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Atlanta police officer charged with murder in shooting death of Rayshard



Former Atlanta Police Department officer Garrett Rolfe, who was fired after the shooting death of 27-year-old Rayshard Brooks, poses in an undated photograph released in Atlanta, Georgia, U.S. June 14, 2020. Atlanta Police Department/Handout via REUTERS

ATLANTA (Reuters) - A fired Atlanta police officer has been charged with felony murder and another officer faces lesser charges in the shooting death last week of Rayshard Brooks in the parking lot of a fast-food restaurant, a Georgia county prosecutor said on Wednesday.

Former Atlanta Police Department officer Garrett Rolfe, who was fired after the shooting death of 27-year-old Rayshard Brooks, poses in an undated photograph released in Atlanta, Georgia, U.S. June 14, 2020. Atlanta Police Department/Handout via REUTERS

The death of the 27-year-old Brooks - another in a long line of African-Americans killed by police - further heightened racial concerns in the United States at a time of national soul-searching over racism and police brutality.

Garrett Rolfe, the white officer who shot Brooks on June 12 and was fired the next day after surveillance video showed his actions, faces 11 charges including felony murder and assault with a deadly weapon, Fulton County District Attorney Paul Howard told a news conference in Atlanta.

Rolfe faces the possibility of life in prison or the death penalty if convicted, Howard added. Felony murder is charge that can be brought when a person kills someone in the course of committing another felony.

Devin Brosnan, another white officer who was on the scene, was charged with aggravated assault and violations of his oath of office, Howard added. Brosnan, who has been placed on administrative leave, will cooperate with

prosecutors, Howard said.

Howard said Rolfe kicked Brooks after shooting him and that Brosnan has admitted standing on the wounded man's shoulders as Brooks was fighting for his life. Howard recommended that the judge hold Rolfe without bond.

Brooks was running away and was more than 18 feet (5.5 meters) away when he was shot twice in the back by Rolfe with a 9mm Glock pistol, Howard said.

"I believe that at the time of the shooting, Mr. Brooks did not represent a threat," Howard said, adding that after the shooting the officers did not immediately render medical aid.

The Atlanta police department's rules do not allow an officer to fire even a taser at someone running away, Howard added.

"So he certainly cannot fire a handgun at someone running away," Howard added.

Brooks did not pose an immediate threat of death to the officers and acted in a calm and "almost jovial" manner and cooperated with the police as the incident initially unfolded, Howard told reporters. Howard said he reviewed eight videos of the incident.

Video of the incident, which escalated from a call about a man who appeared intoxicated in his car at the Wendy's restaurant drive-through lane into a fatal shooting, appeared to show Brooks taking one of the officer's Taser devices and turning and pointing it at Rolfe before being shot.

The killing of Brooks came amid ongoing protests in U.S. cities prompted by the May 25 death of an African-American man named George Floyd after a white Minneapolis police officer knelt on his neck for nearly nine minutes while detaining him. That officer, Derek Chauvin, was charged with second-degree murder. Three other Minneapolis police officers were charged with aiding and abetting.

An autopsy conducted on Sunday showed that Brooks was shot twice in the back and died from blood loss and organ injuries. The local medical examiner's office ruled the death a homicide.

Brooks was reported asleep in a car in the Wendy's drive-through lane, blocking traffic. A restaurant employee called the 911 emergency telephone line, complaining about a man who would not move the vehicle and appeared intoxicated.

After interacting with Rolfe and Brosnan, Brooks tussled with the officers and ran off with one of their Taser devices.

The killing sparked protests in Atlanta. The Wendy's restaurant was burned down in the unrest.

Atlanta Mayor Keisha Bottoms in the aftermath of the killing announced reforms within the police department, including orders requiring officers to de-escalate situations and directing them to intervene if they see a colleague using excessive force. Atlanta's police chief, Erika Shields, resigned following the shooting.



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'No Reason To Be Alarmed'- Governor Texas Sets Records For New COVID-19 cases, Hospitalizations



Texas Gov. Greg Abbott speaks to the press, June 16, 2020.

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

Texas is setting new records for daily COVID-19 cases and hospitalizations on Tuesday as the governor looked to downplay concerns about the latest numbers. There were 2,622 new coronavirus cases and 2,518 patients currently in Texas hospitals, according to the latest data from the Texas Department of State Health Services. Tuesday also marked the sixth straight day of hospitalization increases, and the fifth day of record-setting ones, starting with 2,166 on June 12. At a news briefing on Tuesday, Gov. Greg Abbott said the rising number of hospitalizations "does raise concerns," but that "there is no reason right now to be alarmed." "We are here today to let Texans know about the abundant hospital capacity that exists to treat Texans who may test positive for COVID-19," Abbott said, adding that the state has slowed the spread of COVID-19 "to prevent hospitals from being overrun. That goal has been achieved." Out of the state's 54,844 hospital beds,

there are 14,993, or 27%, beds available, according to the state. There are 1,675 available ICU beds and 5,869 available ventilators statewide, data show.



Currently the state is at "Level 5" in hospital capacity, meaning hospitals can maintain their current capacities without building out, according to Dr. John Zerwas, a University of Texas System official helping with the state's coronavirus response. The state also could still free up more beds by reducing nonessential surgical procedures, Abbott said. "Even though there are more people hospitalized, we still remain at the lowest threat level in our hospital capacity," Abbott said. "We have plenty of room to expand beds. There are thousands of hospital beds that are available as we speak

right now. And then there is the ability to surge even more hospital beds if they were ever to be needed to respond to COVID-19." Texas is one of 20 states to have an increasing number of new reported cases, an ABC News analysis of New York Times data has found. Abbott attributed the state's record number of daily new cases on Tuesday to a bump from an assisted living facility in Collin County and several days' worth of batched data from Hays County. The Republican governor also said that there are several counties where a majority of the cases reported since the beginning of June are people under 30. "This typically results from people going to bar-type settings," Abbott said, pointing to Lubbock, Cameron and Bexar counties in particular. Memorial Day festivities could be to blame, he added.



Hospital workers check temperatures of coworkers at a pedestrian walkway at Dell Seton Medical Center at the University of Texas in Austin, Texas, April 13, 2020.

The state's testing positivity rate, or the ratio of cases to tests, is 6.71% as of Monday. The rate has steadily risen from its lowest point of 4.27% on May 26, but is still lower than the 10% positivity threshold experts say states should aim to stay below. Responding to Abbott's comments on Tuesday, Texas Democrats said combating the pandemic involves more than having sufficient hospital beds. "We have to face reality: managing this crisis goes way beyond knowing how many hospital beds are available," state Rep. Chris Turner, chairman of the Texas House Democratic Caucus, said in a statement. "Our state's positivity rates

are too high and still increasing, and positive cases and hospitalizations continue to rise. And we still have yet to reach the daily testing goals Gov. Abbott set forth nearly two months ago." State Rep. Erin Zwiener, whose district includes Hays County, also said Abbott's comments included "several inaccuracies that minimize the severity of the situation" in the county. "New hospitalizations and the testing positivity rate are also increasing, and Hays County reported that they were behind on paperwork due to high case counts," Zwiener said in a statement. "Case counts in Hays County have increased more than 5 fold in a week." On Tuesday evening, a bipartisan group of mayors in nine Texas cities also sent Abbott a letter urging him to grant them the authority to require face masks as the number of cases goes up. "With the increase in testing, we are naturally seeing more people being diagnosed with COVID-19, and some areas are seeing confirmed cases increasing more rapidly than testing," the letter said. "While it's important to get our economy working again, we must also take precautions to avoid a massive influx of new cases overwhelming our hospitals." The letter noted that masks "could prove



to be the most effective way to prevent the transmission of this disease," yet many people in their cities are not wearing them. "A one-size-fits-all approach is not the best option. We should trust local officials to make informed choices about health policy. And if mayors are given the opportunity to require face coverings, we believe our cities will be ready to help reduce the spread of this disease," the letter said. In response to the letter, Abbott spokes-

man John Wittman told ABC News, "None of these local officials have lifted a finger to impose penalties and enforcement mechanisms currently available to them. The one time a county judge did, a business owner wound up in jail." "A one-size-fits-all approach is not the best option. We should trust local officials to make informed choices about health policy. And if mayors are given the opportunity to require face coverings, we believe our cities will be ready to help reduce the spread of this disease," the letter said. In response to the letter, Abbott spokesman John Wittman told ABC News, "None of these local officials have lifted a finger to impose penalties and enforcement mechanisms currently available to them. The one time a county judge did, a business owner wound up in jail." (Courtesy <https://abcnews.go.com/>)



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WEA LEE'S GLOBAL NOTES

06/17/2020

CORONAVIRUS DIARY

Our Votes Decide The Nation's Future

Vice President Mike Pence has tried to declare that the coronavirus is over amid other actions including President Trump's push to reopen the country by hosting a big rally this weekend in Oklahoma. Despite the White House's attempt to declare the pandemic is over, 28 states still are experiencing significant increases in new cases of the virus. Harvard professor Dr Ashish Jha said we may be done with the pandemic, but the pandemic is not done with us.

In Washington, the White House has already filed a lawsuit to stop a book published by former National Security Advisor John Bolton. In the meantime, the District of Columbia is trying to

become the fifty-first state so that they can get equal treatment as a state.

In Sugar Land, Texas, one Republican candidate has openly attacked China as our enemy and has created a big political blowback blast in the local Asian community. In Fort Bend county, a judge there is of Asian descent.

According to a recent survey, eighty percent of people in the U.S. are feeling that the nation is in turmoil. People in this nation are suffering not only because of the coronavirus pandemic, but also because of the ongoing political unrest. People have lost their jobs, students have to stay home -- all these



family and social issues are making people very unhappy.

We are urging all our voters to think

twice when election time comes. Your vote is so important to make the right decisions for our own future as well as for the future of our nation.



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Publisher Southern Daily Wea H. Lee

Editor's Choice



Merlin Coles 3, watches the horse racing from Royal Ascot on TV at his home, whilst sat on his horse Mr Glitter Sparkles with his dog Mistress, in Bere Regis, Dorset, Britain. REUTERS/Paul Childs



Indian army soldiers carry the body of their colleague, who was killed in a border clash with Chinese troops, to an autopsy center at the Sonam Norboo Memorial Hospital in Leh. REUTERS/Stringer



Police officers detain a protester near the Houses of Parliament, after the departure of Britain's Prime Minister Boris Johnson in London. REUTERS/Hannah McKay



A protest sign is held up in front of the Confederate Monument carved into granite at Stone Mountain Park in Stone Mountain, Georgia. REUTERS/Dustin Chambers



A view of an explosion of a joint liaison office with South Korea in border town Kaesong, North Korea. KCNA via REUTERS



U.S. Senator Cory Booker and Senator Kamala Harris look on during the Senate Judiciary Committee hearing titled "Police Use of Force and Community Relations" in Dirksen Senate Office Building in Washington, D.C. Tom Williams/Pool via REUTERS



Police officers detain an activist from Swadeshi Jagran Manch, a wing of the Hindu nationalist organization Rashtriya Swayamsevak Sangh (RSS), during a protest against China, in New Delhi, India. REUTERS/Anushree Fadnavis



Volunteers work on a 'Black Lives Matter' mural on the street in Brooklyn, New York. REUTERS/Brendan McDermid

Reduces Death Rates Among Patients With Severe Cases

Common Steroid Improves COVID-19 Survival - Study



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

A cheap, readily available steroid drug reduced deaths by a third in patients hospitalized with Covid-19 in a large study, the first time a therapy has been shown to possibly improve the odds of survival with the condition in the sickest patients.

Full data from the study have not been published or subjected to scientific scrutiny. But outside experts on Tuesday immediately embraced the top-line results. The drug, dexamethasone, is widely available and is used to treat conditions including rheumatoid arthritis, asthma, and some cancers.

In a statement, Patrick Vallance, the U.K. government’s chief scientific adviser, called the result “tremendous news” and “a ground-breaking development in our fight against the disease.” Scott Gottlieb, a former commissioner of the U.S. Food and Drug Administration, called it “a very positive finding” in an interview on CNBC. “I think it needs to be validated, but it certainly suggests that this could be beneficial in

this setting.”

Related

Atul Gawande, the surgeon, writer and public health researcher, urged caution, tweeting, “after all the retractions and walk backs, it is unacceptable to tout study results by press release without releasing the paper.”



The study randomly assigned 2,104 patients to receive six milligrams of dexamethasone once a day, by mouth or intravenous injection. These were compared to 4,321 patients assigned to receive usual care alone.

In patients who needed to be on a ventilator, dexamethasone reduced the death rate by 35%, meaning that doctors would prevent one death by treating eight ventilated patients. In those who

needed oxygen but were not ventilated, the death rate was reduced 20%, meaning doctors would need to treat 25 patients to save one life. Both results were statistically significant.

There was no benefit in patients who didn’t require any oxygen. The researchers running the study, called RECOVERY, decided to stop enrolling patients on dexamethasone on June 8 because they believed they had enough data to get a clear result.

“Dexamethasone is the first drug to be shown to improve survival in COVID-19,” Peter Horby, one of the lead investigators of the study and a professor in the Nuffield Department of Medicine at the University of Oxford, said in a statement. He added that the drug should now become the standard treatment for patients with Covid-19 who need oxygen. “Dexamethasone is inexpensive, on the shelf, and can be used immediately to save lives worldwide.”



APSTOCK

A different arm of the same study showed on June 5 that hydroxychloroquine, widely touted as a potential Covid treatment, had no benefit in hospitalized patients. Yesterday, based in part on those results, the Food and Drug Administration revoked an Emergency Use Authorization for using hydroxychloroquine in those patients.

From the start of the pandemic in March, researchers have focused on two different stages of Covid-19, which will likely require very different interventions. Some drugs are designed to

directly combat the novel coronavirus, SARS-CoV-2, that causes the disease. The first medicine shown to have a benefit, remdesivir from the biotech firm Gilead Sciences, falls into this category, even though, because it must be given intravenously, it has been tested in hospitalized patients. Remdesivir shortens the course of infection, but has not been shown to save lives.

After patients have become profoundly sick, the problem starts to become not only the virus but their own immune system, which attacks the lungs, a condition called acute respiratory distress syndrome, or ARDS. For these patients, doctors have believed, they would need to dampen patients’ immune response even as they fought the virus.



Initially, excitement in this area fell on new and expensive drugs, such as Actemra, a rheumatoid arthritis drug from Roche that is used to treat a similar condition caused by some cancer immunotherapies. But a study in patients who needed oxygen showed no benefit from a similar drug, although another arm in sicker patients is continuing. The National Institutes of Health is conducting a study of an Eli Lilly pill targeting rheumatoid arthritis, an extension of the study that showed remdesivir has a benefit.

Dexamethasone, which reached the market 59 years ago, seemed an unlikely candidate to help these patients; it was seen as too crude a way of tamping down the immune system. In guidelines for physicians treating the disease, the NIH doesn’t even mention the therapy. Studies that are testing other medicines may now need to incorporate the use of the drug, which could complicate analyzing the results. A spokesperson for Regeneron, which is testing Covid-19

drugs focused on both attacking the virus and dampening the immune system, said the company’s studies are written so that when a new medicine becomes the standard of care, it becomes available to patients in the trial.




Some studies have shown a benefit for using dexamethasone in acute respiratory distress syndrome not related to Covid-19, although the benefit was smaller than in RECOVERY.

The result, should it hold up to further scrutiny, shows the benefit of the strategy of Horby and Martin Landray, the Oxford researchers who designed the study, leveraging the U.K. health system to start a study of multiple inexpensive potential Covid-19 therapies — including hydroxychloroquine, dexamethasone, and also some older HIV medicines. Several months into the Covid-19 pandemic, two of the most important results come from this single study. Neither of those results, however, have been scrutinized or published. (Courtesy stastnews.com)




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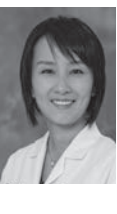
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