WEA LEE'S GLOBAL NOTES

09/24/2020 CORONAVIRUS DIARY

There Will Be An End To COVID-19

Dr. Anthony Fauci told a group of CEOs that COVID–19 can be removed as a public health threat with good, widely administered vaccines and strong public health measures, and a degree of normality might return by the end of 2021.

Dr. Fauci told the Wall Street Journal there will be an end to this and we will be able to get back to normal. Many business leaders are concerned about how long the new coronavirus, which has caused more than 29 million cases and 938,000 deaths, will continue to spread and whether it can be beaten back eventually as a public health threat.

Most health experts believe this will depend on how effective the vaccines that are currently in development or testing prove to be and how many people get them.

The fundamental goal is to get the infection rate so low that we can easily control it.

This is good news for all of us. We believe these outstanding researchers can make good vaccines to come to the rescue of the world.

Southern News Group Chairman / CEO
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Publisher Southern Daily Wea H. Lee

Stay Home! **BUSINESS** *Wear Mask!*

Getting A Flu Shot This Year Is More Critical Than Ever. Why? COVID-19

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

With the coronavirus still spreading widely, it's time to start thinking seriously about influenza, which typically spreads in fall and winter. A major flu outbreak would not only overwhelm hospitals this fall and winter, but also likely overwhelm a person who might contract both at once.

Doctors have no way of knowing yet what the effect of a dual diagnosis might be on a person's body, but they do know the havoc that the flu alone can do to a person's body. And doctors are learning more each day about the serious effects of COVID-19. Public health officials in the U.S. are therefore urging people to get the flu vaccine as soon as possible.

Flu cases are expected to start increasing early in October and could last late into May. This makes September and early October the ideal time to get your flu shot.

But there's reason to be concerned that flu vaccination rates could be lower this year than in past years, even though the risk of getting seriously ill may be higher because of widespread circulation of the coronavirus.

In an effort to avoid getting sick, millions of Americans avoided seeing their health care provider the past few months. Social distancing and stay-at-home orders have resulted in a decreased use of routine medical preventive services such as vaccinations. Many employers that often provide the flu shot at no cost to employees are allowing employees to work from home, potentially limiting the number of people who will get the flu shot at their jobs.

As a health care professional, I urge everyone to get the flu vaccine in September. Please do not wait for flu cases to start to peak. The flu vaccine takes up to two weeks to reach peak effectiveness, so getting the vaccine in September will help provide the best protection as the flu increases in October and later in the season.

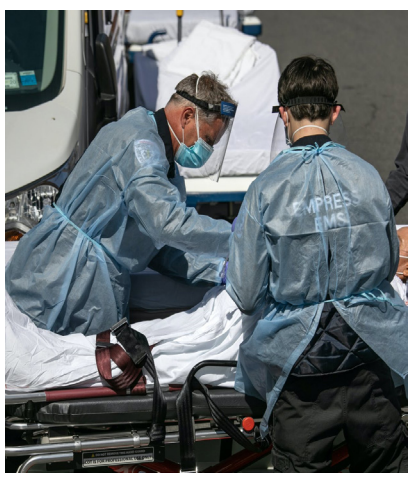
CDC Director Robert Redfield discusses the importance of flu vaccination this year.

A lifesaver in previous years, but more so now

Both COVID-19 and the flu are contagious respiratory illness that present with similar symptoms. Both viruses can impact the elderly and those with certain chronic conditions, such as heart and lung disease, the hardest.

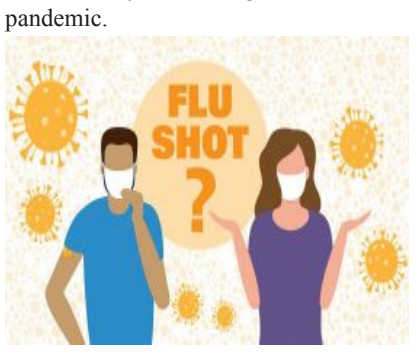
Data on flu vaccination rates from 2018-2019 show that only 49% of Americans six months of age and older received the flu vaccine. The vaccine's effectiveness varies each season, with early data from the 2019-2020 flu season indicating a vaccine effectiveness rate of 50% overall, and 55% in youth.

While some may think this effectiveness rate is low, the flu vaccine remains the single best way to prevent the flu and related complications. For example, during the 2018-2019 flu season, flu vaccination was estimated to prevent 4.4 million flu illnesses, 58,000 flu hospitalizations and 3,500 deaths. Early data from the 2019-2020 flu season estimates there were 39-56 million flu illnesses, 18-26 million flu-related medical visits, 410-740,000 hospitalizations and up to 62,000 deaths. Much of this disease burden is preventable from higher flu vaccination rates.



It is now quite apparent that COVID-19 will still be circulating during flu season, which makes getting a flu vaccine more important than ever. As schools, our communities and our economy continue to reopen, it is vital to get the flu vaccine for personal, family and community protection.

Severe cases of both COVID-19 and the flu require the same lifesaving medical equipment. This highlights the importance of getting the flu vaccine for not only your own personal health but also the health of your community. Receiving the flu vaccine will help reduce the burden of respiratory illness on our already very overstretched health care system. By increasing flu vaccination rates, we can reduce the overall impact of respiratory illnesses on the population and hence lower the resulting burden on the health care system during the COVID-19 pandemic.



Because flu vaccination protects against one of these respiratory illnesses, the CDC recommends everyone (with few exceptions) six months of age and older get an annual flu vaccine. While the flu vaccine will not protect you against COVID-19, the flu vaccine will reduce your risk of developing the flu as well as reduce your risks of flu-related complications including hospitalization and even death.

While it may seem like there is so much out of our control during this pandemic, getting the flu vaccine, practicing proper hand washing, social distancing and wearing face coverings are within our control and will protect not only you but also your family and community.

If you are not getting the flu vaccine from your employer, think about alternative sources now. Vaccines should be available now in most areas.

- Call you doctor's office to ask how you can get a flu shot.
- Call your local public health department.
- Consider getting a vaccine while you are grocery shopping or picking up prescriptions.

Get your flu shot this year. Now more than ever!

Mainly, make sure you take advantage of this potentially lifesaving vaccine. Get it on your calendar as soon as you can. And remember, the flu shot cannot give you the flu. (Courtesy https://theconversation.com/)

Southern DAILY Make Today Different

Editor's Choice

A burning trash can is seen as protesters clash with police in Louisville, Kentucky. REUTERS/Bryan Woolston

Louisville Police fire a pepper ball gun into a crowd during a protest after a decision in the case against police officers involved in the death of Breonna Taylor, in Louisville, Kentucky. REUTERS/Lawrence Bryant

Firefighters work at the site of the Bobcat Fire burning near Mount Wilson in the Angeles National Forest, near Los Angeles. REUTERS/Mario Anzuoni

Environmental activist and campaigner Mya-Rose Craig, 18, holds a cardboard sign reading "youth strike for climate" as she sits on an ice floe in the middle of the Arctic Ocean, hundreds of miles above the Arctic Circle. REUTERS/Natalie Thomas

Maria Arevalo, left, and her husband Antonio Silva search for items to salvage in the remains of their burned home, in a largely Latino neighborhood, that was destroyed by a wildfire that came through the area in Phoenix, Oregon. REUTERS/Jim...

A woman sits outside Cafe Du Soliel under bubble tents in Manhattan, New York City. REUTERS/Jeenah Moon

A woman touches hands of a child through a fence at a new temporary camp for migrants and refugees, on the island of Lesbos, Greece. REUTERS/Yara Nardi

White House pandemic adviser Scott Atlas (L) and White House press secretary Kayleigh McEnany (2nd L) speak as President Trump arrives for a news conference in the Brady Press Briefing Room at the White House. REUTERS/Tom Brenner

Southern DAILY Make Today Different

COMMUNITY

Experimental Cancer Drug Stops SARS-CoV-2, Other Viruses From Infecting Cells

(kasto - stock.adobe.com) Photo/Coronavirus, Drugs, Health & Medical)

KEY POINT

Researchers say drug not only helps protect against coronavirus, but also influenza, HIV, measles, and other viruses.

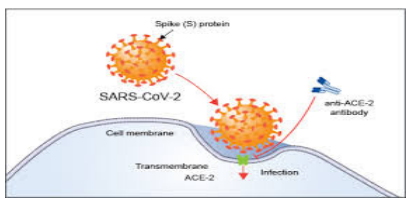
Compiled And Edited By John T. Robbins, Southern Daily Editor

RICHMOND, Va. — With doctors all around the world testing potential vaccines for COVID-19, it's becoming a horse race to see which drug will clear patient trials first. A team in Virginia is now entering the race after finding an experimental cancer treatment stops coronavirus from infecting cells.

The study says AR-12 not only inhibits SARS-CoV-2, but fights viruses like influenza and HIV as well. Scientist Paul Dent and his team at Virginia Commonwealth University find AR-12 prevents SARS-CoV-2, the virus causing COVID-19, from both infecting cells and replicating. Previous studies reveal SARS-CoV-2 uses a "spike" protein to hijack human cells, forcing them to make more of the virus.

Dent's team studies AR-12 for use against cancer and other viruses. The VCU lab's work and other scientific publications show the promising drug is effective against illnesses including the mumps, measles, rubella, drug-resistant HIV, the flu, and Zika.

"AR-12 works in a unique way. Unlike any other anti-viral drug, it inhibits cellular chaperones, which are proteins that are required to maintain the right 3D shape of viral proteins. The shape of the virus is critical to its ability to infect and replicate," Dent explains in a media release.



AR-12 prevents SARS-CoV-2

How AR-12 prevents virus replication Researchers say AR-12 inhibits one of the key "cellular chaperones" which viruses use to reproduce, GRP78. The protein acts like a stress detector and is vital to the life cycle of viruses living in all mammals. The VCU Massey Cancer Center is now examining the findings and are hoping to start a clinical trial soon. Its tested potential to fight cancer shows humans can take the medication orally and it won't cause serious side-effects.

"AR-12 is an oral therapy that has been well tolerated in a prior clinical trial, so we know that it is safe and tolerable," says Andrew Poklepovic, medical director of the Clinical Trials Office at Massey. "Most COVID-19 drugs are given intravenously, so this would be a unique therapeutic option and potentially suitable for outpatient therapy, similar to the way one would take an antibiotic." Poklepovic adds the VCU is hoping to start enrolling patients in their clinical trial in early 2021. To do that however, scientists need FDA approval and create a protocol for testing the drug on COVID-19 patients. (Courtesy https://www.studyfinds.org/) This study previously appeared in the journal Biochemical Pharmacology.

Related

Clinical Trials Launched To Evaluate Effectiveness Of Blood Thinners To Treat COVID-19

From NIH National Institutes of Health — Turning Discovery Into Health

NIH ACTIV initiative launches adaptive clinical trials of blood-clotting treatments for COVID-19

The National Institutes of Health has launched two of three adaptive Phase 3 clinical trials evaluating the safety and effectiveness of varying types of blood thinners to treat adults diagnosed with COVID-19. Part of the Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV) initiative, these trials will be conducted at more than 100 sites around the world and will involve patients in various clinical settings — those who have not been hospitalized, those currently hospitalized and those discharged after hospitalization for moderate to severe disease. Collectively known as ACTIV-4 Antithrombotics, the trials will provide critical insights that could help guide the care of patients with COVID-19, particularly those who suffer from life-threatening blood clots. The trial for hospitalized COVID-19 patients and the trial for patients with COVID-19 who have not been hospitalized are now underway. A third trial to start later will focus on patients discharged after hospitalization for moderate to severe COVID-19 disease. All three clinical trials will be coordinated and overseen by the National Heart, Lung, and Blood Institute (NHLBI), part of NIH, and funded through Operation Warp Speed(link is external).

Researchers have noted that many patients who have died from COVID-19 — the deadly disease caused by SARS-CoV-2 — had formed blood clots throughout their bodies, including in their smallest blood vessels. This unusual clotting, one of many life-threatening effects of the disease, has caused multiple health complications, from organ damage to heart attack, stroke and pulmonary embolism.

ACTIV-4 Antithrombotics will be recruiting at sites with significant COVID-19 burden and are interested in enrolling patients in studies testing potential treatments to prevent or reduce the formation of blood clots. The adaptive design of the protocol allows different blood thinners to be started, stopped or combined during the study in response to emerging trial data. This approach accelerates the timeline for testing different agents without compromising safety. Antithrombotics, also known as blood thinners or anticoagulants, keep blood protein and platelets from turning into clumps or sticking to each other, but doctors have not yet figured out if, and at what point during the course of the disease, blood thinners might be effective at treating patients with COVID-19.

"There is currently no standard of care for anticoagulation in hospitalized COVID-19 patients, and there is a desperate need for clinical evidence to guide practice," said NIH Director Francis S. Collins, M.D., Ph.D. "Conducting trials using multiple existing networks of research sites provides the scale and speed that will get us answers faster." ACTIV-4 Antithrombotics Inpatient will investigate the safety and effectiveness of using varying doses of the blood thinner heparin to prevent clotting events and improve outcomes in hospitalized COVID-19 patients. Patients will be assigned to either a low or high dose of heparin, and as the trial progresses, additional antithrombotics may be tested, depending on the trial results. All participants in the study will continue to receive clinical care as indicated for their condition.

ACTIV-4-Antithrombotics Outpatient will investigate whether anticoagulants or antithrombotic therapy can reduce life-threatening cardiovascular or pulmonary complications in newly diagnosed COVID-19 patients who do not require hospital admission. Researchers will also collect patient data and blood samples to help identify new drug targets and biomarkers that may help identify a patient's risk of developing complications related to COVID-19. Participants will be assigned to take either a placebo, aspirin or a low or therapeutic dose of the blood thinner apixaban. "We must use therapies that support the natural inhibitors of clotting in the blood," said Keith Hoots, M.D., director of NHLBI's Division of Blood Disorders and Resources. "Heparin has shown promise, but we really need clinical trial data to determine how much blood thinner, or even anti-platelet medication, to give."

"By leveraging the infrastructure and expertise of our existing research networks, we can more rapidly gather the scientific evidence needed to help prevent or treat these very serious complications caused by COVID-19," said NHLBI Director Gary H. Gibbons, M.D. "Harnessing and integrating the assets within existing networks gives us an enormous head start and will allow us to get answers much sooner." Trial planning and development work is being done through a collaborative effort with a number of universities, including the University of Pittsburgh; University of Michigan, Ann Arbor; New York University, New York City; Brigham and Women's Hospital, Boston; University of Illinois at Chicago; University of North Carolina at Chapel Hill; and The University of Vermont, Burlington.

NIH announced the ACTIV public-private partnership in April 2020 to develop a coordinated national research response to speed COVID-19 treatment and vaccine options. As part of this partnership, Bristol-Myers Squibb/Pfizer have agreed to donate the treatments for the trials for patients with COVID-19 who have not been hospitalized. Managed by the Foundation for the National Institutes of Health, ACTIV brings together multiple partners from government, industry, academia and non-profit organizations. For more information about this and other ACTIV therapeutic trials, visit the ACTIV Therapeutics page.

About the National Heart, Lung, and Blood Institute (NHLBI): NHLBI is the global leader in conducting and supporting research in heart, lung, and blood diseases and sleep disorders that advances scientific knowledge, improves public health, and saves lives. For more information, visit https://www.nhlbi.nih.gov/.

About the National Institutes of Health (NIH): NIH, the nation's medical research agency, includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. NIH is the primary federal agency conducting and supporting basic, clinical, and translational medical research, and is investigating the causes, treatments, and cures for both common and rare diseases. For more information about NIH and its programs, visit www.nih.gov. (Courtesy-https://www.nih.gov/)