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Inside C2

Southern DAILY

Make Today Different

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In Shanghai, a long, fruitless wait for help amid COVID lockdown

SHANGHAI, April 6 (Reuters) - The elderly woman slouched in a chair in Shanghai's cool spring weather as her three companions squabbled with police and others clad in white biohazard suits, the only people visible on a street emptied by the COVID-19 lockdown.

They spoke loud enough for residents to hear them from an apartment building a dozen floors up.

"She has had a fever for a few days now!" exclaimed one, gesturing to the woman. The people in the hazmat suits stood at least three metres away.

About an hour later, one of her male companions fed the woman the contents of a medicine sachet provided by the suited workers. A close-up photo showed it was Lianhua Qingwen, a traditional Chinese remedy that China recommends for treating COVID-19. Reuters was not able to obtain the name of the woman or her companions, or verify details, given lockdown curbs.

A man surnamed Zhang, who works at the property management office of the building that housed the local neighbourhood committee - from which the woman was trying to seek help - said she had self-tested positive but had not gotten her official test results back. As a result, it was unclear what care she could get.

The episode on Tuesday, which Reuters witnessed and which lasted more than two hours, is a snapshot of life in China's most populous but now largely silent city, which has put draconian lockdown curbs on its residents in a bid to stamp out its monthlong COVID outbreak.

The city is trying to detect and centrally quarantine every COVID-positive person, plus their close contacts, among its 26 million residents.

But many say local authorities are struggling to carry out that mission given the size of the city. Complaints include unclear guidance on what to do if a person tests positive, long waits to enter central quarantine centres, and crowded and unsanitary conditions for some once they get there.

China does not allow home quarantine, but some Shanghai residents have said that authorities have taken days to transport COVID-positive people, stoking anxiety and confusion. Poor access to essential medical treatment and difficulties in ordering food have also been common gripes.

Most have turned to Chinese social media platforms to voice their complaints, as the majority are not allowed to even leave their homes.

On the street in Shanghai, the woman and her companions eventually gave up trying to seek help there. One of her male companions got a scooter and after helping her on, drove away with her riding pillion.



U.S. Postal Service plans to raise prices of first-class mail

April 6 (Reuters) - The United States Postal Service (USPS) on Wednesday filed notice of price change with the Postal Regulatory Commission that includes a two-cent increase in the price of a first-class mail forever stamp from 58 cents to 60 cents.

The proposed hike in prices comes ahead of President Joe Biden's announcement for an about \$50 billion financial relief over a decade to the USPS.

The proposal would raise prices of first-class mail, an affordable way to send envelopes and lightweight packages, by about 6.5%, USPS said. (https://prn.to/3x6pHWX) If the price hike goes through, the single-piece letter additional ounce price would increase to 24 cents, the metered mail one-ounce price would increase to 57 cents and the price of a postcard stamp would increase to 44 cents. A one-ounce letter mailed to other countries would increase to \$1.40.



Forever stamps can be used to mail a one-ounce letter regardless of when the stamps are purchased or used and no matter how prices may change in the future.

Struggling with diminishing mail volumes despite having to deliver to a growing number of addressees, USPS has reported net losses of more than \$90 billion since 2007. In February, it booked a

quarterly net loss of \$1.5 billion.

The new prices, if favorably reviewed will take effect from July 10

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WEA LEE'S GLOBAL NOTES

04/06/2022

We Are Pleased To See The Return Of The NBA To China



Commissioner Adam Silver said virtually every American uses products made in China, and in many cases they are the products that we are most reliant on: our computers, our cell phones, our clothes, our shoes and kid's toys. So the question became, "Why is the NBA being singled out as the company that should now boycott China?"

We welcome the NBA's return to China which represents that China and the United States can continue to strengthen mutual understanding through sports events which is also an important indicator for easing the current tension between the two countries.

In the last two years, because of the Covid-19 pandemic and the war in

Ukraine, the livelihoods and survival of the people around the world have seriously been affected and the sanctions on Russia have only triggered an uncertain future for the world.

To be honest the people of the world have suffered enough. We need to bring more joy and laughter to this world.

In China, more than 300 million fans are about to see the NBA basketball games broadcast by Chinese TV stations again. The games have aired in China continuously for the last 35 years. As spokesman Mike Bass said, "We've lived-broadcast games to our fans in China and to more than 200 other countries. This is consistent with our mission to inspire and connect people everywhere through the

game of basketball."

The games were interrupted when Houston Rocket executive Daryle Morey shared an image supportive of the Hong Kong pro-democracy movement. Morey apologized for the post and was rebuked by the owner of the Rockets Tilman Fertitta. The NBA games on Chinese television make millions of dollars for the league.

In a recent interview, NBA



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Southern DAILY Make Today Different

Editor's Choice



A man digs a pit to obtain water, in a dry river bed, near the village of Tata Bathily in Matam, Senegal, March 30, 2022. REUTERS/Edward McAllister



Demba, 5, helps his father Al-adjé Drame, a water seller to fill his water cans near the village of Tata Bathily in Matam, Senegal. REUTERS/Ngouda Dione



A person in a protective suit walks a dog in a residential area under lockdown in Shanghai, China, April 5, 2022. REUTERS/Aly Song



Levi Dinmore, 8, gets a COVID-19 test at a Sameday Health drive-through testing site in Bethesda, Maryland, December 22. REUTERS/Evelyn Hockstein



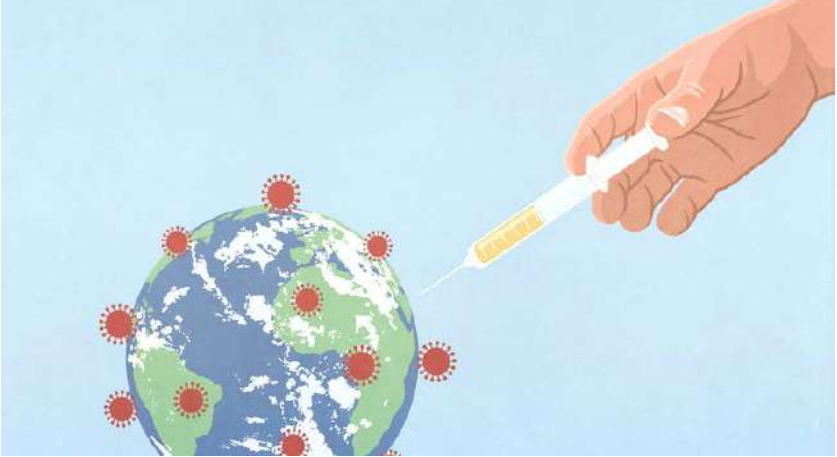
Residents line up for nucleic acid testing at a residential area, during the second stage of a two-stage lockdown to curb the spread of the coronavirus in Shanghai, China, April 4. REUTERS/Aly Song



Barbara Garramone of Rome, Italy, is embraced by her son Pietro and daughter Giulia as they wait in line for a coronavirus test in Manhattan, New York City, December 22. REUTERS/Andrew Kelly

“Amazingly High” Immune Response Discovered In Fully Jabbed People Who Also Caught The Disease

Study: How To Get ‘Super Immunity’ To Covid



(Photo:/Malte Mueller/Getty Images)

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

Fully vaccinated people who catch Covid, as well as those who had the disease prior to the jabs, get rewarded with the best immune responses, a new study has found.

Oregon Health and Science University (OHSU) researchers took samples from 104 people, double-jabbed with the Pfizer vaccine. Forty-two of them had never tested positive for Covid, 31 were vaccinated after an infection, and 31 had “breakthrough” infections following the vaccination.

After the scientists exposed the volunteers’ blood samples to the Alpha, Beta, and Delta variants of Covid-19, they discovered that the combination of vaccine and natural immunity creates antibodies “at least 10 times more potent – than immunity generated by vaccination alone.”

As a result, the scientists concluded that “additional antigen exposure from natural infection substantially boosts the quantity, quality, and breadth” of immune response to the disease, “regardless of whether it occurs before or after vaccination.”

“In either case, you will get a really, really robust immune response – amazingly high,” co-senior author Fikadu Tafesse, who is an assistant professor of molecular microbiology and immunology in the OHSU School of Medicine, said.



Moreover, the study, published on Tuesday in Science Immunology magazine, claims that “while age negatively correlates with antibody response after vaccination alone, no cor-

relation with age was found in breakthrough or hybrid immune groups.”

Tafesse noted that the likelihood of getting infected after vaccination is still high due to the wide spread of the virus, but with the jabs “we’ll get a milder case and end up with this super immunity.”

The new findings suggest that “each new breakthrough infection potentially brings the pandemic closer to the end.” (Courtesy rt.com)

Related

Natural Covid Delta Immunity More

Effective Than Vaccination – CDC study

Despite contradicting previous advice from health officials, the study still insists that vaccination is the “safest strategy” against the coronavirus.

The study, published on Wednesday by the US Centers for Disease Control and Prevention (CDC), found that as the Delta variant became the dominant coronavirus strain during the second half of 2021, people who were vaccinated were six times less likely to catch Covid-19 than those who hadn’t been jabbed.

However, those who had been infected with an earlier variant of the coronavirus, but hadn’t been vaccinated, were between 15 and 29 times less likely to catch the virus.

A similar difference was noticed in hospitalization rates, with prior immunity conferring better protection against hospitalization than vaccination.



Despite its disadvantage compared to natural immunity, the CDC stressed that “vaccination remains the safest strategy” for preventing Covid-19 infections. This is because “having Covid the first time carries with it significant risks,” study co-author Dr. Eli Rosenberg told CNN. Likewise Dr. Erica Pan, state epidemiologist for the California Department of Public Health, recommended that even those with prior infection get vaccinated to ensure they get a layer of “additional protection.”

The study’s conclusion contradicts earlier claims from top US health officials. At the beginning of the Delta outbreak last May, White House Chief Medical Advisor Dr. Anthony Fauci insisted that vaccines “are better than the traditional response you get from natural infection.” Fauci has also been accused by Republican lawmakers of ignoring studies touting the benefits of natural immunity, “because it foils his plans to get everybody possible vaccinated.”

As it was conducted during the surge of Delta infections, the study offers no insight into the efficacy of vaccines against the now-dominant Omicron variant.

WHO Says, ‘No Evidence’

For Boosting Children And Teens

The World Health Organization says

Covid-19 boosters should be a priority for the highest-risk populations instead



A teenager gets a Pfizer Covid-19 booster at a vaccine clinic in Bellows Falls, Vermont, January 14, 2022. (Photo/The Brattleboro Reformer / Kristopher Radder/©AP)

There is currently no evidence that Covid-19 booster shots should be administered to healthy children and adolescents, the WHO’s top scientists said. The organization is still trying to work out the appropriate booster schedule.

“The aim is to protect the most vulnerable, to protect those at highest risk of severe disease and dying, those are our elderly population, immunocompromised with underlying con-

ditions and also health care workers,” WHO chief scientist Dr. Soumya Swaminathan said at a news briefing on Tuesday, adding that “there’s no evidence right now” for administering them to otherwise healthy children and teens.

The WHO’s Strategic Advisory Group of Experts (SAGE) on Immunization will meet later this week to consider how governments should think about boosters, Swaminathan said.

Dr. Michael Ryan, the WHO’s executive director for health emergencies, said the organization hasn’t figured out yet how many doses people may ultimately need.



“I think people do have a certain fear out there that this booster thing is going to be like every two or three months and everyone’s going to have to go and get a booster. And I don’t think we have the answer to that yet,” Ryan said. SAGE may eventually redefine how many doses will make up the “primary series” of shots, Ryan added, explaining that most healthy people may need just two, but the elderly or immunocompromised could require three or four.

Last week, the WHO’s Technical Advisory Group on Covid-19 Vaccine Composition (TAG-Co-VAC) said that a vaccination strategy “based on repeated booster doses of the original vaccine composition is unlikely to be appropriate or sustainable,” urging member countries to prioritize primary vaccinations for high-risk groups over universal boosting.

TAG-Co-VAC experts also said that current vaccines focus on reducing severe disease and protecting healthcare systems, while there is an ongoing need for vaccines that prevent infection and transmission of the virus.

WHO Experts Criticize

‘Repeated Booster’ Strategy

The World Health Organization’s vaccine advisory body has voiced concerns about using current Covid-19 vaccines as boosters



(Photo:/Morsa Images/© Getty Images/)

Using the original vaccines against Covid-19 as boosters against emerging variants is the wrong approach, said a WHO expert group, adding that the world needs new vaccines that protect against infection and transmission.

“A vaccination strategy based on repeated booster doses of the original vaccine composition is unlikely to be appropriate or sustainable,” the Technical Advisory Group on Covid-19 Vaccine Composition (TAG-Co-VAC) said on Tuesday.

While some countries may recommend boosters, “the immediate priority for the world is accelerating access to the primary vaccination, particularly for groups at greater risk of developing severe disease,” the group added, pointing out the “need for equity in access to vaccines across countries to achieve global public health goals.”

While the currently available vaccines focus on “reducing severe disease and death, as well as protecting health systems,” there is a need for vaccines “that have high impact on prevention of infection and transmission.” Until such jabs are developed, the existing vaccines may need to be updated to better target emerging virus variants such as Omicron, the group said.



Developers should work to create vaccines that “elicit immune responses that are broad, strong, and long-lasting in order to reduce the need for successive booster doses,” the TAG-Co-VAC urged.

On Tuesday, the EU drug regulator EMA’s head of Biological Health Threats and Vaccines Strategy said they don’t yet have enough data to recommend a second booster – the fourth jab so far – even as some countries urged such a move.

Marco Cavaleri said they were “rather concerned about a strategy that entangles repeat vaccination within a short term,” adding that “we cannot really continuously give a booster dose every three-four months.”

The WHO said that Omicron could infect more than half of the EU population over the next two months and urged the bloc’s authorities not to treat the virus as endemic. (Courtesy rt.com)

Decades After Polio, An Iron Lung Is Still Relied On To Breathe By Patient

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



Martha Lillard needed a large respirator called an iron lung to recover from polio, which she caught in 1953. She still uses a form of the device at nights. (Photo courtesy of Martha Lillard)

On June 8, 1953, Martha Lillard celebrated her fifth birthday with a party at an amusement park in Oklahoma. A little over a week later, she woke up with a sore throat and a pain in her neck. Her family took her to the hospital, where she was diagnosed with polio.

She spent six months in the hospital, where she was put in a giant metal tank — a ventilator informally called an iron lung — to help her breathe. To this day, Lillard is one of the last people in the U.S. who still depends on an iron lung to survive.

Polio is a potentially life-threatening disease, once among the world’s most feared. In the late 1940s, polio disabled an average of 35,000 people in the U.S. every year. A polio vaccine became widely available in 1955, and millions of Americans got vaccinated. Since 1979, no cases of polio have originated in the U.S., according to the Centers for Disease Control and Prevention. The disease has been nearly eradicated — the World Health Organization documented only 175 cases of wild polio in 2019. It remains endemic in only Pakistan and Afghanistan. Although most people who contract polio will not have visible symptoms, a severe case can infect the brain and spinal cord and cause paralysis. Lillard’s breathing muscles were weakened by the disease, and she survived thanks to the iron lung.



Iron lung respirators are prepared in an emergency polio ward at a Boston hospital in August 1955. (Photo/AP)

The machines are giant ventilators about 7 feet long. Patients lie inside with just their heads resting outside; a seal around the patient’s neck creates a vacuum. Bellows at the base of the device do the work of a human diaphragm — they create negative pressure so the user’s lungs fill with air, and positive pressure allowing the person to exhale.

Sixty-eight years later, an iron lung is still keeping Lillard alive — she sleeps in it every night. While many people who had polio or post-polio syndrome either weaned themselves off the machines or switched to another form of ventilator, Lillard never did.

“I’ve tried all the forms of ventilation, and the iron lung is the most efficient and the best and the most comfortable way,” she told Radio Diaries.

The antiquated machines are now more likely to be found in a museum than in someone’s home. In the 1990s, when her iron lung was breaking down, she called hospitals and museums that might have had old ones in storage. But they’d either thrown them away or didn’t want to part with their collection. She eventually bought one from a man in Utah — the machine she still uses today.

The machines were once serviced by Philips Resperonic, but Lillard says the assistance she received from the company was minimal. Once, she says a technician was sent to service her machine and prepared to leave before putting the machine back together.

Lillard has gotten stuck in the iron lung. She lost power when an ice storm came through Oklahoma and her emergency generator didn’t kick on, leaving her trapped in the device without heat.

“It’s like being buried alive almost, you know — it’s so scary,” Lillard says. She tried to call 911, but the cell towers weren’t working. “I was having trouble breathing. And I remember saying out loud to myself, ‘I’m not going to die.’ “ Lillard was eventually able to get a signal, but she remembers the emergency responders had no idea what an iron lung was. Luckily, they were able to get the generator going for her.



Martha Lillard says she worries about running out of replacement parts to make her iron lung respirator function properly. (Photo courtesy of Martha Lillard)

Wear on parts is her main issue now. The belts need to be replaced every few weeks, the cot inside every six months, the motor every 12 years or so. Her most immediate need is collars. The collars create the critical airtight seal around the neck. Each one lasts only for a few months. And she has bought all the back stock of collars from places that don’t produce them anymore. “That’s the main thing I’m having a hard time with, because I try to stretch out, make these collars last longer,” Lillard says. “And when they start deteriorating, it gets harder and harder to breathe as they leak more.”

She has only a handful of collars left. “I really am desperate,” she says. “That’s the most scary thing in my life right now — is not finding anybody that can make those collars.”

Today, Lillard spends much of her time alone. She paints, watches old Hollywood movies and takes care of her beagles. She has been mostly isolating throughout the COVID-19 pandemic, seeing her sister, Cindy, and her brother-in-law, Daryl, in the evenings.



Dr. Jonas Salk administers vaccine to young patient.

Being affected by polio at such a young age has meant Lillard hasn’t been able to have all the experiences others have had. She attended school from home for much of her childhood and couldn’t participate in most extracurricular activities — she still remembers longing to go camping with her siblings. She was not able to have children or hold a steady job because of her physical limitations.

Although some of her life experiences were limited, Lillard thanks a childhood friend named Karen Rapp for teaching her to appreciate small things. Together, they observed ants and built little villages of grass huts.

“There’s much more to see if you really look for it,” she says.

And she’s grateful for the iron lung.

“It’s what sustains me. It’s what heals me. It’s what allows me to breathe the next day,” Lillard says. “I look at it as a friend, as a very dear friend.” (Courtesy npr.org)

Related

Jonas Salk Creator Of The Salk Vaccine

Jonas Edward Salk (Born Jonas Salk; October 28, 1914 – June 23, 1995) was an American virologist and medical researcher who developed one of the first successful polio vaccines. He was born in New York City and attended the City College of New York and New York University School of Medicine.



Dr. Jonas Salk

In 1947, Salk accepted a professorship in the School of Medicine at the University of Pittsburgh. It was there that he undertook a project to determine the number of different

types of poliovirus, starting in 1948. For the next seven years, Salk devoted himself towards developing a vaccine against polio.

Salk was immediately hailed as a “miracle worker” when the vaccine’s success was first made public in April 1955, and chose to not patent the vaccine or seek any profit from it in order to maximize its global distribution. The National Foundation for Infantile Paralysis and the University of Pittsburgh looked into patenting the vaccine but, since Salk’s techniques were not novel, their patent attorney said, “if there were any patentable novelty to be found in this phase it would lie within an extremely narrow scope and would be of doubtful value.”



Jonas Salk wrote about the polio vaccine trial project, “the most elaborate program of its kind in history, involving 20,000 physicians and public health officers, 64,000 school personnel, and 220,000 volunteers,” with over 1.8 million school children participating in the trial. A 1954 Gallup poll showed that more Americans knew about the polio field trials than could give the full name of the current U.S. president.

An immediate rush to vaccinate began in both the United States and around the world. Many countries began polio immunization campaigns using Salk’s vaccine, including Canada, Sweden, Denmark, Norway, West Germany, the Netherlands, Switzerland, and Belgium. By 1959, the Salk vaccine had reached about 90 countries. An attenuated live oral polio vaccine was developed by Albert Sabin, coming into commercial use in 1961. Less than 25 years after the release of Salk’s vaccine, domestic transmission of polio had been completely eliminated in the United States.



Salk in 1955 at the University of Pittsburgh

In 1963, Salk founded the Salk Institute for Biological Studies in La Jolla, California, which is today a center for medical and scientific research. He continued to conduct research and publish books in his later years, focusing in his last years on the search for a vaccine against HIV. Salk also campaigned vigorously for mandatory vaccination throughout the rest of his life, calling the universal vaccination of children against disease a “moral commitment”. Salk’s personal papers are today stored in Geisel Library at the University of California, San Diego. (Courtesy Wikipedia)