan-dell.php

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MyGov developed dashboard for the COVID resources

With the second wave of COVID-19 hitting the nation, MyGov has developed dashboard with support from Sprinklr, so the people who are currently overwhelmed and struggling to find relevant information on what to do and what measures to take if they or someone they know is affected by the virus.

However, since most of the information on the links is being updated real time by dedicated individuals who are doing their best to share knowledge – it is requested to verify the same and in case any information is found to the contrary, the same should be informed to MyGov.


ESIC starts COVID-19 facility dashboard

Ministry of Labour and Employment informed that the Employees’ State Insurance Corporation (ESIC) has started an online dashboard to show the number of beds available at its ESI hospitals.

Website link: https://www.esic.in/Dashboard/CovidDashBoard.aspx
COVID-19 and Mental Health in Older Adults, a source book released by NIMHANS-Bengaluru

The rapid transmission of COVID-19 pandemic outbreak, higher mortality rate, self-isolation, social-distancing and quarantine could exacerbate the risk of mental health problems. NIMHANS released a brochure about COVID-19 and mental health in older adults.

Website link:

CSIR brings out weekly News Bulletin on COVID-19

CSIR-News Bulletin is a monthly Newsletter published by Science Communication and Dissemination Directorate (SCDD), CSIR. The Newsletter consists of various contemporary activities. The monthly e-Newsletter of CSIR News Bulletin also focused on COVID-19 pandemic and efforts towards its mitigation.

Website link:
https://www.csir.res.in/news-bulletin

NIMHANS-Bengaluru releases source book for children and adolescent well-being during COVID-19 for parents and caregivers

Coronavirus disease (COVID-19) can affect children and young people directly and indirectly. Beyond getting sick, many young people’s social, emotional, and mental well-being has been impacted by the pandemic. Trauma faced at this developmental stage can continue to affect them across their lifespan. NIMHANS released a brochure which is about how children and adolescents can maintain their well-being during COVID-19 pandemic.

Website link:
Brochure on mental health of police personnel during COVID-19 released by NIMHANS-Bengaluru

Police personnel was mobilized for a variety of tasks—to monitor check posts, monitor COVID-19 infection hotspots, and ensure lockdown as well as containment. In addition to this, police personnel also carried out a variety of unconventional duties, including creating social awareness, clarifying fake news, daily inspection of people in isolation or quarantine, assisting the health department in contact tracing activities, helping migrant workers to enter shelters, and helping the needy persons to access medical and other essential services.

Therefore, the need of the hour is to pay attention to the psychological wellbeing of the police personnel. NIMHANS released a brochure on mental health of police personnel during COVID-19 in English and Kannada.

Website link:

Press Information Bureau releases daily bulletin on COVID-19

Press Information Bureau (PIB), Government of India released a daily bulletin on COVID-19, starting from early days of COVID-19 outbreak. The bulletin contains press releases concerning COVID-19, issued in last 24 hours, inputs from PIB field offices and fact checks undertaken by PIB. These bulletins are published in 14 languages, namely Hindi, English, Urdu, Marathi, Telugu, Tamil, Punjabi, Bangla, Kannada, Oriya, Gujarati, Assamese, Malayalam and Manipuri.

Website link:
Indian Institute of Technology (IIT) Delhi publishes regular ‘NEWS CLIPS’ covering information related to COVID-19

Indian Institute of Technology (IIT), Delhi published a document named ‘News Clip’ covering all issues that occur in IIT Delhi. It also covers scientific research and efforts on COVID-19 during the month of April. This News Clip document contains information about all startups, joint research projects of IIT-D, COVID-19 care facility, Delhi Corona App, New research on COVID-19, and many more.

Website Link:
https://library.iitd.ac.in/sites/default/files/2021-04/News%20Clips%2C%20April%201-30%2C%202021.pdf

KERNEL – Special COVID-19 research newsletter – published from IISc

The Indian Institute of Science (IISc) is India’s premier destination for science and engineering. Research at IISc spans six divisions and is distinctively interdisciplinary. Kernel was launched as an annual magazine to showcase the Institute's significant research contributions. Kernel - special COVID-19 newsletter was published as a monthly digest in its new avatar, providing snapshots of recent research and initiatives.

Website link:

Government Medical College, Chandigarh develops resource book for post-discharge COVID-19 patients information

Government Medical College, Chandigarh has developed an information book for COVID-19 patients after discharge from the hospital. This book is dedicated to all COVID-19 worryers who defeated the disease. The present book starts from the footstep of the patient just out of the hospital as they board a vehicle for transportation to their home. Then the way the room is to be prepared, where the patient should stay at home, etc. have been explained and the precautions regarding sanitization of the articles in the room, handling of linen, food etc. have been discussed. The importance of continuing all general precautions for prevention and control of the COVID-19 disease and the use and disposal of masks has also been discussed.
Website Link:
COVID 2021
Nation's S&T Efforts Against COVID-19

Vol. - IV | Issue - 2 | 11 May 2021