

GPHIN Daily Report for 2020-10-14

Special section on Coronavirus

Canada

Areas in Canada with cases of COVID-19 as of 13 October 2020 at 19:00 pm EDT

Source: Government of Canada

Province, territory or other	Number of confirmed cases	Number of active cases	Number of deaths
Canada	184,881	19,741	9,654
Newfoundland and Labrador	283	8	4
Prince Edward Island	63	3	0
Nova Scotia	1,092	4	65
New Brunswick	284	82	2
Quebec	87,791	8,087	5,970
Ontario	60,692	5,946	3,017
Manitoba	2,779	1,248	35
Saskatchewan	2,174	238	25
Alberta	20,956	2,615	286
British Columbia	10,734	1,510	250
Yukon	15	0	0
Northwest Territories	5	0	0
Nunavut	0	0	0
Repatriated travellers	13	0	0

A detailed [epidemiologic summary](#) is available.

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html?topic=tilelink#a1>

Canada – Coronavirus disease (COVID -19) Outbreaks and Outcomes (Official and Media)

Canada

Middlesex-London surpasses 1,000 COVID-19 cases

Source: BlackBurn News

Unique ID: [1008035510](#)

A total of 886 people have not required hospitalization after testing positive, while 86 people have spent time in hospital outside of the Intensive Care Unit and 33 people have required treatment in the ICU. While the six new cases took the region past the milestone, they marked a healthy drop in the number of new cases compared to Monday's 25 and Sunday's 20. Outbreaks have been declared at Craigwiel Gardens, Earls Court Village, Extencicare, Henley Place, McGarrell Place, and Meadow Park Care Centre.

The London area has now seen over 1,000 confirmed cases of COVID-19 since the beginning of the pandemic.

Six new cases were reported by the Middlesex London Health Unit on Tuesday, bringing the total for the region to 1,005. While the six new cases took the region past the milestone, they marked a healthy drop in the number of new cases compared to Monday's 25 and Sunday's 20.

Of the 1,005 confirmed cases in London and Middlesex County, 855 people have recovered. The death toll of 57 has remained unchanged since June 12. A total of 886 people have not required hospitalization after testing positive, while 86 people have spent time in hospital outside of the Intensive Care Unit and 33 people have required treatment in the ICU.

There are currently 93 active cases in London and Middlesex County.

There are currently six outbreaks at long term care or retirement facilities in the region. Outbreaks have been declared at Craigwiel Gardens, Earls Court Village, Extencicare, Henley Place, McGarrell Place, and Meadow Park Care Centre.

No new cases were reported Tuesday by Southwestern Public Health, the health unit for Elgin and Oxford counties.

Provincially, more than 1,500 new cases were recorded over the past two days. The province didn't report figures Monday because it was a holiday, so Tuesday's report covers two days. There were 807 new cases recorded yesterday and 746 today.

Once again, many of the new cases were in the GTA and Ottawa.

"Today, Ontario is reporting 746 cases of #COVID19 with 807 cases on Monday," Health Minister Christine Elliott tweeted on Tuesday. "Combined over the same two days, there are 1,292 more resolved cases with over 67,700 tests completed. Locally, there are 311 new cases in Toronto, 135 in Peel and 116 in Ottawa today."

Ontario has now seen 60,692 infections since the start of the pandemic.

<https://blackburnnews.com/london/london-news/2020/10/13/middlesex-london-surpasses-1000-covid-19-cases/>

Canada

Ontario's agri-food businesses to get funding to help prevent spread of COVID

Source: NEWS 1130

Unique ID: [1008035527](#)

The federal government says \$11.6 million will help with improvements for Ontario farms such as building physical barriers for worker separation, upgrading HVAC systems and improving hand-washing facilities. Agri-food workers — especially in the Windsor-Essex region — were hit hard by the pandemic's first wave, with several outbreaks on farms. It's part of a \$35 million investment announced in last month's throne speech to help the country's agricultural sector weather the pandemic.

Farmers and other agri-food businesses in Ontario can now apply for federal funding aimed at keeping workers safe during the COVID-19 pandemic.

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The Ontario government is responsible for delivering the funds.

Agri-food workers — especially in the Windsor-Essex region — were hit hard by the pandemic's first wave, with several outbreaks on farms.

The province says the agri-food sector supports more than 837,000 jobs in Ontario.

This report by The Canadian Press was first published Oct. 13, 2020.

The Canadian Press

<https://www.citynews1130.com/2020/10/13/ontarios-agri-food-businesses-to-get-funding-to-help-prevent-spread-of-covid/>

Canada

COVID-19 hospitalizations rise by 10 in Ottawa on Tuesday

Source: CTV News Ottawa

Unique ID: [1008035514](#)

Some testing facilities were closed over the Thanksgiving long weekend, which may have contributed to a lower number of tests; however, Ontario's testing backlog has been cut nearly in half since their last update on Sunday. The number of known active cases of COVID-19 in Ottawa held steady on Tuesday, as the number of recoveries nearly matched the number of new confirmed cases. OPH reported 116 new cases of COVID-19 in Ottawa on Tuesday, a slight decline from the 119 reported on Thanksgiving Monday.

OTTAWA -- The number of people in Ottawa hospitals with COVID-19 complications has risen dramatically in Ottawa Public Health's latest daily report.

There are now 48 people in hospital with COVID-19, up from 38 reported on Monday. There are also now 10 people in ICU, up from nine.

This is the highest number of people hospitalized with COVID-19 in Ottawa since mid-May.

OPH reported 116 new cases of COVID-19 in Ottawa on Tuesday, a slight decline from the 119 reported on Thanksgiving Monday.

In the seven days between Oct. 7 and Oct. 13 inclusive, Ottawa has seen an average of 115.5 new cases of COVID-19 per day. From Oct. 1 to Oct. 7 inclusive, Ottawa saw an average of 92.5 cases per day.

The province did not report figures on Thanksgiving Monday. In Tuesday's update, both Monday and Tuesday's figures were included.

According to Ottawa Public Health's COVID-19 dashboard, there have been 5,662 total laboratory-confirmed cases of COVID-19 in Ottawa since the pandemic began.

No new deaths were reported on Tuesday. Ottawa's death toll from COVID-19 stands at 297 residents.

TESTING

Ontario completed 31,233 tests in the past 24 hours. Some testing facilities were closed over the Thanksgiving long weekend, which may have contributed to a lower number of tests; however, Ontario's testing backlog has been cut nearly in half since their last update on Sunday. The provincial government says there are 24,420 tests still under investigation, down from 45,837 on Sunday.

Ottawa Public Health's current publicly available testing data has figures up to Oct. 10.

Oct. 4: 1,785 tests. 3.1 per cent positive.

Oct. 5: 2,453 tests. 1.8 per cent positive.

Oct. 6: 1,601 tests. 2.2 per cent positive.

Oct. 7: 1,499 tests. 3.7 per cent positive.

Oct. 8: 1,686 tests. 2.9 per cent positive.

Oct. 9: 1,584 tests. 2.1 per cent positive.

Oct. 10: 1,455 tests. 2.5 per cent positive.

ACTIVE CASES OF COVID-19 IN OTTAWA

The number of known active cases of COVID-19 in Ottawa held steady on Tuesday, as the number of recoveries nearly matched the number of new confirmed cases.

OPH reports 839 active cases of COVID-19, up one from Monday's report.

An additional 115 people have recovered from COVID-19. OPH says 4,526 of all cases in Ottawa are now considered resolved.

The number of active cases is the number of total laboratory-confirmed infections minus the numbers of resolved cases and deaths. A case is considered resolved 14 days after known symptom onset or positive test result.

COVID-19 CASES IN OTTAWA BY AGE CATEGORY

Here is a breakdown of all known COVID-19 cases in Ottawa by age category:

0-9 years old: 10 new cases (356 cases total)

10-19 years-old: 18 new cases (573 cases total)

20-29 years-old: 30 new cases (1,250 cases total)
30-39 years-old: 16 new cases (767 cases total)
40-49 years-old: 13 new cases (717 cases total)
50-59 years-old: 14 new cases (641 cases total)
60-69-years-old: 6 new cases (450 cases total)
70-79 years-old: 4 new cases (297 cases total)
80-89 years-old: 3 new cases (359 cases total)
90+ years old: 2 new cases (248 cases total)

The ages of four cases are still unknown.

CASES OF COVID-19 AROUND THE REGION

Eastern Ontario Health Unit: 5 new cases Monday, 4 new cases Tuesday (341 cases total)

Hasting Prince Edward Public Health: 1 new case Monday, 0 new cases Tuesday (64 cases total)

Kingston, Frontenac, Lennox & Addington Public Health: 2 new cases Monday, 1 new case Tuesday (166 cases total)

Leeds, Grenville & Lanark District Health Unit: 1 case removed Monday, 1 case added Tuesday (406 cases total)

Renfrew County and District Health Unit: 1 new case Monday, 0 new cases Tuesday (68 cases total)

Outaouais: 23 new cases on Monday, 31 new cases on Tuesday (1,830 cases total)

This is a breaking news story. CTV News will update this story as more information becomes available.

<https://ottawa.ctvnews.ca/covid-19-hospitalizations-rise-by-10-in-ottawa-on-tuesday-1.5143036>

Canada

Travel agency wants to expand COVID-19 Atlantic bubble to include Cuban resort

Source: National Post

ID: 1008036586

A Nova Scotia travel agency says it has a way of bringing the Atlantic “bubble” to the Caribbean.

Absolute Travel, located in Halifax, wants to extend the bubble to a resort in Cuba this winter. The plan would provide a potentially COVID-free vacation for Atlantic Canadians looking to escape the winter weather for the sunny beaches of the Caribbean.

“Being in a bubble is a little bit different than Ontario and some other provinces,” said co-owner and vice-president of Absolute Travel, Elayne Pink. “We were looking for what could we do to work within the boundaries we have to support those people. And that’s how the idea started.”

The bubble is composed of the four Atlantic provinces — Nova Scotia, New Brunswick, Prince Edward Island and Newfoundland and Labrador — in which residents are free to travel without having to self-isolate when they cross borders. The travel package would feature a direct flight taking only Canadians from the Atlantic provinces to a Cuban resort where they would be the only occupants.

Pink says they plan on announcing the details of the trip and opening it up to the public sometime in the next week, with travel beginning in February.

The response to the agency’s plan was instantaneous.

“We’ve been overwhelmed with phone calls,” Pink said. “We’ve had, I’m going to say up to 3,000 people in touch with us via social media and whatnot looking to go on this package.”

Word of the package actually got out ahead of plan during a conversation with a local radio station.

“It went viral,” Pink said. “People caught on very quickly. Once it got out, it just kept running and it just blew up our social media pages like crazy.”

The agency wants to work with an airline and a Cuban resort to create a safe and exclusive means of travel, where potential COVID-19 exposure would be limited. Further deals and resorts at other countries, like the Dominican Republic, could follow, but for the time being Pink is focused on their first package.

For seven days at a time, Atlantic Canadians will be able to vacation at a resort where all the staff have been tested and self-isolated before guests arrive, though there will be no off-resort activities. The goal is to recreate the conditions, safety and exclusivity of the Atlantic bubble in the Caribbean.

“All the things we go through here in Atlantic Canada in our bubble is exactly what we’re going to be doing there,” Pink said.

In a conversation with HalifaxToday, Pink was optimistic about appealing to Dr. Robert Strang, the chief medical officer for Nova Scotia, about lifting the mandatory 14-day self-isolation period upon returning to the Atlantic provinces from outside the bubble.

When contacted by the National Post, Dr. Strang referred all inquiries on the matter to the federal government, stating that it falls under their jurisdiction. According to current emergency protocol set out by the Government of Canada, any traveller returning to Canada must quarantine for 14 days, even if they aren't displaying any symptoms.

The 14-day self-isolation period remains secondary compared to finding a way for Atlantic Canadians to travel together and travel safely, Pink said.

"Atlantic Canadians are very tight knit. People are just happy that we're trying very hard to get this to work the way we want it to. And so far it's coming together quite perfectly."

Most recently, the agency was able to put in place a COVID-19 medical coverage plan to protect against the possibility of catching the virus.

"If, God forbid, somebody did take ill at the destination, there is a policy now that is in place that covers that," said Pink.

While the agency considered a number of options, Cuba remains their best bet. Pink said they are focusing on areas of the country with the least cases of COVID-19.

Many Cuban provinces have seen no new cases in months, and restrictions have just been relaxed in anticipation of re-opening their economy for tourist season — with the exception of Havana, reports CTV News. The island of more than 11 million people has reported some 6,000 coronavirus cases and more than 120 deaths from COVID-19 since March.

<https://nationalpost.com/news/canada/travel-agency-wants-to-expand-covid-19-atlantic-bubble-to-include-cuban-resort>

Canada

Quebec raises coronavirus alert level for more regions as 815 new cases reported

Source: Global News

ID: 1008036477

By Kalina Laframboise Global News

Updated October 13, 2020 3:09 pm

Coronavirus: Quebec moves three more regions into red alert level as cases rise

Quebec Premier Francois Legault announced on Tuesday that the regions of Montérégie, Centre-du-Québec and Capitale-Nationale will be moving to a red alert level as more cases of COVID-19 being recorded. He asked people to avoid indoor gatherings of more than 15 minutes and continue to make sacrifices to bring the spread under control.

<https://globalnews.ca/news/7393715/quebec-coronavirus-oct-13/>

United States - Coronavirus Disease 2019 (COVID-19) - Communication Resources (Official and Media)

United States

Coronavirus vaccine trials: Pfizer to include participants as young as 12

Source: Global News

Unique ID: [1008035522](#)

Johnson & Johnson, Moderna Inc and AstraZeneca Plc to develop a safe and effective vaccine for the coronavirus. Pfizer Inc will enroll participants as young as 12 in its large, late-stage COVID-19 vaccine trial to understand how it works in a wider age group.

5:14 close video mute video mute video Global News Morning TorontoBBC journalist on what he learned during a COVID-19 vaccine trialMore VideosVolume 0%Press shift question mark to access a list of keyboard shortcutsKeyboard Shortcutsplay/pauseincrease volumedecrease volumesseek forwardsseek backwardstoggle captionstoggle fullscreenmute/unmute seek to %SPACE↑↓→←cfm0-9Next UpEurope has record single-day surge in COVID-19 cases facebook twitter Email Pfizer Inc will enroll participants as young as 12 in its large, late-stage COVID-19 vaccine trial to understand how it works in a wider age group.

The U.S. Food and Drug Administration granted permission to the drugmaker and German partner BioNTech SE to enroll the younger participants this month, according to an update on Monday on the

U.S. company's website.

The drugmaker is racing with rivals such as Johnson & Johnson, Moderna Inc and AstraZeneca Plc to develop a safe and effective vaccine for the coronavirus.

The companies have pledged to ensure diversity in terms of race, ethnicity, gender, age and other factors in their vaccine studies.

Pfizer last month scaled up its trial to about 44,000 participants, from up to 30,000, to enroll people as young as 16 and those with chronic, stable HIV, hepatitis C and hepatitis B.

The trial, which is being conducted in four countries including the United States, has enrolled 37,864 participants as of Monday, with 42 per cent overall participants from ages 56 to 85.

— Reporting by Manojna Maddipatla in Bengaluru; Editing by Sriraj Kalluvila

<https://globalnews.ca/news/7393995/coronavirus-vaccine-trial-pfizer/>

United States

U.S. deaths up 20 percent from March through July 2020

Source: Medical Xpress

Unique ID: [1008035515](#)

The number of expected U.S. deaths increased considerably from March through July 2020, with 67 percent of these excess deaths attributed to COVID-19; and the United States has experienced high COVID-19-associated mortality compared with other countries, according to two studies published online Oct. 12 in the Journal of the American Medical Association.

Steven H. Woolf, M.D., M.P.H., from Virginia Commonwealth University School of Medicine in Richmond, and colleagues estimated excess deaths and examined whether they were related to COVID-19. The researchers found 1,336,561 deaths occurred in the United States between March 1 and August 1, 2020, which represented a 20 percent increase over expected deaths. Overall, 67 percent of the 225,530 excess deaths were attributed to COVID-19.

Alyssa Bilinski, from the Harvard Graduate School of Arts and Sciences in Cambridge, Massachusetts, and Ezekiel J. Emanuel, M.D., Ph.D., from the University of Pennsylvania Perelman School of Medicine in Philadelphia, compared U.S. COVID-19 deaths and excess all-cause mortality in 2020 (versus 2015 to 2019) to that of 18 countries with diverse COVID-19 responses. The researchers found that the United States reported 198,589 COVID-19 deaths as of Sept. 19, 2020 (60.3 per 100,000), which was higher than the death count for countries with low and moderate COVID-19-related mortality but comparable to that of countries with high COVID-19-related mortality. For the 14 countries with publicly available all-cause mortality data, similar patterns were observed for excess all-cause mortality (71.6 per 100,000 in the United States since the start of the pandemic).

"When a pandemic reaches the health, social, and economic scale of COVID-19, regardless of the precise number of deaths that have occurred by a certain date, an intense, persistent, multipronged, and coherent response must be the order of the day and an urgent priority for the nation," Harvey V. Fineberg, M.D., Ph.D., from the Gordon and Betty Moore Foundation in Palo Alto, California, writes in an accompanying editorial.

One author from the Woolf study disclosed ties to the pharmaceutical industry; one author from the Bilinski and Emanuel study disclosed ties to the biopharmaceutical, insurance, and other industries.

<https://jamanetwork.com/journals/jama/fullarticle/2771761>

<https://medicalxpress.com/news/2020-10-deaths-percent-july.html>

International - Coronavirus disease (COVID-19) Outbreak and Outcomes (Media)

Mexico

Alert Coviflú infection; cdmx case

Source: El Heraldo de Mexico

Unique ID: [1008034042](#)

México registró su primer caso confirmado de una persona infectada de COVID-19 e influenza al mismo tiempo. Se trata de una mujer de 54 años con antecedentes de enfermedad autoinmune, cáncer, obesidad y EPOC, quien está hospitalizada en condición estable en el Instituto Nacional de Ciencias

Médicas y Nutrición Salvador Zubirán (INCMNSZ), en la Ciudad de México. La paciente estuvo internada primero por COVID-19 y fue...

Mexico recorded its first confirmed case of a person infected with COVID-19 and influenza at the same time.

She is a 54-year-old woman with a history of autoimmune disease, cancer, obesity and COPD, who is hospitalized in stable condition at the Salvador Zubirán National Institute of Medical Sciences and Nutrition (INCMNSZ), in Mexico City.

The patient was first admitted by COVID-19 and was discharged on October 6, but returned to the hospital on October 8th for a relapse from influenza, described at the conference José Luis Alomía, director general of epidemiology.

From his first admission, samples were taken for COVID and for a laboratory study called the viral panel, where influenza infection would later be detected.

Separately, in CMNSZ's head of the emergency department, Thierry Hernández Gilsoul, stated that on Saturday 10 the positive result of the infection was obtained.

The case was identified as part of an intentional search for COVID and influenza conducted by various national health institutes through PCR testing of hospitalized patients, this at the start of the flu season. The measurement is necessary because it is difficult to distinguish a case of COVID from one of influenza, as they generate similar symptoms.

"This routine search began to be done by the recommendation made by a panel of experts and has already given us the first positive case," Hernandez Gilsoul added to Mexico's El Heraldo.

About the severity of infecting both viruses, there is still insufficient scientific evidence to claim that the risk is higher, thierry Hernandez and Mauricio Rodríguez, UNAM spokesman for coronavirus, agreed.

"What we do know is that for influenza there is a vaccine, treatment and that the two diseases are transmitted by droplets of saliva and therefore both are prevented with mouth covers, healthy distance and hand washing," Rodriguez said.

Countries in the southern hemisphere have already experienced the coexistence of influenza and COVID, as did various nations that were among the first to have coronavirus cases.

In these territories it has been observed that there were fewer cases of influenza than in previous years, which is attributed to the strengthening of preventive measures, added the academic of the Faculty of Medicine.

However, Thierry Hernandez warned that the greatest concern of this syndemic, i.e. the confluence of two epidemics, lies in a possible saturation of hospitals.

"There will be patients who have influenza, others who have COVID, and others with both diseases, this increases the demand for hospital beds, it is the most important part in public health," he said.

Influenza cases will increase as we approach the end of this year, so experts noted that older adults, children under the age of six, pregnant women and people with chronic disease or immunosuppression should be vaccinated.

<https://heraldodemexico.com.mx/nacional/2020/10/12/alertan-infeccion-de-coviflu-detectan-caso-en-cdmx-214153.html>

China

China to test 9 million after new virus outbreak

Source: KSTP.com

Unique ID: [1008033822](#)

Authorities were investigating the source of the infections in eight patients at Qingdao's Municipal Chest Hospital and one family member, the National Health Commission said. "The whole city will be tested within five days," it said on its social media account. China, where the pandemic emerged in December, has reported 4,634 deaths and 85,578 cases, plus nine suspected cases that have yet to be confirmed. The last...

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"The whole city will be tested within five days," it said on its social media account.

China, where the pandemic emerged in December, has reported 4,634 deaths and 85,578 cases, plus nine suspected cases that have yet to be confirmed.

The last reported virus transmissions within China were four patients found on Aug. 15 in the

northwestern city of Urumqi in the Xinjiang region. All the cases reported since then were in travelers from outside the mainland.

The ruling party lifted measures in April that cut off most access to cities with a total of some 60 million people including Wuhan in central China.

Qingdao is a busy port with the headquarters of companies including Haier, a major appliance maker, and the Tsingtao brewery. The government gave no indication whether the latest cases had contacts with travel or trade.

Travelers arriving from abroad in China still are required to undergo a 14-day quarantine.

In other developments in the Asia-Pacific region:

— India has reported 66,732 new coronavirus cases in the past 24 hours, driving the country's overall tally to 7.1 million. The Health Ministry on Monday also reported 816 deaths in the past 24 hours, taking total fatalities to 109,150. India is seeing fewer new daily cases of the virus since mid-September when daily infections touched a record high of 97,894 cases. It's averaging more than 70,000 cases daily so far this month. Health experts have warned that congregations during major festivals later this month and in November have the potential to spread the virus. They also caution that coming winter months are expected to aggravate respiratory ailments.

— Malaysia will restrict movements in its biggest city, Kuala Lumpur, neighboring Selangor state and the administrative capital of Putrajaya starting Wednesday to curb a sharp rise in coronavirus cases. Defense Minister Ismail Sabri Yaakob says all schools in these areas will be shut and all religious, sports and social activities will be halted for two weeks. He says economic activities can continue but with strict health measures. The move comes just over four months after Malaysia lifted a three-month nationwide lockdown to control the pandemic. It has experienced a new wave of cases following increased travel for an election last month in eastern Sabah state, a hotspot on Borneo island. Several politicians, including a Cabinet minister, tested positive for the virus after returning from Sabah. Prime Minister Muhyiddin Yassin had to isolate himself for two weeks after coming into contact with the minister. The government earlier announced that Sabah will be placed under a restricted movement order from Tuesday. Ismail said inter-district travel is banned under the partial lockdown, except with approval. Other restrictions include a limit of two people leaving each household to purchase groceries. Malaysia has reported more than 16,000 cases with 157 deaths.

— Authorities in Indonesia's capital have moved to ease strict social restrictions despite a steady increase in cases nationwide. Jakarta imposed large-scale social restrictions from April to June, then eased them gradually. The city brought back strict restrictions last month as the virus spread. Jakarta Gov. Anies Baswedan said his administration decided to ease the restrictions from Monday because the increase in infections has stabilized. The move came days after President Joko Widodo urged local administrations to refrain from imposing lockdown measures that could cause crippling economic damage in Southeast Asia's largest economy.

— Sri Lankan officials say they have suspended the repatriation of citizens stranded overseas by the coronavirus because the country's quarantine facilities are full. Army Commander Shavendra Silva, who heads the task force to control the virus, says a steep rise in COVID-19 patients in the past week has filled the quarantine facilities. Sri Lanka earlier announced it had successfully contained the virus, with no local infections reported for two months. But a cluster originating in a garment factory earlier this month has resulted in 1,307 new cases in just one week. The country has reported a total of 4,791 cases, including 13 deaths.

— South Korea has confirmed 97 new cases of the coronavirus, a modest uptick from the daily levels reported last week. The increase comes as officials ease social distancing restrictions after concluding that transmissions have slowed following a resurgence in mid-August. The figures released by the Korea Disease Control and Prevention Agency on Monday brought the number of infections since the pandemic began to 24,703, including 433 deaths. South Korea relaxed its social distancing guidelines beginning Monday, allowing high-risk businesses like nightclubs and karaoke bars to open as long as they employ preventive measures. Spectators will also be allowed at professional sports events, although teams will initially be allowed to only sell 30% of the seats in stadiums.

<https://kstp.com/coronavirus/china-to-test-9-million-after-new-coronavirus-outbreak/5892337/>

Netherlands

COVID-19 again? Reinfection cases raise concerns over immunity

Source: CBC Health News

Unique ID: [1008035519](#)

In the Netherlands, the National Institute for Public Health confirmed on Tuesday that an 89-year-old Dutch woman, also sick with a rare form of bone marrow cancer, had recently died after contracting COVID-19 for a second time. The 25-year-old from Reno, Nev., tested positive in April after showing mild symptoms, then got sick again in late May with a more serious bout, according to a case report in the Lancet Infectious Diseases medical journal. The case of a man in the United States infected twice with the virus that causes COVID-19 shows there is much yet to learn about immune responses and also raises questions over vaccination, scientists said on Tuesday.

The case of a man in the United States infected twice with the virus that causes COVID-19 shows there is much yet to learn about immune responses and also raises questions over vaccination, scientists said on Tuesday.

The 25-year-old from Reno, Nev., tested positive in April after showing mild symptoms, then got sick again in late May with a more serious bout, according to a case report in the Lancet Infectious Diseases medical journal.

The report was published just hours after U.S. President Donald Trump, who was hospitalized with COVID-19 earlier this month, said he felt "so powerful" and believes he now has immunity.

Scientists said that while known incidences of reinfection appear rare — and the Nevada man has now recovered — cases like his were worrying. Other isolated cases of reinfection have been reported around the world, including in Asia and Europe.

In the Netherlands, the National Institute for Public Health confirmed on Tuesday that an 89-year-old Dutch woman, also sick with a rare form of bone marrow cancer, had recently died after contracting COVID-19 for a second time.

Dutch media said this was the first known case worldwide of a death after SARS-CoV-2 coronavirus reinfection.

Vaccine implications

"It is becoming increasingly clear that reinfections are possible, but we can't yet know how common this will be," said Simon Clarke, a microbiology expert at Britain's Reading University.

"If people can be reinfected easily, it could also have implications for vaccination programs as well as our understanding of when and how the pandemic will end."

The Nevada patient's doctors, who first reported the case in a non-peer-reviewed paper in August, said sophisticated testing showed that the virus strains associated with each bout of infection were genetically different.

WATCH | Reinfections raise questions about COVID-19 vaccine efforts:

"These findings reinforce the point that we still do not know enough about the immune response to this infection," said Paul Hunter, a professor in medicine at Britain's University of East Anglia.

Brendan Wren, a professor of vaccinology at the London School of Hygiene and Tropical Medicine, said the Nevada case was the fifth confirmed example of reinfection worldwide.

"The demonstration that it is possible to be reinfected by SARS-CoV-2 may suggest that a COVID-19 vaccine may not be totally protective," he said. "However, given the [more than] 40 million cases worldwide, these small examples of reinfection are tiny and should not deter efforts to develop vaccines." World Health Organization spokesman Tarik Jasarevic concurred that the U.S. case underlined what was unknown about immunity.

"This also really is an argument against what some have been advocating, and that's building naturally what is called herd immunity. Because we don't know," Jasarevic told a briefing.

<https://www.cbc.ca/news/health/covid19-reinfection-immunity-1.5760223?cmp=rss>

Mexico

In December or January, they would apply Chinese Covid-19 vaccine in Mexico

Source: unomásuno

Unique ID: [1008035782](#)

During the president's morning press conference, Andrés Manuel López Obrador, the Secretary of Health set a first date for Mexico to receive and begin to apply one of the first Covid-19 vaccines to be applied in the country. It was abused that the sector responsible for approving the application of vaccines is following closely the vaccine produced by the Chinese-based laboratory, CanSino, whose biological is in

phase III. The Chinese-made covid-19 coronavirus vaccine could begin to be applied in Mexico next December or no later than January next year, health secretary Jorge Alcocer confirmed. Health Secretary Jorge Alcocer clarified that the vaccine must first be ensured to be safe. The Chinese-made covid-19 coronavirus vaccine could begin to be applied in Mexico next December or no later than January next year, health secretary Jorge Alcocer confirmed. During the president's morning press conference, Andrés Manuel López Obrador, the Secretary of Health set a first date for Mexico to receive and begin to apply one of the first Covid-19 vaccines to be applied in the country. It was abused that the sector responsible for approving the application of vaccines is following closely the vaccine produced by the Chinese-based laboratory, CanSino, whose biological is in phase III. "WE MUST HAVE CLEARLY WHAT IS STATED IN THE EVENTS OF PHASE III IN WHICH THEY ARE ALSO (CANSINO). UNTIL WE HAVE IT AND OUR ADVICE LINKED TO VACCINES, TO THIS VERY IMPORTANT TASK, BECAUSE IT VALIDATES IT," THE OFFICIAL SAID. Alcocer considered that phase III of CanSino's Covid-19 vaccine will arrive in Mexico at the end of the year and its application would begin in December or January, once the Cofepris of its approval. Today, Foreign Secretary Marcelo Ebrard confirmed that Mexico will have access to more than 100 million doses of Covid-19 vaccines.

<https://www.unomasuno.com.mx/en-diciembre-o-enero-aplicarian-vacuna-china-contra-covid-19-en-mexico/>

Europe

Europe launches new coronavirus restrictions as cases spike

Source: www.cp24.com

ID: 1008035918

A sign with the inscription 'mask obligation 12:00-22:00h - cover your mouth and nose!' hangs on traffic light pole at the beginning of the Steindamm street in the St. Georg district in the city center of Hamburg, Germany, Monday, Oct. 12, 2020. (Markus Scholz/dpa via AP)

Jamey Keaten And Frank Jordans, The Associated Press

Published Tuesday, October 13, 2020 7:55AM EDT

GENEVA -- Governments across Europe ratcheted up restrictions Tuesday in an effort to contain the spread of the coronavirus as the continent recorded its highest weekly number of new infections since the start of the pandemic.

The World Health Organization said there were more than 700,000 new COVID-19 cases reported in Europe last week, a jump of 34% compared to the previous week, with Britain, France, Russia and Spain accounting for more than half of new infections recorded in the region.

The increasing case numbers in Europe are partly the result of more testing, but the U.N. health agency noted that deaths were also up 16% in the region last week compared to the previous week. Doctors are also warning that while many new cases currently affect younger people, who tend to have milder symptoms, the median age could rise again, resulting in more serious illnesses in elderly populations. Italian Premier Giuseppe Conte ordered bans on pickup sports games among friends and parties in closed spaces. Private gatherings at homes with more than six people who don't live together are also discouraged.

Like other European countries, Italy is also limiting nightlife, with bars and restaurants having to close at midnight, and drinking while standing at a bar banned after 9 p.m.

Italy made wearing masks mandatory outdoors last week, a requirement already in place in Spain, Turkey, India and a handful of other Asian countries. Elsewhere in Europe, such mandates are in effect in hot spot cities like Paris, Brussels and Pristina, Kosovo, and are being introduced in several German cities.

Even with virus infections rising again, governments are eager to avoid the total lockdowns they imposed back then that caused huge economic damage and job losses. Wary of hurting already fragile economies, European governments have instead relied on a patchwork of regional restrictions that have sometimes caused confusion and frustration by those affected.

Still, the U.N. health agency cautioned Tuesday against a one-size-fits-all mindset when it comes to restrictive measures. WHO spokesman Tarik Jasarevic told reporters in Geneva that lockdowns should be a "last resort."

Chancellor Angela Merkel has summoned the governors of Germany's 16 states to meet in person Wednesday for the first time since mid-June. Bavarian governor Markus Soeder called for "a really clear set of rules for everyone in the coming weeks" to prevent the situation spinning out of control. In an effort to avoid to keep people and goods moving throughout the European Union, member countries approved a traffic light system Tuesday.

The countries agreed to not restrict people travelling between so-called green areas - where virus infection numbers are low - but EU governments will continue to set their own restrictions, such as quarantines or mandatory testing upon arrival, for people coming from orange or red zones.

Under the criteria adopted Tuesday, most of EU regions would be either red or orange.

Jordans reported from Berlin. Associated Press writers Colleen Barry in Milan, L Lazar Semini in Tirana, Geir Moulson in Berlin, and Danica Kirka and Maria Cheng in London contributed to this report.

Air Date: January 23, 2017

Local News

<https://www.cp24.com/world/europe-launches-new-coronavirus-restrictions-as-cases-spike-1.5142767>

Studies Related to Coronavirus disease (COVID -19) Outbreak (Media)

Study

Johnson & Johnson Halt All Covid-19 Vaccine Trials over 'Unexplained Illness'

Source: Forbes.com

Unique ID: [1008033880](#)

Topline Johnson & Johnson has become the latest Covid-19 vaccine frontrunner to put its trials on hold due to safety concerns after a participant fell ill, the company said in a statement Monday, following a similar move by AstraZeneca in September. Johnson & Johnson have paused all Covid-19 vaccine trials after a study...

Topline

Johnson & Johnson has become the latest Covid-19 vaccine frontrunner to put its trials on hold due to safety concerns after a participant fell ill, the company said in a statement Monday, following a similar move by AstraZeneca in September.

Johnson & Johnson have paused all Covid-19 vaccine trials after a study participant fell ill

The U.S. company said it was not immediately clear what had caused the adverse reaction in the participant, whether it was linked to the vaccine or even if the participant had received the vaccine, as opposed to a placebo.

An independent data safety monitoring board, in addition to the company's own physicians, is monitoring the participant's illness, the company said, adding that it is important to "have all the facts" and respect the participant's privacy before sharing further information.

Though serious adverse events are not uncommon in clinical trials, the pause to Johnson & Johnson's research might add to existing concerns over the safety of Covid-19 vaccines being at a much faster pace than is usual.

"Adverse events – illnesses, accidents, etc. - even those that are serious, are an expected part of any clinical study, especially large studies," the company said in a statement.

Key Background

Johnson & Johnson is a frontrunner in the race to develop a Covid-19 vaccine, launching a large, 60,000-person phase 3 trial for its single dose vaccine last month. Without further information from the company, it's impossible to tell which study this participant might be linked to or whether they had even received the vaccine. Adverse events are not uncommon in clinical trials— another fairly advanced Covid-19 vaccine trial by AstraZeneca was put on hold in early September. But amid the rush to develop a vaccine, the World Health Organization has warned against countries taking a nationalistic approach, and instead is pushing for a "collective" effort. Meanwhile, as President Donald Trump pushes for a vaccine before the November 3 election, there is already evidence that his approach has eroded public trust in its safety, even if FDA-approved.

Hassan Vally, an associate professor in epidemiology at La Trobe University in Melbourne, told

Bloomberg that these kinds of pauses are going to be more commonplace as more are vaccinated.

"We're going to have to get used to hearing these sorts of reports of pauses," he said. "As you vaccinate

more people in these trials the chances are that there will be some illnesses in participants. The only difference here is that in the world that we live in right now, the progress of these trials are in the public eye, and so we are riding every bump."

Big Number

\$1 billion. That's how much Johnson & Johnson received from the federal government as a part of Operation Warp Speed.

What To Watch For

Further updates from Johnson & Johnson as they evaluate the trial and its participants to determine the cause of the adverse event.

<https://www.forbes.com/sites/roberthart/2020/10/13/johnson--johnson-halt-all-covid-19-vaccine-trials-over-unexplained-illness/#5492569427e7>

<https://www.jnj.com/our-company/johnson-johnson-temporarily-pauses-all-dosing-in-our-janssen-covid-19-vaccine-candidate-clinical-trials>

Study

New research finds thousands of long-stay home-care clients did not get flu shot in 2019

Source: CBC News

Unique ID: [1008033882](#)

An estimated 61,000 long-stay home-care clients in Ontario and thousands more across Canada did not get a flu shot in 2019, researchers at the University of Waterloo have found.

John Hirdes, professor at the School of Public Health and Health Systems, said the number for Ontario is 18,000 more than the 2007 figure, when around 43,000 long-stay home-care clients did not get a flu shot. He said the issue is critical now as the country grapples with "wave two" of the COVID-19 pandemic.

"One reason for that is, if we can protect people against influenza, that may help them to be a bit stronger if they get infected with COVID," Hirdes told CBC News.

"The other is, by giving people the flu shot, we can keep them out of the emergency department, so that reduces pressure on the emergency department so they are not dealing with two viral outbreaks.

"Also, because there are so many similarities between the two conditions, if we get people the flu shot and can prevent the flu, then at least it may help in reducing some confusion of whether we're dealing with the flu or COVID in cases where people are infected," Hirdes added.

Study covered Alberta, BC, Ontario and Newfoundland

The study, which covered Alberta, BC, Ontario and Newfoundland in Canada, also included Belgium, New Zealand and the United States. It included individuals living in their communities who need on-going supports from the government's home-care system.

According to the study, the rate of not being vaccinated for influenza in long-stay home-care clients is as follows:

Ontario — 28.3 per cent.

BC — 27.6 per cent.

Alberta — 23.2 per cent.

Newfoundland — 34.9 per cent.

"These are all frail, elderly people. They are very vulnerable to the effects of influenza so they definitely should be getting the flu shot," Hirdes said.

Noting that Ontario "used to do OK" where only about 20 per cent of long-stay home-care clients did not get a flu shot in 2007, Hirdes said it's "worrisome" that things have gotten worse over time.

Dr. Samir Sinha, director of geriatrics for Mount Sinai Hospital and the University Health Network in Toronto, said he's not surprised by the findings.

He noted that while the Public Health Agency of Canada has recommended at least 80 per cent of Canadians get the flu shot, that target is not being met.

"We're not even reaching that target amongst older Canadians and Canadians in general," Sinha told CBC News.

"And that's concerning, because if we don't actually reach 80 per cent vaccination levels, we don't create a situation that we call herd immunity, meaning that if flu is circulating around, it's less likely to spread from one person to the other if 80 per cent of our population for example is immune, either by having recovered from the flu that year, or having received the flu vaccination that protects people from that strain of the flu."

Most governments have made the flu vaccine freely available and accessible, even in places like pharmacies across the country. The vaccine is available for anyone who is six months or older. "The challenge is that for the type of person that John and his team is studying, these tend to be people who are functionally homebound," Sinha explained.

"These are folks for example who can't really get out to see their doctor, can't easily get out to see their pharmacist.

"They are often people who are getting their medication delivered from the pharmacy to them at home. And because these folks have challenges getting out of the house, it just creates an additional challenge or barrier for them to actually get vaccinated," Sinha added.

'Quite a bit of bureaucracy involved,' Hirdes says

Meanwhile, Hirdes said home-care based clinicians need to urgently have a conversation with their clients to make them aware why they should be getting a flu shot — especially now that we are in the midst of the COVID-19 pandemic.

"The role of the home-care nurse is to encourage them and make them aware of the options. One of the things that we need to think about is can we simplify things to make it easier for home-care service providers to also provide the flu shot," Hirdes said.

"Right now there is quite a bit of bureaucracy involved in this where home-care providers would have to ask to get flu doses from public health.

"A home-care nurse doesn't carry it around in a small black bag so we need to think about ways to make it more convenient and easy to get flu shots to frail, elderly people in their homes," he added.

In August Canada's chief public health officer, Dr. Theresa Tam, stressed the months ahead will be a "period of challenge" given the combination of COVID-19 and influenza.

Last month, Tam said preparations for administering this year's flu vaccine is a "good rehearsal" for any COVID-19 vaccine.

The National Institute on Ageing has published a White Paper related to the issues of influenza in Canada. The findings include:

Influenza (and pneumonia) is the seventh leading cause of death in Canada, and it is the leading cause of death among vaccine-preventable diseases.

Influenza has been reported to cause an average of 12,200 hospitalizations and 3,500 related deaths each year in Canada.

The influenza vaccination rate for older adults is only 62 per cent, well below the Health Canada target of 80 per cent needed for population immunity.

In provinces where pharmacists are allowed to administer the influenza vaccine, more Canadians get vaccinated.

Influenza leads to an estimated 1.5 million lost work days each year. Despite making some progress in promoting vaccination uptake, Canada still lags behind other countries like the United States and Britain. It's not too late

Hirdes said it is not too late to get the vaccine to the thousands of long-stay home-care patients who did not get one last year.

"We're just starting to get vaccinations going with this and so this is the time for the system to work. If this was April or May in 2021 it would be too late, but now is the time," Hirdes told CBC News.

"The advantage that we've got is that the home-care agencies in the province have a complete list of all their clients who did not get a flu shot, so it's actually very easy for them with their electronic health records to identify which of their clients did not get a flu shot and to reach out to them to encourage them to get a flu shot.

"We serve about 200,000 home-care clients in the province a year so it's a manageable problem. These are people that are on the roster for home-care agencies — they can easily with their electronic health records identify who those folks are ... it's not going to be that hard to reach them," Hirdes added.

<https://www.cbc.ca/news/canada/kitchener-waterloo/long-stay-home-care-clients-flu-shot-university-of-waterloo-research-1.5755798>

Study

Novavax to explore combined influenza/COVID-19 vaccine for use post pandemic

Source: Leader Post

Unique ID: [1008034532](#)

Summary Oct 13 (Reuters) - Novavax Inc said on Tuesday it has set up a team of company veterans as it seeks U.S. regulatory approval for its seasonal influenza vaccine and to help develop a combined influenza/COVID-19 vaccine for use after the pandemic. The flu vaccine, NanoFlu, met the primary and secondary goals in late-stage comparison study with Sanofi's influenza vaccine Fluzone Quadrivalent earlier in the year. Novavax...

Oct 13 (Reuters) - Novavax Inc said on Tuesday it has set up a team of company veterans as it seeks U.S. regulatory approval for its seasonal influenza vaccine and to help develop a combined influenza/COVID-19 vaccine for use after the pandemic.

The flu vaccine, NanoFlu, met the primary and secondary goals in late-stage comparison study with Sanofi's influenza vaccine Fluzone Quadrivalent earlier in the year.

Novavax is among global drugmakers racing to develop a vaccine for COVID-19 and last month started a late-stage trial of its experimental vaccine, NVX-CoV2373, in the United Kingdom.

NVX-CoV2373 is also being tested in two ongoing mid-stage trials that began in August.

<https://leaderpost.com/pmn/business-pmn/novavax-to-explore-combined-influenza-covid-19-vaccine-for-use-post-pandemic>

Study

SARS-CoV-2 Is an Unrestricted Bioweapon: A Truth Revealed through Uncovering a Large-Scale, Organized Scientific Fraud

Source: Zenodo.org

ID: 1008023262

Publication date: October 8, 2020

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Abstract

Two possibilities should be considered for the origin of SARS-CoV-2: natural evolution or laboratory creation. In our earlier report titled "Unusual Features of the SARS-CoV-2 Genome Suggesting Sophisticated Laboratory Modification Rather Than Natural Evolution and Delineation of Its Probable Synthetic Route", we disproved the possibility of SARS-CoV-2 arising naturally through evolution and instead proved that SARS-CoV-2 must have been a product of laboratory modification. Despite this and similar efforts, the laboratory creation theory continues to be downplayed or even diminished. This is fundamentally because the natural origin theory remains supported by several novel coronaviruses published after the start of the outbreak. These viruses (the RaTG13 bat coronavirus, a series of pangolin coronaviruses, and the RmYN02 bat coronavirus) reportedly share high sequence homology with SARSCoV-2 and have altogether constructed a seemingly plausible pathway for the natural evolution of SARSCoV-2. Here, however, we use in-depth analyses of the available data and literature to prove that these novel animal coronaviruses do not exist in nature and their sequences have been fabricated. In addition, we also offer our insights on the hypothesis that SARS-CoV-2 may have originated naturally from a coronavirus that infected the Mojiang miners.

Revelation of these virus fabrications renders the natural origin theory unfounded. It also strengthens our earlier assertion that SARS-CoV-2 is a product of laboratory modification, which can be created in approximately six months using a template virus owned by a laboratory of the People's Liberation Army (PLA). The fact that data fabrications were used to cover up the true origin of SARS-CoV-2 further implicates that the laboratory modification here is beyond simple gain-of-function research.

The scale and the coordinated nature of this scientific fraud signifies the degree of corruption in the fields of academic research and public health. As a result of such corruption, damages have been made both to the reputation of the scientific community and to the well-being of the global community.

Importantly, while SARS-CoV-2 meets the criteria of a bioweapon specified by the PLA, its impact is well beyond what is conceived for a typical bioweapon. In addition, records indicate that the unleashing of this weaponized pathogen should have been intentional rather than accidental. We therefore define SARS-

CoV-2 as an Unrestricted Bioweapon and the current pandemic a result of Unrestricted Bio-warfare. **We further suggest that investigations should be carried out on the suspected government and individuals and the responsible ones be held accountable for this brutal attack on the global community.**

Chapter

1. Evidence proving that the RaTG13 virus is fraudulent and does not exist in nature
 - 1.1 The sequence of RaTG13 uploaded at GenBank can be fabricated
 - 1.2 Other suspicions associated with RaTG13
 - 1.3 Genetic evidence proving the fraudulent nature of RaTG13
 - 1.4 The receptor-binding domain (RBD) of RaTG13 does not bind ACE2 of horseshoe bats
 - 1.5 Conclusion and postulation of the fabrication process
 - 1.6 The Mojiang Miner Passage (MMP) hypothesis is fatally flawed

Chapter

2. Evidence proving that recently published pangolin coronaviruses are fraudulent and do not exist in nature
 - 2.1 A single batch of pangolin samples were used in all studies and the deposited sequencing data showed heavy contamination and signs of fabrication
 - 2.2 No coronavirus was detected in an extensive surveillance study of Malayan pangolins
 - 2.3 The RBD of the reported pangolin coronaviruses binds poorly to pangolin ACE2
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3. Evidence revealing the fraudulent nature of the novel bat coronavirus RmYN02

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 - 4.1 All fabricated coronaviruses share a 100% amino acid sequence identity on the E protein with ZC45 and ZXC21
 - 4.2 Important implications of this large-scale, organized scientific fraud
 - 4.3 SARS-CoV-2 is an Unrestricted Bioweapon
 - 4.4 The current pandemic is an attack on humanity
 - 4.5 Actions need to be taken to combat the current pandemic and save the future of humanity

Acknowledgements

References: total 123 of References

<https://zenodo.org/record/4073131#.X4OWOtEUm8B>

PDF file:

<file:///C:/Users/q/Downloads/The%202nd%20Yan%20Report.pdf>

Study

Trial to test if Vitamin D protects against Covid

Source: BBC News

ID: 1008036528

image caption Many people in the UK have low vitamin D levels

Scientists are looking for volunteers to take part in a trial to see if taking vitamin D can give the immune system a boost against Covid.

People who join would be sent pills in the post to take daily for six months if a finger-prick test shows they are deficient in the "sunshine vitamin".

UK residents are already advised to consider taking supplements over winter when vitamin D levels can dip.

That is to improve general health, not specifically to stop infections.

Should I take vitamin D?

Vitamin D deficiency is more common in older people, in people who are overweight, and in black and Asian people - all of the groups who are at increased risk of becoming very ill with Covid. The trial, led by researchers from Queen Mary University of London and funded by Barts Charity, will use higher doses of vitamin D than regular supplements.

Principal investigator David Jolliffe said the trial "has the potential to give a definitive answer" to the question of whether vitamin D offers protection against Covid.

"Vitamin D supplements are low in cost, low in risk and widely accessible; if proven effective, they could significantly aid in our global fight against the virus," he said.

Although vitamin D supplements are very safe, taking more than the recommended amount every day can be dangerous in the long run.

Related Topics

Amy Coney Barrett refuses to give views on abortion and healthcare at her confirmation hearing.

<https://www.bbc.co.uk/news/health-54526652>

Study

Eli Lilly pauses COVID-19 antibody trial due to safety concern

Source: www.aljazeera.com

ID: 1008037435

The US pharmaceutical company announces it is pausing enrolment in its COVID-19 antibody treatment trial 'out of an abundance of caution'.

Eli Lilly and Co shares were down nearly 3 percent amid the news of the pause of a government-sponsored clinical trial of a COVID-19 antibody treatment similar to the one US President Donald Trump took [File: NIAID-RML via AP]

13 Oct 2020

whatsapp

US drugmaker Eli Lilly and Co said on Tuesday that the government-sponsored clinical trial of its COVID-19 antibody treatment has been paused because of a safety concern.

"Out of an abundance of caution, the ACTIV-3 independent data safety monitoring board (DSMB) has recommended a pause in enrollment," Lilly spokeswoman Molly McCully said in an emailed statement. "Lilly is supportive of the decision by the independent DSMB to cautiously ensure the safety of the patients participating in this study."

Lilly's drug is similar to the Regeneron Pharmaceuticals, Inc treatment US President Donald Trump received after he contracted COVID-19.

Lilly had already asked US regulators to authorise its antibody therapy, LY-CoV555, for emergency use after publishing data in September that showed it helped cut hospitalisation and emergency room visits for COVID-19 patients. The treatment is being developed with Canadian biotech AbCellera.

Lilly shares were down nearly 3 percent amid the news on Tuesday, with the COVID-19 vaccine setback weighing on Wall Street.

<https://www.aljazeera.com/economy/2020/10/13/eli-lilly-pauses-covid-19-antibody-trial-due-to-safety-concern>

Study

Johnson & Johnson pause Covid-19 vaccine trial due to study participant illness

Source: www.breakingnews.ie

ID: 1008035653

Johnson & Johnson has confirmed it has temporarily paused its Covid-19 vaccine candidate clinical trials due to an unexplained illness in a study participant, delaying one of the highest profile efforts to contain the global pandemic.

The participant's illness is being reviewed and evaluated by an independent data and safety monitoring board as well as the company's clinical and safety physicians, the company said in a statement.

J&J said that such pauses are normal in big trials, which can include tens of thousands of people. It said the "study pause" in giving doses of the vaccine candidate was different from a "regulatory hold" required by health authorities. The current case is a pause.

However, J&J's move follows a similar one by AstraZeneca . In September, the British group paused late-stage trials of its experimental coronavirus vaccine, developed with the University of Oxford, due to an unexplained illness in a British study participant.

Both candidates are based on a so-called adenovirus, a harmless modified virus that instructs human cells to produce vaccine proteins, and both are part of the US government's Operation Warp Speed programme to support vaccine development.

"This could be a second case of adenoviral vaccine to spur safety concerns," said Bryan Garnier analyst Olga Smolentseva.

J&J on September 22nd became the fourth Warp Speed participant to enter the final stage of testing on humans, with the aim of enrolling 60,000 volunteers in the United States and abroad.

While Astra's trials in Britain, Brazil, South Africa and India have resumed, the US trial is still on hold, pending a regulatory review.

Dr William Schaffner, a professor of infectious diseases at the Vanderbilt University School of Medicine, said by email that "Everybody is on the alert because of what happened with AstraZeneca," adding that it could take a week to gather information.

"It would have to be a serious adverse event. If it was something like prostate cancer, uncontrolled diabetes or a heart attack - they wouldn't stop it for any of those reasons. This is likely to be a neurological event," he said.

Last month, J&J said its experimental Covid-19 vaccine produced a strong immune response against the novel coronavirus in an early-to-mid stage clinical trial. This prompted the company to start the large scale trial, with results expected by the end of this year or early 2021.

J&J declined to elaborate on the illness due to privacy concerns. It did say that some participants in studies get placebos, and it was not always clear whether a person suffering a serious adverse event in a clinical trial received a placebo or the treatment. -Reuters
<https://www.breakingnews.ie/business/johnson-johnson-pause-covid-19-vaccine-trial-due-to-study-participant-illness-1020578.html>

Domestic Events of Interest

Canada

Illicit drug overdose deaths increase in north while other BC regions decline

Source: The Rocky Mountain Goat

Unique ID: [1008033870](#)

"At a time where some other health authorities might be seeing slight improvement, just slightly, with some decreases in their overdose deaths, we're actually seeing an increase,"...

Northern Health has the highest rate of illicit drug overdose deaths in the province, with the Northeast, North Interior, and Prince George particularly hard hit, according to public health officials.

"At a time where some other health authorities might be seeing slight improvement, just slightly, with some decreases in their overdose deaths, we're actually seeing an increase," said Northern Health Medical Health Officer Dr. Rakel Kling. "Which is very troubling."

For the second month since the pandemic began, the number of people who died of illicit drug overdoses in the province dropped, even as it continued to rise in the North, according to the B.C. Coroners Service. The number of people who died of overdose had been reducing from peak levels in 2017 and 2018 until the pandemic hit. Overdose deaths in B.C. escalated from 73 people in February to around 180 people in each of May, June and July. August saw the first substantial decline of deaths – 147 people – since

COVID-19 public health measures were implemented.

Although 60 per cent of the 8,091 people who have died in the province since 2010 resided in the Lower Mainland, the highest rate of people dying from illicit drug overdoses occurred in the North where a total of 476 people have died (40 people per 100,000 population). The province as a whole lost 31 people per 100,000.

In Canada, between January 2016 and March 2020, 16,364 people have died of apparent opioid-related deaths. About 90 per cent of people who have died are aged 19 to 59 and around 80 per cent are men. In 2019, one person died of an illicit drug overdose in the McBride and Valemount health service area. At that time, Prince George city central had the highest rates of overdoses in Northern Health. Illicit drugs are defined as heroin, cocaine, MDMA, methamphetamine, illicit fentanyl, along with medications not prescribed to the person who overdosed, and combinations of street drugs and prescribed medication.

Fentanyl or its analogues have been detected in about 80 per cent of all illicit drug overdose deaths. Fentanyl is 50 to 100 times more powerful than heroin. Legal fentanyl is a common anesthetic used to relieve pain. Illegal fentanyl is often mixed with other substances, usually without the substance user's awareness or consent. More than 90 per cent of all overdose deaths have been deemed accidental. There are a range of reasons why someone might develop a substance use disorder, said Nick Rempel, Northern Health strategic lead for mental health and substance use.

"We know that lived experience or living experience with trauma is a major contributor to substance use and to addiction," Rempel said. "As well as a myriad of socio-economic factors that play a role, and some genetic components as well."

The isolation of a rural or remote lifestyle is another risk factor of Northern living, said Rempel.

Throughout the North, few communities have been immune. From June 2016 through Aug. 20, 2020, Northern Health reported 1,803 overdoses (fatal and non-fatal) in emergency rooms and health clinics across 22 Northern communities, with 984 occurring in Prince George alone. More than 118 overdoses were reported in Dawson Creek, at least 131 in Quesnel, and 77 or more in Fort St. John.

In 2017, fewer than five illicit drug overdoses were reported in Valemount. (In rural communities, small numbers of people who overdosed are listed as 'less than five' by BC Centre for Disease Control).

As drug overdose deaths increased during the pandemic, the Province expanded those who can prescribe opioid replacement treatment to include registered nurses, pharmacists and nurse practitioners. Treatment can also be accessed by calling 811.

Standard practice in Northern Health is to engage people in an alternative opioid treatment and provide take-home Naloxone, Rempel said.

Naloxone is an easily injected medication that can reverse an opioid overdose. Almost 800,000 Naloxone kits have been distributed in B.C., with more than 66,000 kits used to reverse an overdose.

One modelling study published by BCCDC in the Lancet estimated alternative opioid treatment, supervised injection sites and take-home Naloxone kits prevented more than 3,000 overdose deaths in B.C. between April 2016 and December 2017, with 93 overdose deaths averted in the North. Naloxone kits can be picked up for free from pharmacies, hospitals, health clinics and agencies, including the Valemount Health Centre, the McBride Health Unit, the Clearwater Health Unit, and Clearwater Pharmasave.

<https://www.therockymountaingoat.com/2020/10/illicit-drug-overdose-deaths-increase-in-north-while-other-bc-regions-decline/>

Canada

Permanent CTS site set to open in Kitchener as region sees overdose deaths rise

Source: CBC News

Unique ID: [1008033851](#)

A permanent consumption and treatment services (CTS) site opens in Kitchener on Wednesday as Waterloo region sees an increase in overdose deaths. Dr. Hsiu-Li Wang, Waterloo region's acting medical officer of health, said the site represents one piece of a larger harm reduction and opioid strategy to reduce fatal overdoses in Waterloo region. "The opioid crisis continues to be one of the most important public health...

A permanent consumption and treatment services (CTS) site opens in Kitchener on Wednesday as Waterloo region sees an increase in overdose deaths.

Dr. Hsiu-Li Wang, Waterloo region's acting medical officer of health, said the site represents one piece of a larger harm reduction and opioid strategy to reduce fatal overdoses in Waterloo region.

"The opioid crisis continues to be one of the most important public health concerns across Canada, across Ontario and in Waterloo region," Wang said during a virtual launch held Friday.

"Up to [Thursday], 68 people in our community lost their lives to suspected opioid overdose — surpassing the total number of deaths in 2019," she added.

"Opioid overdoses continue to happen because of the unpredictability of the illicit drugs supply — often containing fentanyl — and because of the stigma and shame associated with addiction and how that influences a person's decision to use alone."

Site will allow health authorities to expand services

Kitchener Coun. Sarah Marsh thanked the region "for taking this bold step" in creating the CTS site.

"It is concerning to me the number of overdoses that we do have already this year, and it seems we are on track to surpass the 2017 highest number," she said.

There were 38 opioid-related deaths in Waterloo region in 2016. The number surged to 71 in 2017. There was a 303 per cent increase in the number of opioid-related overdose calls to paramedic services between 2015 and 2017.

Dr. Chris Steingart, founder and executive director of Sanguen Health Centre, which collaborated with the region in establishing the site, said it will allow health authorities to expand the services they have been providing at the temporary site for the past year.

He said an incredible and almost unimaginable amount of work went into establishing the permanent site, while pointing to the challenges caused by the COVID-19 pandemic.

"COVID has put a lot of barriers in place for all of us and the challenges that people living with overdose risk face on a day-to-day basis; everything has just been made more difficult by this COVID pandemic," Steingart said.

"This opioid crisis and overdose risk, I think has been heightened by COVID. For most, if not all of the folks that are accessing these services, COVID has been nothing more than another barrier getting in the way of access to needed services," he added.

"If we can evolve as we go through COVID in the context of what has become a new normal ... we're going to be in a better position to be able to keep people safer and help people move, whatever their path is, to a safer and healthier existence."

The site — located at 150 Duke St. W. — will be opened on a seven-day a week basis from 9 a.m. to 9 p.m.. It's staffed with two nurses in the consumption room, support workers and a peer in the post-consumption area, a supervisor and security officers.

"We all know that supervised consumption isn't the only answer to the opioid crisis but remains a critical life-saving part of our response and we are so happy to be able to expand that response," Steingart said.

Waterloo Region Police Service Chief Bryan Larkin, who also spoke at the launch, reaffirmed the service's full support of the integrated drug strategy as well as the introduction of a full time consumption treatment site.

"We do believe that this is an important tool in the overall approach and a holistic approach and system-based approach to the complexity and complex challenges that all of us face on a regular day," he said. Meanwhile, Kitchener Mayor Berry Vrbanovic said his city has been taking the various issues associated with street level drugs for quite some time.

"Being the largest urban centre in the region ... we saw a lot of these issues before other places in the region did," he said.

"I was really proud of our council for its support of this, despite the challenges, and recognizing that at the end of the day ... these are our neighbours, these are the brothers, sisters, aunts and uncles of people that we know and people in our community," he said.

"At the end of the day, they are human beings who need to be looked after from a medical perspective and I think this site has demonstrated what can be achieved when we start to look after people in a respectful, meaningful, caring way," Vrbanovic added.

Vrbanovic said the site has already made a difference and will continue to make a difference.

"I think we all hope we get to the day when we don't need these sites but in the meantime, I also hope ... that where they are needed those communities can appreciate how much this type of facility can actually make things better as opposed to make things worse," he said.

<https://www.cbc.ca/news/canada/kitchener-waterloo/permanent-cts-site-kitchener-1.5757501>

Canada

With demand increasing, Quebec pharmacies fear flu vaccine shortage

Source: Montreal Gazette

ID: 1008037896

Doses of flu vaccine haven't even arrived yet and some pharmacies in Quebec are already facing shortages due to pandemic-induced interest, says the head of the association representing pharmacy owners in the province.

"Our appointment slots are booking up quickly," said Benoit Morin, president of the Association québécoise des pharmaciens propriétaires. "We're reaching the limit of the number of appointments versus the number of vaccines we ordered."

Quebec pharmacies more than doubled their order of flu vaccine for seniors and anyone else who's eligible for a free flu shot this year to 650,000 doses from just over 300,000 last year in anticipation of greater demand, he said.

Vaccine deliveries are expected to start arriving this week, Morin added, as the province prepares to launch the flu shot campaign on Nov. 1, as it does every year.

But because of the precautions and physical distancing measures that are required to limit the spread of COVID-19, anyone who wants a flu shot this year has to book an appointment online or by phone in advance, Morin said. Last year, clients could show up at their local pharmacy and wait in line for a flu shot from the pharmacy nurse.

Article content continued

Morin said he ordered 300 doses of the flu vaccine for the pharmacy he co-owns with his brothers on Sherbrooke St. E. in Montreal's Mercier—Hochelaga-Maisonneuve borough, and all 300 appointments were booked over a weekend. He's ordered more doses from his supplier, he added, but he's been given no guarantees there'll be more.

In fact, an informal survey of pharmacies on Tuesday found a few were booking appointments only in early January at this point.

It's not surprising, Morin said, because some pharmacies may only offer vaccinations once a week or they only have one nurse and one pharmacist to administer the shots.

Quebec public health officials have expressed concern that a confluence of flu season and the second wave of COVID-19 could overwhelm the health-care system. Australia, which just ended its winter, saw greater public demand for flu shots in the wake of the pandemic. As a precaution, the Quebec government increased its order of the flu vaccine by 25 per cent over last year to over two million doses.

Article content continued

Morin said his association is working with the Quebec health ministry, the public health department and vaccine suppliers to possibly redirect some doses to pharmacies if demand or capacity is lower in some other settings where flu shots are usually offered.

At a news conference on Tuesday, Quebec Health Minister Christian Dubé acknowledged that pharmacists are concerned about getting enough doses in view of the high demand. He said he's tasked deputy health minister Dominique Savoie to ensure that deliveries of the vaccine arrive smoothly in stages.

"But I think that we are under control," Dubé said, adding that he sees "no point in supplying the pharmacies for the entire needs they have for the next few months where we could ship it by two weeks at a time."

Article content continued

New Quebec legislation introduced in June 2019 and passed in March allows pharmacists in the province to administer flu shots for the first time this year. Bertrand Bolduc, president of the Ordre des pharmaciens du Québec, told the Montreal Gazette last week that over 2,000 of the order's 6,500 members who work in pharmacies in the community had already completed the training to give vaccinations.

Pharmacists join doctors, nurses, nursing assistants, respiratory therapists and midwives in being allowed to give vaccinations in Quebec.

Quebecers can, of course, get flu shots in places other than pharmacies. However, Morin said the pandemic throws some things into question, such as how many nurses will be available to administer flu

shots when they're on the front line dealing with COVID-19 and how many people CLSCs can handle at one time.

Article content continued

However, the Quebec Health Ministry said on Tuesday that it's attempting to recruit other professionals for the flu campaign this year. The government has sent an invitation to 21 professional orders, including those representing acupuncturists, dentists, optometrists, podiatrists, social workers and sexologists, to help give flu shots, ministry spokesperson Marie-Hélène Émond said.

Unlike most provinces in Canada that offer universal flu immunization, Quebec provides free vaccines only to targeted groups deemed to be at greater risk of complications from the flu, health-care workers and caregivers and family members who live in the same household as a child under six months old or someone in a higher-risk group. Everyone else has to pay a variable fee for a private flu shot.

Article content continued

Currently, the Quebec government considers the higher-risk group to include anyone aged 75 years and older, people of any age with a chronic illness, such as diabetes, heart disease and asthma, and pregnant women in their second or third trimester.

Up until 2018, anyone over 60 years old was considered to be at higher risk, as were children aged six months to 23 months. While they've been removed from the higher-risk category, the provincial government says it will offer them the flu shot for free this year because of the pandemic.

Meanwhile, the 650,000 doses ordered by Quebec pharmacies through the provincial healthy ministry are only intended for the people whose flu vaccine is covered by the government, Morin said.

Quebec pharmacies cut in half their private orders for additional flu vaccine for those not in the high-risk groups and who have to pay for the shot, from 200,000 doses last year to 100,000 this year, he said. Pharmacies set their own price for the private flu shot, Morin added, but it's generally \$15 to \$20 plus the cost of the dose.

<https://montrealgazette.com/news/local-news/with-demand-increasing-quebec-pharmacies-fear-flu-vaccine-shortage>

Canada

Montreal public health says Legionnaires' outbreak in LaSalle under control

Source: Global News

ID: 1008037893

A total of eight people have been hospitalized in Montreal in connection with a probable outbreak of Legionnaires' disease.

Public health officials, however, believe the situation is now under control.

Legionnaires' disease is caused by breathing in fine water droplets suspended in the air that are contaminated with Legionella bacteria. Its symptoms include cough, fever, chills aches and shortness of breath.

At the end of September, Montreal public health (DRSP) indicated that seven cases had been reported between Sept. 9 and 22, among LaSalle borough residents.

The DRSP then asked the health network to be vigilant in order to identify other cases, and an eighth one was added to the list.

The latter was reported in the same area on Sept. 30, but the person had begun to fall ill on Sept. 15. While eight people were hospitalized, no deaths were reported.

Public health has been busy trying to identify the source of contamination by examining water cooling towers, splash parks in the area, construction sites and other areas where work on the city's water network were being carried out.

A public health team was also deployed in the field in order to find other potential sources and contact citizens for this purpose.

Authorities, however, failed to pinpoint the contaminated water source.

Given the timeframe from which the last case was identified, "it is therefore likely that the source has been controlled," said Public Health, which also believes the eight patients were likely exposed to the same source.

"The lack of new cases since leads us to believe that the outbreak is over, but we are continuing to monitor the situation," health authorities said.

Each year, about 50 Montrealers contract this disease.

In 2012, an outbreak of Legionnaires' disease in Quebec City killed 14 people after 181 contracted the illness.

— With files from Global's Annabelle Olivier

<https://globalnews.ca/news/7395382/montreal-legionnaires-outbreak-lasalle/>

International Events of Interest

Sudan

56 die of fever in northern Sudan

Source: Dabanga Sudan

October 12 - 2020 ED DEBBA / MEROWE

More than 2,000 people in Sudan's Northern State have suffered from high fevers and bleeding in the past two weeks. 56 people have died. The total number of COVID-19 infections in the country reached 13,685 on Saturday.

The Northern State's Ministry of Health said in a press statement yesterday that it is "directly supervising the situation in 13 hospitals and 47 health centres in Ed Debba and Merowe localities". Two weeks ago ten people had already died.

The ministry further said it will organise awareness campaigns to prevent the spread of the disease.

In the past, 'fevers accompanied by bleeding' turned out to be chikungunya, a mosquito-borne fever that can cause death. Two years ago, dozens of people died in Kassala as a result of chikungunya infections. Last week, 41 cases of chikungunya were reported in West Darfur.

COVID-19

The Sudanese Ministry of Health reported a total number of COVID-19 infections of 13,685 cases on Saturday.

The Health Ministry stressed that people need to adhere to the guidelines, including social distancing, washing of hands, and immediate reporting when any of the symptoms appear.

<https://www.dabangasudan.org/en/all-news/article/56-die-of-fever-in-northern-sudan>

South Sudan

South Sudan dismiss rumors of Ebola outbreak (Media)

Source: africa.cgtn

October 12, 2020

South Sudan on Monday denied reports of an Ebola outbreak following the mysterious deaths of three people in the northwestern town of Raja last week.

Local media reported last week that three people died of suspected hemorrhagic fever in Raja county, raising fears of an Ebola outbreak in the conflict-torn east African country.

John Rumunu, director of preventive health services at South Sudan's ministry of health said there is no Ebola outbreak in the country.

"I would like to empathize that there is no Ebola virus in South Sudan and there is no reason to panic," Rumunu told journalists during the health ministry's weekly briefing on Monday.

The official said all the suspected cases were tested for Ebola and the results turned out negative.

"The ministry of health would like to inform the public that the samples tested negative for Ebola Virus Disease and other forms of Viral Hemorrhagic Fever," Rumunu said.

Rumunu said the health ministry is working with partners to establish the cause of death of the three people and also strengthen preventive measures as South Sudan's western neighbor, Democratic Republic of Congo continues to battle the Ebola virus.

<https://africa.cgtn.com/2020/10/12/south-sudan-dismiss-rumors-of-ebola-outbreak/>

Researches, Policies and Guidelines

Canada

Fresh produce industry never likes testing such as that now imposed by Canada

Source: Food Safety News

Unique ID: [1008032124](#)

Fresh produce industry never likes testing such as that now imposed by Canada By Dan Flynn on October 13, 2020 The nation's only produce surveillance program did not survive the first term of the Obama administration. When it did exist, USDA's Microbiological Data Program (MDP) used to conduct 80 percent of all federal produce testing for foodborne pathogens. Fresh produce industry never likes testing such as that now imposed by Canada

October 13, 2020

The nation's only produce surveillance program did not survive the first term of the Obama administration. When it did exist, USDA's Microbiological Data Program (MDP) used to conduct 80 percent of all federal produce testing for foodborne pathogens.

The program paid labs at Land Grant universities to test local produce as it came out of the ground. The national budget for the MDP did not top \$5 million, a hardly noticeable amount in Washington D.C.

But from the moment it began during the first Bush administration, the fresh produce lobby wanted the MDP dead. It was too successful, working as a "tripwire," interrupting fresh produce distributions whenever dangerous pathogens were discovered.

Fresh produce works fast, moving from the field to your dinner plate in only a matter of days, and sometimes hours. Anything that interrupts that fast flow is a problem for the industry.

So if the little MDP was too much for the fresh produce industry to bear, you can imagine the hurt Canada is imposing, at least on a temporary basis, on California's Salinas Valley, according to leafy greens growers there.

Starting Oct. 7 and continuing at least through Dec. 31, shipments of romaine lettuce grown in the Salinas Valley must be tested For E. coli O157:H7 before Canada will accept them as imports.

The Packer, a fresh produce industry newspaper, reports the added food safety compliance costs would add \$1 to \$2 per carton to producer costs.

Importers must either prove that romaine being imported to Canada is not from Santa Cruz, Santa Clara, San Benito, or Monterey counties, or else provide certificates of analysis from an accredited laboratory that confirms the lettuce has below-detectable levels of E. coli before it is distributed in Canada.

Testing can be accomplished in the U.S. or Canada so long as the lab is accredited.

The reoccurring E. coli outbreaks, prior to 2020, are the reason for Canada's cautionary approach for the current import season.

Canada produce suppliers are attempting to source romaine from outside the Salinas Valley, known as "America's salad bowl." Once local lettuce grown in Canada is no longer available, therefore some suppliers will have no choice but to obtain products from California.

"We are trying to understand (the import requirements) to make sure that we're in compliance with the regulations, and we're talking to the shippers and seeing what they think about it," Van Whole Produce Ltd.'s Leonard Jang told The Packer.

Jang said the receiver likely will want E. coli testing done at the shipping point, not in Canada. That's because if it fails the test in Canada, the disposal costs would fall on the supplier. And, adding to industry frustration, all testing will likely add two additional days of cold storage costs.

Import requirements for U.S. romaine are now being continuously updated by the Arizona and California Leafy Green Marketing Agreements, the Canadian Horticultural Council, the Canadian Produce Marketing

Association, the Produce Marketing Association in the U.S., the United Fresh Produce Association, and Western Growers.

They are also wondering what is going to happen at the next seasonal transition when romaine harvests move from Salinas to the desert growing regions.

"I think the concern is that if this is a precedent set by the Canadian government and the way that they want to manage romaine from a longer-term standpoint, then there will be an economic impact," Western Growers' De Ann Davis, also told The Packer. "People will be more conservative in planting and it will impact trade."

Canada's requirements are very difficult to comply with, according to Scott Horsfall, CEO of the California LGMA. He fears the temporary rules could become precedents for other commodities.

"The imposition of this type of requirement at the last minute is really problematic," he said. Canada's post-harvest E. coli testing requirement hasn't proven to be an effective way to protect consumers in the past.

Horsfall said it is not possible to "test your way to food safety." He pointed out the importance of preventive measures on the farm and in processing facilities.

"I think the hope is that, through discussions and through collaboration with the two governments, that something a little more reasonable can be accomplished," Horsfall said. He predicts romaine shipments to Canada during the next couple of months will be on the decline.

Declines of \$11 to \$13 million a week are predicted for California romaine shipments to Canada over the several weeks

The U.S. Food and Drug Administration is reportedly in talks with the Canadian Food Inspection Association about the future of the testing requirement. Industry representatives on both sides of the border are tracking those negotiations.

[https://www.foodsafetynews.com/2020/10/fresh-produce-industry-never-likes-testing-such-as-that-now-imposed-by-canada/?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed:%20foodsafetynews/mRcs%20\(Food%20Safety%20News\)](https://www.foodsafetynews.com/2020/10/fresh-produce-industry-never-likes-testing-such-as-that-now-imposed-by-canada/?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed:%20foodsafetynews/mRcs%20(Food%20Safety%20News))

United States

CDC and the American Mosquito Control Association Collaborate on First-ever Comprehensive Resources for Mosquito Control in Areas Affected by Natural Disasters

Source: CDC

Media Statement

For Immediate Release: Tuesday, October 13th, 2020

Contact: Media Relations

(404) 639-3286

The Centers for Disease Control and Prevention (CDC) and the American Mosquito Control Association (AMCA) have collaborated to provide the first-ever comprehensive volume of resources to guide mosquito control in areas affected by natural disasters, such as hurricanes and flooding in this special edition of the Journal of the American Mosquito Control Association (JAMCA). Hurricanes present several public health concerns, including a rapid surge in mosquito populations, which can disrupt recovery efforts and could lead to increased risk of mosquito-borne diseases such as West Nile.

Effectively controlling mosquitoes after a natural disaster can help communities recover more quickly and avoid potential infectious disease outbreaks from endemic viruses, such as West Nile. The resources in the issue will provide local and state entities with information to help them prepare and respond to natural disasters as it relates to mosquitoes and mosquito-borne diseases.

In this special edition, there are real-world examples, research, and lessons learned from authors representing federal and state agencies, mosquito control programs and health departments in Florida, Georgia, Mississippi and Texas, research organizations, and the military.

<https://www.cdc.gov/media/releases/2020/s1013-mosquito-control-reource.html>

