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John Robbins 832-280-5815
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Publisher: Wea H. Lee
President: Catherine Lee
Editor: John Robbins

Address: 11122 Bellaire Blvd., Houston, TX 77072
E-mail: News@scdaily.com

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Trump says 'unfair' defense treaty with Japan needs to be changed



Japan's Prime Minister Shinzo Abe and U.S. President Donald Trump attend a family photo session in front of Osaka Castle at the G-20 summit, in Osaka, Japan June 28, 2019 Tomohiro Ohsumi/Pool via REUTERS

OSAKA (Reuters) - U.S. President Donald Trump on Saturday said he told Japanese Prime Minister Shinzo Abe that a decades-old security treaty between their countries must be changed, reiterating his criticism of the pact as unfair.

Russia unsure if Japan-U.S. treaty revision will affect islands dispute
Trump said he was not planning to withdraw from the treaty, which the partners have long called a linchpin of Asia-Pacific stability, but that it placed too great a burden on the United States
"I told him, we'll have to change it," Trump told a news conference after a two-day summit of the Group of 20 major economies in Japan's western city of Osaka.

"I said, look, if someone attacks Japan, we go after them and we are in a battle, full force, in effect," he added. "If somebody should attack the United States, they don't have to do that. That's unfair."

The treaty, signed after Japan's surrender in World War Two, commits the United States to defend Japan.

In return, Japan provides military bases that Washington uses to project power deep into Asia, including the biggest concentration of U.S. Marines overseas on Okinawa, and the forward deployment of an aircraft carrier strike group at the Yokosuka naval base near Tokyo.

An end to the security pact is widely seen as raising the risk of forcing Washington to withdraw a major portion of its military forces from Asia at a time when China's military power is growing.



U.S. President Donald Trump talks with Russian President Vladimir Putin during the closing session of G20 leaders summit in Osaka

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Rep. Ocasio-Cortez returns to bartending to promote fair wages

NEW YORK (Reuters) - U.S. Representative Alexandria Ocasio-Cortez took lunch orders, served pizza and rocked the cocktail shaker on Friday to promote increased wages for restaurant servers and other tipped workers.

The New York Democrat and media sensation, who famously worked as a bartender before getting elected to Congress last year, brought first-hand experience to the debate over the proposed "Raise the Wage Act," which would raise the U.S. minimum wage to \$15 an hour and guarantee that minimum for tipped employees.

U.S. law exempts restaurants, nail salons and car washes from paying their tipped staff the minimum wage of \$7.25 per hour, instead creating a "tip credit" of up to \$5.12 per hour that allows them to pay as little as \$2.13 per hour on the books.

"Any job that pays \$2.13 per hour is not a job, it is indentured servitude," Ocasio-Cortez told restaurant workers, customers and reporters at the Queensboro Restaurant in her New York City district, in a reference to the lowest possible wage before tips.

Ocasio-Cortez, 29, stunned New York Democrats a year ago by defeating incumbent Joe Crowley in the primary election, then cruised to victory in November and soared to national prominence as a leading voice of the left wing of the party.

The National Restaurant Association, the industry lobbying group, has opposed the Raise the Wage Act, saying it would harm restaurants that typically rely on margins between 3% and 6%, and that the tip credit allows tipped employees to earn far more than the minimum wage.

Supporters of Raise the Wage Act argue that restaurants are doing just fine in the seven states that mandate tipped employees receive the minimum wage.

Ocasio-Cortez said she worked as a restaurant hostess starting at age 16 and later as part of the wait staff, where she was forced to endure sexual harassment, such as inappropriate comments or touching from customers.

Restaurant servers, who are mostly women, are more able to stand up to abusive customers early in the month when they can "tell that guy to buzz off," but are prone to giving in when the rent is due, Ocasio-Cortez said.



Rep. Alexandria Ocasio-Cortez (D-NY) serves drinks in support of One Fair Wage at The Queensboro restaurant in the Queens borough of New York



Rep. Alexandria Ocasio-Cortez (D-NY) makes a drink in support of One Fair Wage, a policy that would allow tipped workers to receive full minimum wage plus their tips in New York, at The Queensboro restaurant in the Queens borough of New York, U.S., May

2020 截稿日期8/15

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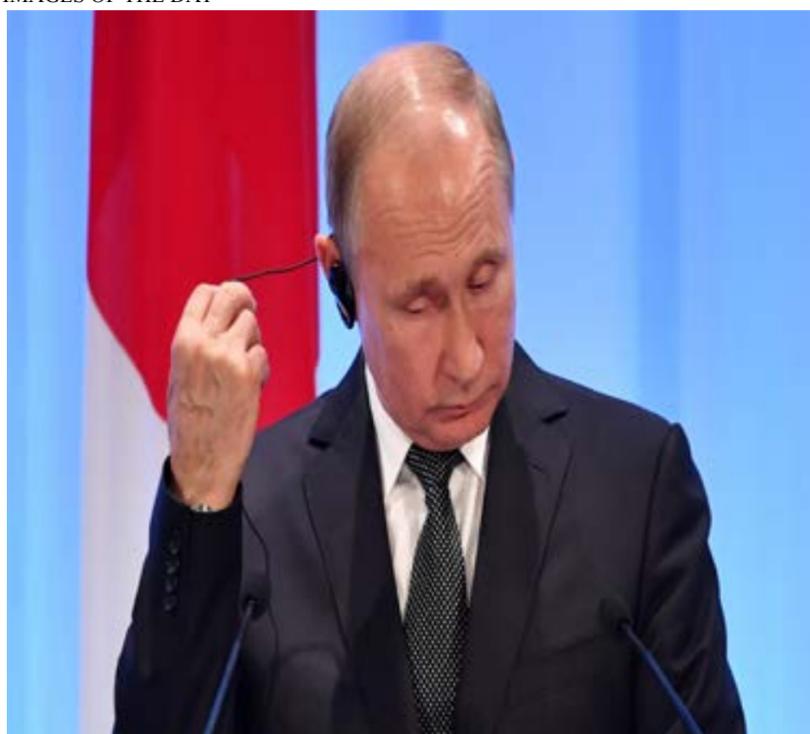
REFILE - QUALITY REPEAT Former HUD Secretary Julian Castro, U.S. Senator Cory Booker and U.S. Senator Elizabeth Warren talk during a break at the first U.S. 2020 presidential election Democratic candidates debate in Miami, Florida, U.S., June 26, 2019. REUTERS/Mike Segar TPX IMAGES OF THE DAY



Japan's Prime Minister Shinzo Abe, U.S. President Donald Trump and France's President Emmanuel Macron gesture together during a meeting at the G20 leaders summit in Osaka, Japan, June 28, 2019. REUTERS/Kevin Lamarque TPX IMAGES OF THE DAY



American Javelin anti-tank missiles, which were confiscated from eastern forces led by Khalifa Haftar in Gharyan, are displayed for the media in Tripoli, Libya June 29, 2019. REUTERS/Is-mail Zitouny



Russia's President Vladimir Putin attends a news conference with Japan's Prime Minister Shinzo Abe after the G20 Summit in Osaka



Russian President Vladimir Putin speaks to the media as he leaves a news conference at the G20 summit in Osaka, Japan, June 29, 2019. Alexander Zemlianichenko/Pool via REUTERS



Russian President Vladimir Putin speaks to the media at the G20 summit in Osaka, Japan, June 29, 2019. Alexander Zemlianichenko/Pool via REUTERS /Sergio Moraes TPX IMAGES OF THE DAY



U.S. President Donald Trump speaks during a news conference in Osaka, Japan, June 29, 2019. Jacquelyn Martin/Pool via REUTERS



Turkey's President Tayyip Erdogan holds a news conference on the final day of the G20 leaders summit in Osaka, Japan June 29, 2019. REUTERS/Jorge Silva

The Number of Overweight People In The U.S. Has Increased Significantly in Recent Years

Obesity Greatly Increases Risk Of Serious Disease And Early Death, Warn Researchers

Being obese is linked to a significantly higher chance of serious disease and early death than being a healthy weight, research on more than 2.8 million adults suggests.

The chance of suffering serious illness goes up with increasing weight gain, experts analysing health, death and sickness data from UK adults found.

How much does the risk increase as your BMI rises?

Presented at the European Congress on Obesity (ECO) in Glasgow, the study found that people with a body mass index (BMI) of 30 to 35 were at 70% higher risk of developing heart failure than their healthy weight peers.

Even a BMI of 25 to 30 increased the risk by 20%, while a BMI of 35 to 40 more than doubled the risk and a BMI of 40 to 45 almost quadrupled the risk compared to people of a normal weight.

The study also found that compared with normal weight individuals, a BMI of 25 to 30 increased the risk of Type 2 diabetes and sleep apnoea by more than double, while a person with a BMI of 30 to 35 was more than five times as likely to develop Type 2 diabetes and almost six times as likely to develop sleep apnoea.

For those with a BMI of 35 to 40, the risk of Type 2 diabetes was almost nine times higher, and 12 times higher for sleep apnoea.

More than 65% of Americans are overweight to obese.



People with severe obesity (BMI of 40 to 45) were 12 times more likely to develop Type 2 diabetes and had a risk of sleep apnoea that was 22 times greater.

The results also showed that increasing weight was linked to higher risk of high blood pressure, irregular heartbeat and dyslipidaemia (abnormal levels of cholesterol and other fats in the blood).



The more obese people are, the higher their risk of serious disease, research finds. Credit: PA

Compiled And Edited By John T. Robbins, Southern Daily Editor

To what degree?

People with a BMI of 40 to 45 had triple the risk of heart failure, high blood pressure, and dyslipidaemia.

This BMI was also linked to a 50% higher risk of dying prematurely from any cause compared to people of a normal weight.

The research found that the risk of developing serious health problems was highly dependent on whether or not people already had issues at the start of the study.

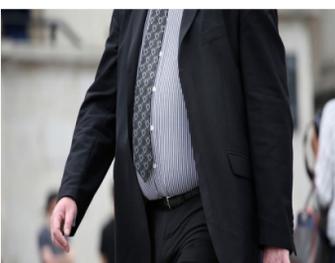
For example, having high blood pressure at the start of the study was strongly associated with developing dyslipidaemia, chronic kidney disease and Type 2 diabetes.

How extensive was the research?

Researchers looked at health, death and BMI data from more than 2.8 million adults between January 2000 and July 2018 from the UK Clinical Practice Research Datalink.

This was linked with hospital data to estimate the risk for serious health problems.

What do the report authors highlight from their work?



Obesity has almost tripled worldwide over the past 30 years. Credit: PA

Author Christiane Haase, from Novo Nordisk in Denmark, which funded the study, said: "The health risks linked with having excess body weight are particularly high for Type 2 diabetes and sleep apnoea.

"With the number of people living with obesity almost tripling worldwide over the past 30 years (105 million people in 1975 to 650 million in 2016), our findings have serious implications for public health."

The research was presented as a poster at the conference and was peer-reviewed by the conference selection committee. Naveed Sattar, professor of metabolic medicine at the University of Glasgow, said: "This study serves to remind us, once again, how damaging obesity is given its strong associations with a range of conditions beyond diabetes and heart disease.

"The obesity links to heart failure are becoming more widely appreciated and links to sleep apnoea, hypertension and abnormal blood fats are well known.

"Like most observational BMI studies using routine health data, there are limitations to this work but I suspect some risks are in fact underestimated.

"The health profession needs to up its game in helping people improve their weight (there are good signs that it is doing so) as it is unlikely that the food environment is going to drastically improve anytime soon."



Who else has reacted to the report findings?

Dr Emily Burns, head of research communications at Diabetes UK, said: "It's important to note the significantly increased risk of Type 2 diabetes suggested by this research – while alarming – was specifically seen in people with a very high BMI of over 40, which only accounts for 2% of men and 5% of women in England.

"That said, we know that being overweight increases your risk of developing Type 2 diabetes.

"Losing weight can be tough, but programmes such as NHS England's Diabetes Prevention Programme are there to help people at high risk, and the Diabetes UK website has ideas for healthy meals, ingredient swaps and tips on getting active too."

Louis Levy, head of nutrition science at Public Health England (PHE), said: "Most countries are facing increasing levels of obesity, putting pressure on both individuals' health and national health and social care systems.

"To reverse what's been decades in the making needs sustained action across the drivers of poor diets and weight gain.

"We're working with industry to make food healthier, we've produced guidance for councils on planning healthier towns and we've delivered campaigns encouraging people to choose healthier food and lead healthier lives." (Courtesy <https://www.itv.com/news>)

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"I am a strong advocate of promoting health and wellness to my patients, especially in the pediatric population. I want to make a difference and have a strong, healthy impact on my patients' lives."

-Jennifer Lai, M.D.

Dr. Lai is a board-certified pediatrician who earned her medical degree from The University of Texas School of Medicine in San Antonio and completed her pediatric internship and residency at The University of Texas Health Science Center at Houston. She is a member of the American Academy of Pediatrics. Her special clinical interests include General Pediatrics, caring for newborns, and managing autism, and childhood obesity. She cares for young patients at Kelsey-Seybold's Spring Medical and Diagnostic Center.

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Drug Resistance Could Kill 10M People Per Year By 2050, Experts Say



(Illustration/S. Grillo/Axios)

Compiled And Edited By John T. Robbins, Southern Daily Editor

Infectious disease experts agree with a dire scenario painted in the UN report posted earlier this week saying that, if nothing changes, antimicrobial resistance (AMR) could be “catastrophic” in its economic and death toll.

Threat level, per the report: By 2030, up to 24 million people could be forced into extreme poverty and annual economic damage could resemble that from the 2008–2009 global financial crisis, if pathogens continue becoming resistant to medications. **By 2050, AMR could kill 10 million people per year, in its worst-case scenario.**

“There is no time to wait. Unless the world acts urgently, antimicrobial resistance will have disastrous impact within a generation.”

— per the report

What they’re saying: Experts tell Axios action must be taken or the scenario will come true.

“Unfortunately, I think if we don’t do anything differently, the estimates are absolutely realistic. ... Like global warming, the longer we delay action, the worse it’s going to get.”

— Amy Mathers, director, The Sink Lab at the University of Virginia

“If global action fails to stem the tide of AMR, a century of medical advancement will be lost, damage to the environment will be irreparable, more people will fall into extreme poverty, [and] global health security will be imperiled.”

— Tarik Jasarevic, spokesperson, World Health Organization

“We are currently losing the arms race against bacteria! ... Soon routine surgeries and treatments for diseases like cancer ... may become life-threatening and too risky to be implemented because of the probability of bacterial infections.”

— Stéphane Mesnage, lecturer, The University of Sheffield



By the numbers: Currently, at least 700,000 people die each year due to drug-resistant diseases, including 230,000 people from multidrug-resistant tuberculosis, per the UN. Common diseases — like respiratory infections, STDs and urinary tract infections — are increasingly untreatable as the pathogens develop resistance to current medications.

•The Centers for Disease Control and Prevention says AMR causes more than 23,000 deaths and 2 million illnesses in the U.S. annually.

•“In India, the CDC estimates that more than 58,000 babies under the age of 1 die every year of a drug-resistant pathogen,” Mathers points out.

What needs to be done: Jasarevic says the economic and health systems of all nations must be considered, and targets made to increase investment in new medicines, diagnostic tools, vaccines and other interventions.

1. The mindset around current antibiotic usage must be altered.

•“We need to think about antibiotics as a shared and finite resource,” Mathers says. Usage to promote animal growth “must be eliminated” and doctors need to stop prescribing medicines “just in case” their patient needs it.

•Pamela Yeh, assistant professor at UCLA, agrees. “An enormous amount of antibiotics — around [roughly] 80% — used in this country [are] used in industrial agriculture. Not to make sick animals healthy, but to make healthier animals grow a little faster. ... There needs to be political will to stop using our few and precious antibiotics in these situations”.

2. Incentives for companies to develop new antibiotics need to be fostered.

•“We need to think of antibiotics (developing and protecting them) as a public good — much like we invest in things like national parks, public libraries, roads, bridges, traffic lights,” Yeh says.

•Mathers says the traditional drug manufacturing process doesn’t work for public companies because investors prefer drugs that need to be taken regularly rather than ones with sporadic usage. She points to the case of Achaogen, a California biotech company that generated buzz when it won one of the few antibiotic approvals in recent years with Zemdri, but was recently forced to file for bankruptcy.



But: Some progress has been made.

•**Some new antibiotics are proving to be life-saving**, Mathers says, pointing to a new type of combination antibiotics that is “saving lives.”

•**Research continues**, such as this study published today in the journal PLOS Pathogens that says they’ve figured out how the superbug *Enterococcus faecalis* is able to cause disease — it modifies a polysaccharide on its cell surface — although they’re

still trying to figure out why the immune system doesn’t recognize it. But, the discovery of this change “will allow the design of novel drugs targeting this process critical for the infection,” study author Mesnage says.

•**Antibiotic use in animal husbandry** is slowly being tackled, although Mathers says “the reworking, cost and investment that will need to take place to overhaul the food chain is really enormous.” Still, the FDA issued a 5-year plan to promote the proper use of antibiotics, and a group of companies and trade groups representing the entire food chain process recently agreed on a shared stewardship framework. **The bottom line:** Action must be taken to avoid a catastrophic future. (Courtesy axios.com)

Related

Growing antibiotic resistance is dire concern, health experts say



Better screening and increased drug research into new antibiotics and antiviral medications are greatly needed to head off what some health experts say could be a future in which there will be no effective medications to fight common infections like gonorrhea, syphilis, E. coli and staph.

Why it matters: Antimicrobial resistance is currently projected to be the number one killer by 2050 — “outpacing even cancer” — according to Amy Mathers, assistant professor at the University of Virginia School of Medicine.

The specter of increasingly drug-resistant diseases made news this week when CDC officials announced America reached a record high of new cases of sexually transmitted diseases. They also warned of increasing signs that one of the most common STDs, gonorrhea, is becoming more resistant to front-line antibiotics.

The threat: This disease has proven to be a “smart bug,” developing resistance to multiple antibodies in the past, Elizabeth

Torrone, who leads surveillance and special studies for CDC’s Division of STD Prevention, tells Axios.

•If left untreated, gonorrhea can cause infertility, miscarriages, chronic pain and blindness in newborns.

•Currently, there’s one last antibiotic (ceftriaxone) that remains effective against the disease.

•It’s often prescribed as a dual therapy, with a single shot of ceftriaxone plus an oral dose of a second antibiotic (azithromycin), in an attempt to preserve the ceftriaxone’s effectiveness, Torrone says.

•CDC officials warned they recently found an uptick in the portion of lab samples showing resistance to azithromycin — from 1% in 2013 to 4% in 2017.



Despite being a small percentage, this is a concern because genes from the resistant strains could crossover with gonorrhea genes and reduce its susceptibility to ceftriaxone, Torrone says.

•In addition, 3 severely resistant cases found outside the U.S. this year are causing alarm.

•The WHO, which has a separate program to monitor this problem, continues to report growing resistance to multiple antibiotics in many countries.

What’s needed is both better diagnostic testing and the development of new antibiotics, Mathers says. She says next-generation sequencing is where testing should head, so that physicians know which specific antibiotic is best to prescribe, instead of having the patient take multiple ones. Plus, she adds, this can help track antibiotic resistance more carefully.

This is a complicated problem,” Mathers says. More antibiotic resistance research is needed not only in people, but also the role resistance plays in other areas like animal husbandry and wastewater. (Courtesy axios.com)

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