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Trump pushes anti-immigrant message even as coronavirus dominates campaign



FILE PHOTO: U.S. President Donald Trump waves as he tours a section of new U.S.-Mexico border wall built in San Luis, Arizona, U.S., June 23, 2020. REUTERS/Carlos Barria

WASHINGTON/NEW YORK (Reuters) - U.S. President Donald Trump is powering ahead with his anti-immigration agenda, even as voters say they are more concerned with the coronavirus pandemic and the economic destruction it has wrought.

The Republican president won the White House in large part due to his hard-line stance on immigration, a bedrock issue that animates his base. His administration has maintained that focus despite intense pressure to respond to the world's worst coronavirus outbreak and nationwide protests against police brutality and racism that have fueled a summer of discontent.

Trump has amplified new issues this election cycle, including law and order in the wake of the protests, and unsubstantiated claims that a surge of mail voting due to coronavirus concerns will lead to widespread fraud. Still, he has instituted sweeping new immigration policies during the pandemic and made it a campaign advertising priority on Facebook.

Recent policy changes include broad shutdowns of America's legal immigration system, such as blocking the entry of a range of temporary foreign workers and some applicants for permanent residence. With Trump trailing in the polls, the White House is preparing further restrictions in the run-up to the Nov. 3 election, according to Stephen Miller, the architect of Trump's immigration agenda.

In an interview with Reuters, Miller said Trump's tough stance will contrast with that of his Democratic challenger Joe Biden. Permissive immigration policies, Miller claimed, will prove a "massive political vulnerability" in the coming election.

In a new television ad that launched on Tuesday in the early-voting battleground states of Arizona, Florida, Georgia, North Carolina and Wisconsin, the Trump campaign warned that Biden's support for legalizing millions of immigrants living in the country illegally would subject American workers to more competition in a dismal job market.

The strategy has baffled some Republican strategists, who say the election will be decided mainly on bread and butter issues. Trump's sagging fortunes are bound to the U.S. failure to tackle coronavirus, which has killed more Americans than World War One and caused the U.S. economy to contract at its steepest pace since the Great Depression.

Trump's use of immigration to energize his core supporters and shift the conversation away from the crises facing the country could alienate swing voters, according to Alex Conant, a Republican strategist.

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"If he's not talking about the pandemic or the economy, he is not talking about what Americans are most concerned about,"

Conant said.

In an analysis conducted for Reuters, the Migration Policy Institute, a Washington-based think tank, said that before the pandemic, the administration was making immigration policy changes at a rate of about one every three days.

During the pandemic, this has increased to about one every two days, a tally that includes both significant changes to the immigration system and logistical moves, such as temporarily closing offices that process immigration applications.

"You would expect it to take a back seat to the massive public health and economic crises under COVID," said Sarah Pierce, a policy analyst at the institute. "Instead the administration has been just as active on immigration as ever."

ANTI-IMMIGRATION ADS

White House and Trump campaign officials say they're confident the president's tough immigration stance is a winner. More actions are likely before the election, including finalized rules that would greatly limit access to asylum, and measures to help protect U.S. workers from competition with skilled foreigners entering the country on H-1B visas.

Those moves could sway some voters if they are framed around the pandemic and economic recovery, according to a new Reuters/Ipsos poll conducted July 31 to Aug. 4.



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CORONAVIRUS DIARY

Kamala Harris Officially On Biden Team

Senator Kamala Harris has officially teamed up with Vice President Joe Biden to run in the 2020 presidential election. This represents that in our great nation, every citizen and race has the opportunity to lead this country.

Harris was born and raised in Oakland, California. Her father was an immigrant from Jamaica and her mother was from India. Both of them like most of us came to America to seek a better education and a better life. Harris represents the immigrant family and the spirit of hard work and good education and a don't complain and never give up attitude. Even when she was at an early age, a

lot of kids still discriminated against her and her sister because of their strong and hard work attitude. But this also led her to become an attorney and took her all the way to the U.S. Senate. Her story has really become a model for all American immigrants.

Whether the Biden-Harris ticket can win or not is still an unanswered question for Biden. But because Harris has partnered with him it definitely was the best choice.

Because the coronavirus pandemic has already attacked our community for over half of the year, a lot of young kids have gone back to school with great risks.



People don't have full confidence with the new Russia vaccine. The American death total is now way over 160,000. This is a national tragedy for all of us.

We as ordinary citizens really don't know what to say or what to do. We all hope that the 2020 election will bring us new hope.



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BUSINESS

Wear Mask!

Herd Immunity Is Not An Answer Without A Vaccine, Researchers Say, Herd Immunity Cannot Be Achieved



A man wearing a protective mask walks next to travelers as they line up to board a boat in Stockholm, Sweden. (Jonathan Nackstrand/AFP via Getty Images)

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

As the coronavirus continues to spread rapidly throughout the U.S. and beyond, many are wondering: How on earth will this end? In an interview televised this week, President Trump reiterated his belief that sooner or later the virus will burn itself out. "I will be right eventually," the president told Fox News host Chris Wallace. "It's going to disappear, and I'll be right." But scientists are increasingly of the view that this virus will not disappear. In interviews and correspondence with more than a dozen researchers around the world, NPR found that the vast majority believes the virus will persist at some level for a long time in places like the U.S. and Europe. And until there is an effective vaccine in widespread use, levels of immunity will never be high enough to achieve what's called herd immunity, these researchers say. That's the tipping point at which the disease begins to burn itself out because so many people are immune that it can't continue to spread. These scientists' view that the virus will persist is based on growing evidence that immunity may not be as straightforward as first assumed and that the virus is spreading relatively slowly, while continuing to sicken and kill. A vaccine could still prevent the illness or reduce its severity, but it's likely even that won't wipe COVID-19 from the globe. "I think it's going to be with us probably forever at this point," says Devi Sridhar, a professor of global public

health at the University of Edinburgh. "It's going to be with us, and it's how we decide to live with it."

The "take it on the chin" approach

The idea of herd immunity has been around for decades. In the past, it has been used to describe an effect seen with vaccination — if vaccination rates for measles are high, for example, a single case cannot spread far into a community. The "herd" of people is protected even when not everyone has received the vaccine. But with the outbreak of the coronavirus, the idea of natural herd immunity took hold in some circles.



Public health officials advise social distancing strategies and masks, in part because the latest evidence suggests that catching the coronavirus, even if you're young, is risky business. A significant portion of COVID-19 survivors suffer fatigue, blood clots, fevers and other symptoms for weeks and months after clearing the infection. Josh Edelson/AFP via Getty Images

The theory, broadly speaking, is that should enough people become ill and then immune, the entire popu-

lation will be protected. Estimates vary widely, but it's generally thought that somewhere between 50% and 80% of a given population would need to have been infected by the coronavirus before such natural herd immunity could be achieved. Herd immunity holds appeal in part because it does not require radical action such as social distancing.

"If the thing that is most important to you is not disrupting the economy, is not shuttering small businesses, is not causing economic instability so that people cannot eat — that is the solution you are going to glom onto," says Jeffrey Shaman, a professor of environmental health sciences at Columbia University in New York City. It was for those reasons that the conservative U.K. government toyed with the idea of herd immunity back in March, Sridhar says. Scientific advisers thought it would be futile to try to stop the coronavirus. Instead, some suggested trying to slow infections just enough to avoid overloading hospitals, while allowing the virus to spread through the population. It was the "take it on the chin" approach, as described by Prime Minister Boris Johnson. Sridhar says the U.K.'s pandemic scientific advisory group back then was working from a playbook based on the flu. But COVID-19 is not the flu, and calculations showed that pursuing herd immunity would cause many thousands of deaths. The government hastily abandoned the strategy almost as soon as it had been floated.



Sweden has not closed bars and restaurants during the pandemic. The result has been more cases of coronavirus infection. But far fewer people are immune than would be needed for Sweden to achieve herd immunity. Martin von Krogh/Getty Images

Sweden's experience Across the North Sea, however, Sweden continued to pursue an approach with the potential to achieve herd immunity — though the government never stated it as a goal. Swedish authorities recommended taking precautions at an individual level and banned gatherings of more than 50 people, but the nation stopped short of ordering restaurants and bars closed. In April, the Swedish ambassador boasted that Stockholm might achieve herd immunity by the end of May. That never happened, Sridhar says. "Sweden is stuck at 6% for months now," she says, in reference to the percentage of residents who have antibodies to the

coronavirus. Meanwhile, the country has suffered economic devastation and far higher death rates than its Nordic neighbors.

The main reason herd immunity hasn't been achieved, she suspects, is that to get there, many millions of Swedes would have to catch COVID-19. That could happen in the abstract, but in reality, most individuals deliberately try their hardest to avoid contracting the disease. "Nobody wants to be part of the herd," she says. Sweden is hardly alone. In many countries, blood tests for antibodies — a sign somebody has been infected with the coronavirus — find that the percentage of the population that tests positive for this indicator of immunity is in the single digits. "The example I like to think about is South Korea, which has 50 cases [of new infection] per day right now. If they were to hold on for another thousand days, which is three years, they would have 50,000 cases, which is 0.1% of their population," says Shaman.

U.S. health care system would buckle

Even in the U.S., at 60,000 cases per day, it would take at least until 2021 — and possibly years of filled hospitals and morgues — before the requisite hundreds of millions of Americans were infected.



"I think if you were to just let this process occur, it's very difficult to project the number of deaths, but I think we're certainly talking north of a million, probably much more," says Dr. Joshua Schiffer, an associate professor in the Vaccine and Infectious Disease Division at the Fred Hutchinson Cancer Research Center in Seattle. As a practical matter, the U.S. health care system would buckle while trying to care for that many sick people, says Dr. Nahid Bhadelia, who directs the Special Pathogens Unit at Boston Medical Center. "It's unlikely we can achieve natural herd immunity without completely using up physical and human resources," she tells NPR.

Questions remain about waning immunity and reinfection

But recent evidence suggests there is yet another reason immunity levels may not be rising beyond a few percent — the protective immunity an individual gains after becoming infected with the coronavirus may fade with time. An antibody test for the coronavirus can indicate whether someone has been infected, but it's just

one measure of immunity, researchers say. How robust that immunity is and how long it lasts are still open questions. Simon Dawson/AP

Two studies now show that coronavirus antibodies, a key aspect of a person's immune response, can disappear over a matter of months. The results are hardly conclusive, and to date there has been no scientific proof of reinfections, but they have precedent. Shaman says studies that his group has conducted of other common coronaviruses show they can reinfect people. By tracking infected New Yorkers, Shaman was able to show, for example, that coronaviruses that cause the common cold sometimes reinfect the study's participants more than once.



"Some of them were four to eight weeks separated — that's rapid, and that might have been a relapse [of the same infection]," he says. "But others we know are different — they were eight to 11 months apart." The coronavirus that causes COVID-19 hasn't been around long enough in most places to cause reinfections, but that may change this fall and winter.

"If it's like other coronaviruses ... we're going to start to see some of those reinfections in the next six to 12 months" says Greta Bauer, an epidemiologist at Western University in Ontario.

Antibodies are not the only way the immune system fights a disease like COVID-19, and it may be that other types of immune cells ramp up to quickly fight off infection. But if people can be mildly reinfected, then herd immunity simply would not work." (Courtesy https://www.npr.org/)

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Editor's Choice



The frame of a car stands burned as a fast-moving wildfire, called the Lake Fire, burns in a mountainous area of Angeles National Forest north of Los Angeles, California. REUTERS/Patrick T. Fallon



Democratic U.S. vice presidential candidate Kamala Harris is seated in front of a chart tracking reported coronavirus cases as she participates in a briefing on the pandemic with public health officials during a campaign stop in Wilmington, Delaware. REUTERS/Carlos Barria



Palestinians burn cutouts depicting U.S. President Donald Trump and Abu Dhabi Crown Prince Mohammed bin Zayed al-Nahyan and Israeli Prime Minister Benjamin Netanyahu during a protest against the United Arab Emirates' deal with Israel to normalize relations, in Nablus in the Israeli-occupied West Bank. REUTERS/Raneen Sawafta



A smiley face is seen carved into the head of a sunflower in a field in Dunham Massey, Britain. REUTERS/Phil Noble



A section of the bulk carrier ship MV Wakashio, belonging to a Japanese company but Panamanian-flagged, ran aground on a reef, is pictured at the Riviere des Creoles. REUTERS/Reuben Pillay



A view shows damage to a building and cars in the aftermath of a massive explosion at the port of Beirut, Lebanon. REUTERS/Hannah McKay



U.S. President Donald Trump arrives to address a briefing on the coronavirus pandemic at the White House in Washington. REUTERS/Kevin Lamarque



A health worker in personal protective equipment (PPE) collects a sample using a swab from a person at a local health centre to conduct tests for the coronavirus in the old quarters of Delhi, India. REUTERS/Adnan Abidi

THREE THERAPIES FOR COVID-19 THAT WORK

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

#1 BCG Vaccine, Commonly Used For TB, May Ease COVID-19 Symptoms



The new flu strain is similar to the swine flu that spread globally in 2009

NIJMEGEN, Netherlands — As nations race to develop a vaccine for COVID-19, a treatment for tuberculosis may provide a vital stopgap for millions. A new study finds the Bacille Calmette-Guerin (BCG) vaccine not only stimulates the immune system, but vaccinated patients are also seeing fewer symptoms of the coronavirus. A team from Radboud University Medical Center says it has actually been testing BCG since 2017. At the time, researchers were seeing how the vaccine affects the human immune system. Now that COVID-19 is sweeping the globe, they're finding study participants are staying healthier during the pandemic. The study reports participants in the Netherlands who received the BCG vaccine are not getting sick more often or becoming seriously ill during the country's COVID-19 outbreak. Researchers add there was a lower number of sick people between March and May 2020 among BCG-vaccinated patients. Those subjects are also reporting fewer cases of extreme fatigue.

What is BCG? Bacille Calmette-Guerin is the most widely administered vaccination in the world. Originally created to fight tuberculosis, study authors say the drug was found to also provide a long-term boost to immune health. The vaccine is now considered an effective treatment against other condi-

tions. Due to BCG's reputation for providing "trained immunity," the Radboud team isn't surprised vaccinated people are seeing better health in 2020.

Can it beat COVID-19 or is this just coincidence?

The study cautions that the results don't prove the BCG vaccine can fully protect the public from coronavirus. Researchers say more studies need to be done on how BCG interacts with COVID-19. "It is very important to confirm that someone who has been vaccinated with BCG does not experience any increased symptoms during the COVID-19 pandemic," says Professor Mihai Netea in a media release. "Although we see less sickness in the people who have had the BCG vaccination, only the ongoing prospective BCG vaccination studies can determine whether this vaccination can help against COVID-19." This study appeared in Cell Reports Medicine.

#2

Alcoholism Drug Disulfiram Shows Good Potential As COVID-19 Treatment

MOSCOW — The drug disulfiram is a common treatment for alcoholism due to its ability to produce a number of unpleasant effects after drinking. From headaches, to nausea, to sweating, it works by essentially causing an immediate hangover. Now, Russian chemists suggest that disulfiram may also be useful in treating COVID-19. Researchers in Moscow say molecular modeling is focusing on identifying structural components in SARS-CoV-2, the virus responsible for COVID-19. The work is looking for areas that can be targeted to slow down or stop virus from replicating. The study reveals that disulfiram and another drug, neratinib, have a special ability to lock on and possibly deactivate SARS-CoV-2.

Finding COVID-19's weak spot The Russian team also focuses on SARS-CoV-2 components that are resistant to mutation. Mutation resistance is important in antiviral drug development because

viruses commonly adapt to antibiotics. If an antiviral drug targets a viral component that is prone to mutation, then the drug may not work once the virus mutates. A key SARS-CoV-2 enzyme called M pro plays a pivotal role in controlling viral replication and is also mutation resistant. This makes it an excellent candidate target for COVID-19 drugs. However, blocking M pro is not easy.



(© luckybusiness - stock.adobe.com)

In many cases, antiviral drugs bind or "dock" to specific components of a virus known as "active sites." Researchers say normal docking doesn't work for SARS-CoV-2. To resolve this dilemma, the chemists used a technique they developed shortly before the pandemic began, known as "on-top docking." "We decided not to focus on the previously described active site, but to investigate the whole surface of M pro protein with many medications, hoping that the big calculation powers would return useful 'dockings,'" says HSE University's Igor Svitancko in a media release.

Disulfiram shows strongest potential Using their model of SARS-CoV-2, the researchers were able to screen a huge database of FDA-approved medications to see which ones might be able to dock to M pro and deactivate it. Their search reveals sulfur-containing drugs, such as disulfiram, are able to lock on to the active site of M pro very well. The team adds that neratinib, an experimental breast cancer drug, shows the same ability. Once the two drugs were identified, scientists Reaction Biology Corp. in the United States set to work validating the modeling data. These experiments demonstrate that disulfiram successfully inhibits M pro. Although the experiments find that neratinib also acts on M pro, its impact is not strong enough for it to have any clinical potential. In the future, the research team plans to use their molecular modeling approach to iden-

tify potential treatments for other diseases. (Courtesy studyfinds.org) The study was published in the journal Mendelevy Communications.

#3

Repurposed Drug Shows Promise For Treating COVID-19 Inflammation

Yale clinicians report promising results after treating COVID-19 patients at Yale New Haven Hospital (YNHH) with a drug that reduces hyperinflammation in cancer patients undergoing immunotherapy. The team initially gave the drug, tocilizumab, to the most severely ill COVID-19 patients — specifically, those experiencing a dangerous immune response known as a "cytokine storm" — and it appeared to improve survival rates, especially among patients requiring mechanical ventilation. Encouraged, the clinicians began administering the drug to less severely ill COVID-19 patients, with the aim of helping them avoid the need for ventilation. Although the hospital saw a surge in COVID-19 patients during the study period (from March 10 to April 21), there was no parallel surge in ventilator use, suggesting the drug was effective in managing dangerous inflammation associated with the disease, they said. The clinician-researchers report their results in the June 15 edition of the journal Chest.



"Because this was not a randomized control trial, we can't say that patients who were treated with tocilizumab had a survival advantage," said lead author Dr. Christina Price, assistant professor of medicine (immunology), "but compared to other published data on survival and mechanical ventilator outcomes, [patients at Yale] seem to be doing better." The hyperinflammation that happens in some cancer patients as a result of T-cell immunotherapy resembles the "cytokine

storm" in COVID-19, Price said. During the "cytokine storm," or Cytokine Release Syndrome (CRS) the body's immune system overreacts, and immune cells and fluid flood into the lungs, Price said. This condition leads to respiratory failure and death in the most severely ill patients. The researchers hypothesized that tocilizumab could suppress CRS to reduce life-threatening inflammation and prevent patients from needing mechanical ventilation. "We chose this drug for biologic reasons," said Price. "The combination of reports from small clinical series from other countries suggested that tocilizumab might treat severe inflammatory responses in COVID-19 patients. Our expertise with its use at Yale and with the evolving use of biologics for immune dysregulation plus the drug's availability guided this decision." (Courtesy news.yale.edu)



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