



Southern DAILY

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Trump moved to military hospital after COVID-19 diagnosis



WASHINGTON (Reuters) - U.S. President Donald Trump moved to a military hospital for treatment on Friday after being diagnosed with COVID-19 as his administration and election campaign scrambled to adjust to an extraordinary twist in his turbulent presidency.

Roughly 17 hours after he announced that he had tested positive for the coronavirus, Trump walked slowly from the White House to a waiting helicopter to be taken to Walter Reed National Military Medical Center in Bethesda, Maryland. He wore a mask and did not speak to reporters.

Trump will stay in a special suite in the hospital for the next few days as a precautionary measure, White House press secretary Kayleigh McEnany said.

"Out of an abundance of caution, and at the recommendation of his physician and medical experts, the President will be working from the presidential offices at Walter Reed for the next few days," she said in a statement. Trump, 74, has a mild fever, according to a source familiar with the matter. White House doctor Sean P. Conley said he is being treated with an experimental drug cocktail and is "fatigued but in good spirits."

It was the latest recent setback for the Republican president, who is trailing Democratic rival Joe Biden in opinion polls ahead of the Nov. 3 presidential election.

Trump, who has played down the threat of the coronavirus pandemic from the outset, wrote on Twitter earlier on Friday that he and his wife Melania were going into quarantine after testing positive for the virus, which has

killed more than 200,000 Americans and severely damaged the U.S. economy.

RELATED COVERAGE

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An active Twitter user, Trump has not posted any messages since then.

Trump is at high risk because of his age and weight. He has remained in apparent good health during his time in office but is not known to exercise regularly or to follow a healthy diet.

Conley said Trump has received an experimental treatment, Regeneron's REGN-COV2. The drug is one of several experimental COVID-19 drugs known as monoclonal antibodies, which are used for treating a wide range of illnesses. U.S. infectious disease chief Dr. Anthony Fauci is among those saying the technique has promise

Trump is also taking zinc, Vitamin D, famotidine, melatonin and a daily aspirin.

Stocks on Wall Street closed lower as news of Trump's diagnosis added to mounting uncertainties surrounding the election.

The president's illness upended his re-election campaign with just 31 days to go until Election Day. The campaign said it would postpone rallies and other events where he was scheduled to appear, or take them online.

Biden pulled ads attacking Trump off the air, but otherwise continued his campaign after testing negative for the virus.

At a union hall in Grand Rapids, Biden said he was praying for his rival's recovery. However, he also implicitly criticized Trump, who rarely wears a mask in public and has held huge campaign rallies with little social distancing.

"Be patriotic," Biden said. "It's not about being a tough guy. It's about doing your part."

Trump's illness also raised questions about the health of others atop the U.S. government.

Vice President Mike Pence, who would take over if Trump were to fall severely ill, has tested negative, a spokesman said. The former Indiana governor, 61, is working from his own residence several miles from the White House.

Trump did not transfer power to Pence as other presidents have sometimes done while undergoing medical treatment, according to a White House official. Pence took over Trump's planned calls with governors and retirees' organizations. His Oct. 7 debate with Democratic vice presidential candidate Kamala Harris will go forward as planned, organizers said. Harris has also tested negative for the virus, according to the campaign.

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WEA LEE'S GLOBAL NOTES

10/02/2020

CORONAVIRUS DIARY

The World Rocked - Trump Tests Positive President Trump Confirmed Friday Morning That He And First Lady Melania Have Tested Positive For Coronavirus

This diagnosis is the most serious known health threat to a sitting president in decades. At the age of 74, Trump falls into the highest risk category for serious complications from the disease which has killed more than 200,000 Americans and more than one million worldwide.

In his tweet, President Trump wrote, "Tonight @FLOTUS and I tested positive for COVID-19. We will begin our quarantine and recovery process immediately. We will get through this TOGETHER."

The White House issued a new schedule

to reflect several canceled events including a fund raising event in DC and a rally in Florida.

The President's aide Hope Hicks tested positive earlier and she probably contracted the virus from an interaction with a supporter. Hicks joined the Trump organization working in public relations with Ivanka Trump and moved to Trump's 2016 presidential campaign early in the race.

There are many questions that need to be answered. If the President is still in quarantine for the next two weeks, will

the second debate be cancelled?

The Presidential election is just one month away. This news will have extraordinary repercussions and will affect the future of the nation and the world.

President Trump has ignored the virus warnings and insisted that states reopen the schools and businesses. He complained during recent rallies about Democratic governors who have maintained strict lockdowns to prevent the spread of the virus.

With Trump testing positive, the White House faces a very serious challenge. We urge all the leaders in Congress and the Vice President to call emergency meetings to discuss the next political developments.



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Experimental Medicines For COVID-19 Could Help Someday, But No Guarantees



British coronavirus patients George Gilbert, 85, and his wife, Donveva Gilbert, 84, were part of a clinical trial that included Eli Lilly & Co.'s baricitinib. (Photo/Wigglesworth/AP)

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

If the coronavirus vaccines currently being tested don't pan out, don't expect new drugs to fill the gap any time soon. Many drugs are in the works, and those that succeed could play a role in reducing symptoms and sometimes saving lives. But, given the way drugs are developed, it's unlikely that any single medicine will be anywhere as potent against the coronavirus as a successful vaccine.

So far, scientists have only identified one kind of drug that has been shown to save lives: steroids. A key study found that the steroid dexamethasone reduced death rates among people on ventilators from 41% to 29%. That's a substantial improvement, but still far short of a cure. The other much-touted drug to treat COVID-19 is remdesivir. The Food and Drug Administration granted emergency use authorization for this drug even though it has not been shown to save lives. It appears to shorten hospital stays. There's a lot more in the pipeline. Some drugs try to destroy the virus. Others try to control the body's immune system so it doesn't overreact to the infection. Another approach is to prevent the virus from causing an infection.



Inexpensive Steroids Can Save Lives Of Seriously Ill COVID-19 Patients.

This week drugmaker Eli Lilly & Co. said it is making progress on its virus-blocking approach. Its experimental product is derived from a person who had successfully fought off infection. "We found the one antibody in their body that was most potent," says Dr. Dan Skovronsky, Lilly's chief scientific officer. "We engineered it in our laboratories, turned it into a medicine, made it in our factory and started testing in patients" - all within a remarkably short six-month time span. This proof-of concept study suggests that the strategy of blocking virus with antibodies holds promise. Inmaculada "Inma" Hernandez, at the University of

Pittsburgh school of pharmacy, is hopeful, but she doubts that these drugs will be a game-changer.

"These drugs are so complex to produce, probably we will not have antibodies available for treating everybody who gets coronavirus," she says. "They're probably going to be considerably expensive."

Antibodies as a class are among the highest-priced drugs. And Derek Lowe, a drug developer and author of a blog about the pharmaceutical industry called In the Pipeline, notes that Lilly used hefty doses of these antibodies. The most effective dose appeared to be 2.8 grams - that's heavier than a penny. Making enough to treat the tens of thousands of Americans who get sick every day would require "truckloads of antibody," Lowe said.



Harvested Antibodies Now Being Tested As A Prevention Tool Against COVID-19.

Lilly executive Skovronsky says he's hopeful a dose one-fourth of that amount will be effective. And he notes that, unlike other treatments involving antibodies, this one would require just a single dose, which would help extend supplies and reduce the cost per patient. "We're confident that this will be an affordable drug for society - for governments," he says. "Of course, our expectation would be that governments wouldn't pass any expenses along to patients." Lilly is not the only company trying this approach. Regeneron has a cocktail of two potent antibodies that it is now testing. A related approach, called convalescent plasma, involves transfusing blood plasma that contains antibodies. The antibody levels are much less concentrated

in the serum than in the experimental drugs.

Blocking infection could be especially important if vaccines now in development prove to be ineffective. Even if there is a mostly effective vaccine, some people are still likely to fall ill. So, to minimize the effects of that, many drug companies are trying to develop drugs that will tamp down the body's overreactive immune system. That leads to potentially deadly inflammation. This is what the steroids do, but the hunt continues for other options.

"The problem is inflammation and the immune system are so just ridiculously complicated, that you have to be empirical," says drug researcher Lowe. "You have to say, 'Well, that looks like a good idea, let's go find out if it's real.' And a lot of the times it's not." That exploration consumes time and money, and no single drug is likely to do everything that's needed to control the runaway immune system.

Some drugs trying this approach have already failed, such as tocilizumab and sarilumab. Others, including Lilly's baricitinib, are still being tested.



A true "cure" for COVID-19 would be a drug, or drugs, that actually knock out the coronavirus itself. There are a few actual cures for viral diseases, including hepatitis C. HIV, which causes AIDS, can also be kept in check for many years with a drug cocktail. But this approach requires a combination of drugs, and finding not just one but multiple drugs that work well together is no easy task.

"If you wanted to do that for the coronavirus, you'd still be looking at quite a few years," Lowe says.

Most efforts to find curative drugs for viruses have failed. In fact, the reality in drug development is that most ideas that look great on paper actually fail somewhere along the way. They are either too toxic, or they simply don't work.

Dr. Vinay Prasad, a cancer researcher at University of California San Francisco and frequent critic of the drug-approval process, says even when a medication does work, it is rarely revolutionary.

"Most of our effect sizes are modest benefits," he says. "Five percent benefits. Two percent benefits. One percent benefits."

When those drugs are combined, the benefits can add up - sometimes to quite effective therapies. But that takes years of trial and error. Prasad uses a baseball analogy for how he thinks coronavirus drug development might play out.

"It's possible that we're going to get singles and doubles," he says. "We might not get the home run, and we might have to rely on the core things that we know control viral spread."

Masks and social distancing are, in the short run at least, more potent than pills.

Skovronsky at Lilly isn't discouraged, though. He says a cure usually doesn't require any medicine.

"The truth is that for most people who get COVID-19 probably they cure themselves," he says. The primary task for drug developers is to find medicines effective for the 5% to 10% of people who get seriously ill. (Courtesy <https://www.npr.org/>)

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Editor's Choice



A man is run over by a police horse as Israelis protest against legislation banning them from holding demonstrations more than 1 km (0.6 miles) from their homes, a measure the government said was aimed at curbing COVID-19 infections, in Tel Aviv, Israel. REUTERS/Ammar Awa



Halloween decorations and support for President Donald Trump are seen in the front of supporter Maranda Joseph's yard in Warren, Ohio. REUTERS/Shannon Stapleton



Honduran migrants trying to reach the U.S. hitchhike on a truck after bursting through a border checkpoint to enter Guatemala illegally, in Entre Rios, Guatemala. REUTERS/Stringer



Journalists report before dawn at the White House after President Trump announced that he and U.S. first lady Melania Trump have both tested positive for the coronavirus. REUTERS/Joshua Roberts



People walk in the tourist area surrounding Houhai Lake during Chinese National Day holidays in Beijing. REUTERS/Thomas Peter



People watch as waves crash up on the promenade during storm Alex, in Swanage, Dorset, Britain. REUTERS/Andrew Coultridge



A girl picks catkins at a field amid the COVID-19 pandemic in Sarighat, on the outskirts of Dhaka, Bangladesh. REUTERS/Mohammad Ponir Hossain



Members of Russia's National Guard take an examination to gain the right to wear the maroon beret, the symbol of their professional status, at a training ground outside the village of Yemelyanovo in the Republic of Tatarstan, Russia. REUTERS/Alexey

It's Even More Important Than Ever to Get a Flu Shot This Year



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

After all we have been through so far this year, it should be no surprise that we're heading into an unknown 2020 flu season too. What makes this year's flu different, and possibly more dangerous, is that we're still battling a global pandemic, says Dr. Wesley Long, Houston Methodist's medical director of clinical microbiology. With multiple strains and spreading patterns, the flu can be pretty irregular during the best of years—we all know someone who's gotten a flu shot and then came down with it anyway. But this year those uncertainties are being pushed to the extreme thanks to Covid-19, which affects the same parts of the body as the flu. "While it is important to get a flu shot every year, this year it is particularly important because we want to preserve our capacity in the health care system to treat routine patients as well as those with Covid-19," Long says. What is the Flu? Influenza, commonly called the flu, is a highly contagious respiratory virus that infects the nose, throat, and, sometimes, the lungs. The severity of the illness changes from person to person, with cases ranging from mild to severe, but according to the Centers for Disease Control and Prevention, general symptoms

include fever (or feeling feverish/chills); a cough; a sore throat; runny or stuffy nose; muscle or body aches; headaches; and fatigue. The flu can last from a few days to almost two weeks, but people can develop complications, such as pneumonia, which can be life-threatening and require hospitalization.



Flu season typically begins in October and runs through March; however, cases have been known to pop up in April and May, too, according to the Houston Health Department. "Although some years it can start a little earlier or persist a little longer," Long notes. Covid vs. the Flu Although Covid is still fairly new, doctors have seen several

overlapping symptoms, including fever; cough; shortness of breath or difficulty breathing; sore throat; and muscle pain or body aches, among others. However, unlike the flu, Covid-19 can cause changes in or loss of taste or smell. "Once flu season starts, we may need to test people for flu and Covid both to determine the best course of treatment," says Long. Both viruses can spread from person-to-person contact, and you can still spread either virus even if you never developed symptoms. However, Long says, the coronavirus has produced a bit of silver lining: People are already social distancing, practicing good hygiene habits, and wearing face masks to protect against Covid-19. Those same habits can also help stop the spread of flu. "That, combined with an increase in flu vaccination, should help keep this year's flu season under control." Getting the shot Since flu season typically begins in the fall, Long says the middle of September is a perfect time to get your vaccination. "It's never too late to get the flu shot, but you want to try to get one in the fall to protect you through the season," Long says. "Don't wait until you're seeing friends and coworkers becoming sick with flu to get the shot." Long says that most pharmacists can give you a flu shot as well as some other vaccinations, depending on your age. You can also likely get one from your internist or family doctor. The Houston Health Department is offering flu shots at its health centers. Just remember, the vaccine takes around two weeks to take full effect, adds Long, so don't wait too long.



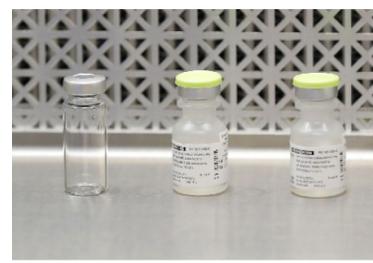
I got my flu vaccine, but I think I'm sick anyway. Now what? Contact your health care provider as soon as you suspect you have the flu, Long says. From there, your doctor can help you determine if your symptoms are severe enough to warrant an E.R.

visit. "There are antivirals that can help shorten the illness, but they need to be started soon after symptom onset," he says. Also, make sure you know if you're in a high-risk category for developing serious flu complications. Individuals in these categories include the elderly, people with certain underlying health conditions, and pregnant individuals, according to the CDC. Other steps to stay healthy The best practices that help us avoid spreading the flu are the same we've learned to fight the spread of Covid-19, Long says. In case you need a refresher: Wear your mask when in public, keep social distancing, wash your hands frequently and thoroughly with soap (or use an alcohol hand sanitizer), and, of course, stay home if you're sick and for 24 hours after your fever breaks. "It is important for all of us to remember that Covid-19 is still present in the community, still circulating," Long says. "We still need to be vigilant and keep our guard up." (Courtesy the Houston Chronicle)

Related Dr. Anthony Fauci has a specific time period to get a flu shot

When Dr. Fauci Plans To Get His Flu Shot

Dr. Anthony Fauci has a specific time of the year when he gets his flu shot — and it's not until next month.



Vials used by pharmacists to prepare syringes used on the first day of a first-stage safety study clinical trial of the potential vaccine for COVID-19 are pictured on March 16, 2020 in Seattle. (Photo/Associated Press)

What's going on: Health experts are encouraging people to get their flu vaccinations this year to help limit the amount of flu infections and the spread of coronavirus.

Fauci, an infectious disease specialist, recently told Jennifer Garner in an Instagram interview that October might be the best month to get the shot, CNBC reports.

• He said he gets his shot "toward the middle and end of October." • "I wouldn't necessarily get it now, in September, because there is evidence that, in fact, the immunity might wear off when you get to February and early March," he said. He said this is an "unofficial" suggestion on when to get the shot, according to CNBC.

Other experts agree: Dr. Miriam Alexander, with LifeBridge Health, recently told WBAL-TV 11 that October is a good month to get your shot because the strains often last from October to March.

If an FDA-approved vaccine for COVID-19 was made available, would you take it?



Deseret News/Hinckley Institute poll

NOTE: Numbers may not add up to 100 due to rounding.

SOURCE: Poll conducted by Scott Rasmussen Sept. 7-12, 2020, of 1,000 likely Utah voters and has a margin of error of +/- 3.1 percentage points.

• "The reason for that is the flu shot seems to only work for about six months and we always have quite a lot of flu in our communities in March. We want to make sure people are protected against the flu in March." Alexander encouraged all Americans to get their shot this year to stay safe from the flu.

• "There should be an extra level of urgency that we and all of our friends and loved ones get the flu shot."

• "We don't want to confuse the picture when we as a medical community are trying to figure out what's going on with people. If they know they've had the flu shot, then we will think more COVID than we will flu." (Courtesy https://www.deseret.com/)

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