



DAILY NEWS BULLETIN

LEADING HEALTH, POPULATION AND FAMILY WELFARE STORIES OF THE DAY
Monday 202101227

Covid

Discipline must to fight Covid, says Prime Minister Narendra Modi (The Tribune: 202101227)

<https://www.tribuneindia.com/news/nation/discipline-must-to-fight-covid-says-prime-minister-narendra-modi-354912>

Discipline must to fight Covid, says Prime Minister Narendra Modi

Prime Minister Narendra Modi on Sunday said individual alertness and discipline are a big strength of the country in the fight against the Omicron variant of Covid.

Mann ki baat: Collective strength the key

It is our collective strength which will defeat Covid. We have to enter 2022 with this sense of responsibility. Crossing the 140 million vax dose mark is an achievement of each and every Indian. Narendra Modi, PM

In his “Mann Ki Baat” radio broadcast, Modi said India has done an “unprecedented” work in its inoculation drive if its vaccination numbers are compared with global figures. He, however, also asked people to maintain caution against the new variant of the virus.

“The Omicron variant is being constantly reviewed by our scientists. Every day, they are getting new data and steps are being taken based on their suggestions,” Modi said.

Individual alertness and discipline are a “big strength” of the country in the fight against the new variant of coronavirus, he said.

“It is our collective strength which will defeat Covid. We have to enter 2022 with this sense of responsibility,” said the Prime Minister.

“Crossing the 140 million vaccine doses is an achievement of each and every Indian. This shows the trust of every Indian in the system,” he added.

In his address, Modi also paid tribute to Group Captain Varun Singh, who died last week after battling for life for several days after a chopper crash on December 8 that killed Chief of Defence Staff General Bipin Rawat, his wife, and other personnel.

“He inspired millions of Indians,” Modi said.

The Prime Minister also spoke about Arunachal Pradesh’s conservation efforts and said it was praiseworthy that the people of the state were willing to surrender their airguns to save birds.

So far, more than 1,600 airguns have been surrendered.

Omicron less severe than Delta

Omicron less severe than Delta: UK studies (The Tribune: 202101227)

Hospitalisation rate lower for new variant

People line up for Covid tests in the Chinese city of Xi'an. AP/PTI

Two studies based on real-world Covid UK data on Thursday reported that the Omicron variant is less severe than the Delta variant, with fewer infected people requiring hospitalisation.

Research by Imperial College London found that people with PCR-confirmed Omicron are 40 to 45 per cent less likely to spend a night or more in hospital compared with the Delta variant.

Those with Omicron after a previous infection are 50 to 60 per cent less likely to be hospitalised, compared with those with no previous infection. However, the risk of hospitalisation is higher for those who are unvaccinated, according to the study.

“Our analysis shows evidence of a moderate reduction in the risk of hospitalisation associated with the Omicron variant compared with the Delta variant,” said Imperial’s Professor Neil Ferguson, who is the scientist associated with the UK’s first complete stay-at-home lockdown during the first Covid wave in March 2020.

“However, this appears to be offset by the reduced efficacy of vaccines against infection with the Omicron variant,” he cautioned.

The “high transmissibility” of Omicron could lead to health services facing “increasing demand” if cases grow at the rate seen recently, the scientist said after the UK recorded over 1,00,000 daily Covid infections on Wednesday. — PTI

High fatalities in S Korea

109 persons die in last 24 hours

Omicron: New South Wales reintroduces mask mandate

Curbs in Chinese city

Beijing: China plunged the city of Xi'an, which has a population of 13 million, into lockdown on Thursday to stamp out an increase in Covid infections, just weeks before it is set to host Winter Olympics. AP

COVID-19 PANDEMIC

DGCI nod to Covaxin for use in children above 12 years with certain conditions (The Tribune: 202101227)

<https://www.tribuneindia.com/news/nation/dcgi-grants-emergency-use-authorisation-to-covaxin-for-children-above-12-354406>

The Drugs Controller General of India (DCGI) has granted emergency use authorisation to Bharat Biotech's Covaxin for children above 12 years with certain conditions, sources said on Saturday.

The Subject Expert Committee on COVID-19 of the CDSCO on October 12 after deliberating Bharat Biotech's EUA application had recommended granting emergency use approval to Covaxin for use in the 12-18 years age group with certain conditions.

"The recommendations of the SEC were evaluated by another experts committee after which DCGI had sought additional data from the firm," a source said.

Milder Omicron

Research offers hope, but concerns remain (The Tribune: 202101227)

<https://www.tribuneindia.com/news/editorials/milder-omicron-35406>

It's being described as a qualified good-news story, but with a strict warning against letting the guard down and 'getting ahead of ourselves'. Two studies suggest that compared with previous variants of the coronavirus, the Omicron infections more often result in mild illness, offering hope that the surge may be less disastrous than feared. Though early evidence suggests that fewer people are needing hospital treatment, the bigger concern is the sheer number of cases that could overwhelm hospitals because of the incredible rate of transmission. Already, a lakh cases have been reported in a single day in the UK. The reduction in severity is considered to be a combination of the fundamental properties of the new variant as well as high levels of immunity from vaccinations and previous infections. A deeper understanding of the severity of Omicron is still being advised.

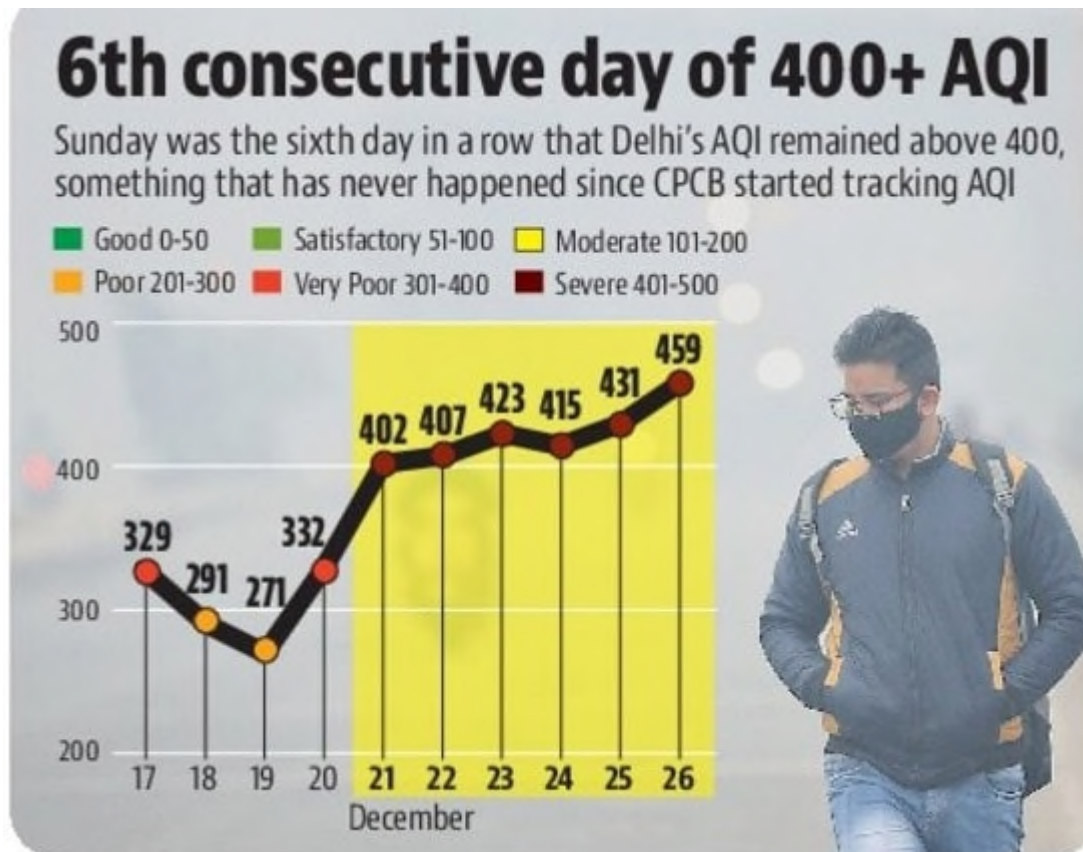
As the number of Omicron cases in the country crosses the 350-mark, a poignant reminder of the horrifying scenes of the second wave has come from the Allahabad High Court. The judge has been forthright in pointing to the likely contribution of panchayat elections in Uttar Pradesh and West Bengal Assembly polls to a rise in infections that led to many Covid-19 deaths. The certainty of lakhs attending rallies without observing any Covid protocols has prompted the Bench to urge the Centre for putting a stop to political gatherings in election-bound states, and even consider putting off the UP polls.

It is a tough call and there will be fierce resistance, but the Election Commission, which faced criticism for inaction earlier this year, needs to mandate lesser crowds and virtual campaigning wherever possible. As the PM has asked officials to remain alert and tasked them with ensuring fully-functional oxygen-supply equipment in states, making an exception for the elections will only encourage non-compliance elsewhere. Already, to overcome the reluctance to take the jab, stringent curbs have been announced for the unvaccinated by several states, including Punjab and Haryana.

Pollution

Delhi sees worst string of 'severe' AQI for Dec (Hindustan Times:202101227)

<https://epaper.hindustantimes.com/Home/ArticleView>



The air quality in Delhi stayed in the severe zone on Sunday — the longest spell of such air days since 2015, when the Central Pollution Control Board (CPCB) launched the air quality index in the country. Delhi recorded an average AQI of 459 Sunday, the worst since November 12, when the index had a reading of 471, CPCB data shows. According to experts, local sources of pollution and meteorological factors such as poor wind speed have led to higher concentration of pollutants close to the surface. P3

Covid Surge- Omicron (The Asian Age:202101227)

<http://onlinepaper.asianage.com/articledetailpage.aspx?id=16059603>

■ Experts advise different vaccine for 'booster' jab; suggest gap of 9-12 months after 2nd dose

Amid fresh Covid surge, Omicron tally above 500

SANJAY KAW
with agency inputs
NEW DELHI, DEC. 26

A day after Prime Minister Narendra Modi announced plans to roll out a booster dose against Covid-19, the Central government is in the process of fixing a time gap of nine to 12 months between the second and third dose of the vaccine for its nationwide drive against the deadly virus. Some experts in the country's top technical advisory body on Covid-19 vaccinations have recommended that the booster dose should be a vaccine based on a platform different from that of the first two doses.

The PM on Saturday night said healthcare and frontline workers as well as senior citizens aged above 60 years with comorbidities would be provided a "precautionary" (third/booster) dose from January 10, while children in the age group of 15 to 18 years will get their first jab from January 3.

From today, night curfew will be back in Delhi: 11 pm-5 am

BHASKAR HARI SHARMA
NEW DELHI, DEC. 26

Night curfew will be imposed in Delhi from December 27 amid a rapid rise in Covid-19 cases, according to people familiar with the development. The night curfew will remain in force from 11pm to 5am.

Delhi reported 290 Covid-19 cases, the highest in six months, and one related death in the last 24 hours amid the spread of

the Omicron variant, according to data shared by the Delhi government's health department. The case positivity rate has climbed to 0.5 per cent — a critical level — and could trigger the "yellow alert" if it remains there for two consecutive days. Delhi, with 79 Omicron cases, accounts for the second-highest number of infections caused by the new coronavirus variant in the country.

■ More on Page 2

The need to provide booster doses has been necessitated due to the fast spread of the new Covid-19 variant Omicron. About 500 Omicron cases have already been detected across 19 states and Union Territories. Also, 6,987 more people tested positive for Covid-19 in the

past 24 hours, taking the country's total caseload to 3,47,86,802. The death toll due to the virus has now risen to 4,79,682 with 162 fresh fatalities reported in the same time span.

Delhi reported 290 fresh Covid-19 cases, the highest since June 10, and one

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Vaccine

Protective' vaccine doses will strengthen defences against Covid (The Indian Express:202101227)

<https://indianexpress.com/article/opinion/columns/protective-vaccine-doses-defences-against-covid-7691701/>

<https://indianexpress.com/article/opinion/columns/tackling-a-public-health-challenge-is-a-team-effort-7691704/>

● K Srinath Reddy writes: Increase in ambit of vaccination comes as a relief to elderly, frontline workers, assuages parents' concerns amid threat posed by the Omicron variant

A municipal corporation worker administers a dose of Covid-19 vaccine to a beneficiary in Navi Mumbai (Express photo by Narendra Vaskar)

An unheralded announcement by Prime Minister Narendra Modi, on December 25, ended the suspense on when additional Covid vaccine shots would be provided to individuals at high risk of either age-related severe disease or repetitive occupational exposure to high viral loads. These groups would be eligible for “protective” third shots from January 10, 2022. This terminology serves two purposes. It is scientifically accurate to describe the first dose as the primer and the second dose as the booster. All additional doses are immunity enhancement doses that augment protection. Avoidance of the term “booster” also signals that previously administered vaccines still carry some protection. It also reassures those who are not eligible to receive the third dose as they are deemed to be at low risk.

To extend the protective cordon further, children in the 15-18 year age group will be eligible to get vaccinated from January 3, 2022 through a full vaccination schedule. Though it has been generally observed all over the world that infected children mostly experience mild illness, a high incidence of infection in the highly mobile age group may make some of them quite sick or predisposed to long-term complications. The move to provide vaccine protection to older children will comfort their parents and teachers. Coincidentally, regulators have now approved the use of Bharat Biotech's Covaxin in the 12-18 age group. It joins Zydus Cadila's DNA vaccine (ZyCoV-D) as an approved paediatric vaccine.

Editorial |Decisions on shots for 15-18, boosters are welcome

The much-awaited announcement on permitting third doses comes as a relief to many elderly persons and frontline health workers who have been anxiously weighing the risks posed by a rapidly spreading new variant — Omicron. They are concerned that the immunity they acquired

in the first half of 2021 is unlikely to be protective this time against Omicron or even Delta which is still around. Accumulating global data and available sparse Indian data on breakthrough infections and re-infections align with the conclusion that Omicron has a high propensity for immune escape. Comfortingly, global data also reveal that third dose “boosters” will largely restrict Omicron and Delta infections to mild clinical illness which does not require hospitalisation or result in death.

Though the decision to expand vaccination coverage has been widely welcomed, some issues require clarification. Those guidelines may be provided by the government in the coming days. The questions pertain to the mode of ascertainment of eligibility for the elderly, the choice of vaccine for the third dose and the procedure for registration and certification.

‘Protective’ vaccine doses will strengthen defences against Covid

Xi Jinping’s mission to dominate the Chinese Communist Party

Tackling a public health challenge is a team effort

The eligibility of frontline healthcare workers can be easily ascertained, as was done in the first half of 2021. Eligibility criteria for the elderly now come with a qualifier that a doctor must advise a third dose on the grounds of a “comorbidity” being diagnosed. Earlier, age alone was the criterion for registering an elderly person, aged 60 years or above, for Covid vaccination. Nether a documentary proof of comorbidity nor a physician’s referral was needed. Will anyone above 60 years be able to register even now, without a formal document attesting co-morbidity? I hope so. If such proof is required, it may place poor people without ready access to a doctor at a disadvantage, especially in rural areas. In any case, there is a high prevalence of comorbidities in the 60+ age group. That justifies the presumption of the presence of a comorbidity in any person aged 60 years or older. The COWIN app will probably be upgraded to provide the pathway for freshly eligible older adults and children.

There is another group that needs to be considered as a priority group for administering the protective dose. These are persons of any age who are immunocompromised. They have low immunity due to a disease that makes them immunodeficient or are receiving therapies that suppress their immunity. Two doses of the vaccines are likely to elicit a weak or short-lasting immune response in such persons. Additional vaccine doses may raise their immunity levels and protect against severe Covid. Perhaps revised guidelines from the government will explicitly describe the eligibility criteria for these groups.

Presently, only two vaccines are widely available in our vaccination programme. Will there be more soon? This question is pertinent because global experience suggests that a “heterologous” booster (a vaccine different from the previous two doses) is better than a ‘homologous’ repeat of the same vaccine. There is conflicting evidence from studies about how effective a third dose of the AstraZeneca vaccine is against Omicron. We do not yet have national data on boosters. However, an accidental crossover in a small number of persons in Uttar Pradesh produced some evidence that a relay vaccination of Covishield and Covaxin resulted in a high immune response.

Decisions related to heterologous and homologous vaccines will await government guidelines. Even if left to a physician's judgement, the supply chain situation will guide the selection of the third dose. If more varieties of vaccines are available, the choice of a heterologous third dose will be easier. In that context, the arrival of the subunit protein vaccines will be eagerly awaited, even as nasally administered mucosal vaccines are being trialled.

Restricting eligibility for the third dose to high risk groups of adults and older children at this stage is a wise decision for two reasons. The supply chain of vaccines is still not wide enough to immediately cover all adults and all children through the expanded programme. Even as production volumes are rising, India has to meet international obligations as well. Further, our vaccination teams cannot focus exclusively on Covid vaccination. Routine immunisation of children and pregnant women should not be neglected, as it is a high public health priority that lost ground in the initial stages of the pandemic. Extension of the protective doses to other adults and coverage of younger children can be implemented later when our domestic supplies of Covid vaccines are more abundant and vaccination teams can take up the full range of vaccinations

public health challenge

Tackling a public health challenge is a team effort (The Indian Express:202101227)

● Anand Krishnan writes: Technical, bureaucratic and political efforts must come together

Scientists should realise that they need politicians and administrators to achieve public health gains and should learn to give them due respect. (Illustration by C R Sasikumar)

All major public health problems need combined technical, bureaucratic and political efforts to effectively address them with an understanding and respect for each other's role. Technical people or people of science are characterised by training and expertise in a specific area which they are expected to regularly update and provide advice on based on evidence. Policymakers or elected representatives are the ones who choose the final set of interventions and arrange for the resources to implement them. Bureaucrats, or those engaged in administration, work through a hierarchical system to implement these interventions or programmes to achieve a given result. While technical people derive their power from their knowledge and expertise, bureaucrats exert their power due to their position in the hierarchy, and politicians derive their power and legitimacy directly from the people. All are expected to work to maximise the public good without any personal agenda.

In simpler terms, technical people identify possible solutions and their characteristics, politicians choose the intervention mix, provide resources and the bureaucrats implement them. Let's take the example of routine vaccination. Sequential actions and decisions are related to the generation of evidence on the disease burden and effectiveness of a vaccine, recommendations by the National Technical Advisory Group on Immunisation (NTAGI), acceptance of these recommendations by policymakers and allocation of sufficient resources and finally, implementation in terms of arranging logistics and ensuring supply by administrators. The field level implementation would again be carried out by technical implementers, usually monitored by a lower-level bureaucrat.

'Protective' vaccine doses will strengthen defences against Covid

Xi Jinping's mission to dominate the Chinese Communist Party

Tackling a public health challenge is a team effort

However, we know that in real life all this does not happen sequentially, and overstepping of boundaries, knowingly or unknowingly, occurs by all three sets of people. During the current pandemic, many scientists have openly taken positions on different pandemic response options including lockdowns or school closures, which involve issues way beyond science. The use of mathematical models to justify a particular political point of view was noted. The choice of people in NTAGI (National Technical Advisory Group on Immunisation) may have political overtones. Many high-level technical people are also known to use their personal influence over policymakers to facilitate the process of policy development, or at least in setting the agenda.

A typical bureaucratisation of a response is that the process becomes more important than the end. The best example of such a tendency is when targets are fixed for everything and they become the end in itself. Often, such target setting is politically driven. However, we have enough experience — from sterilisation drives to reporting of cholera and malaria — to know that fixing targets creates problems such as fake entries or non-entries. The practice of thermal testing and collecting phone numbers outside malls and offices when the pandemic is at a low-ebb is clearly a massive exercise in futility. The restriction of basic public benefits to those who are unvaccinated is an exercise of power in the worst possible sense and has no scientific basis.

Both administrators and politicians want to be seen as doing something even if these are not scientifically appropriate. Is this acceptable if it helps governments gain trust and if there is better adherence to other interventions? Scientists will not agree. Lack of a clear-cut technical definition of community transmission enabled politicians to have a particular "narrative". In addition, commercial interests, say of drug or vaccine manufacturers, are known to influence decisions through any of these three groups of people.

A former DG of ICMR is once said to have remarked that there are no technical people at ICMR headquarters and that all the “scientists” have become bureaucrats. Even the WHO has been struggling to define the right combination of technical and bureaucratic staff. Does the WHO do science or manage science? Most knowledgeable people would say that it manages science, and gets others to “do” the science part. Is the WHO’s work technical or more political, especially as it navigates inter-country issues, especially during a pandemic. Quite evidently, the WHO’s oversight is political in nature.

This problem is not restricted to health and sciences. Such things are also seen in defence, finance, economic, and agriculture ministries, to name a few. Most of these ministries have a running feud between the technical and bureaucratic wings. These fault lines have always existed but become critical in an emergency — for defence in a war-like situation, for the finance ministry in an economic crisis and for health in a pandemic.

In general, whenever such a debate on crossing boundaries arises, the narrative is always that science is right or has the right answers whereas politicians and bureaucrats are somehow lower in the pecking order. Is this viewpoint valid? Knowledge is useless if it is not applied for public benefit. It is politicians and administrators who enable this to happen. While one can have a clear boundary in pure sciences like mathematics or physics, this is not true for applied sciences like medicine and definitely not applicable to public health. The 19th century German physician and thinker Rudolf Virchow once said “Medicine is a social science and politics is nothing else but medicine on a large scale”. He meant that while public health has to identify solutions, its implementation is in the hands of politicians.

I believe that rather than calling for doing away with turf wars, we work towards defining clearer boundaries between these three wings, so that one wing hands over the driver’s seat to the next with a well-defined endpoint. There is also a need to put in place better dialogue mechanisms to sort out fractious issues. After all, technical issues will impact implementation and vice versa. Clearer boundaries also help in ensuring accountability, something that we need to have in this pandemic, at some point of time.

While, our preparedness to deal with future pandemics requires all these three wings to review their role and approach, I will restrict my advice to scientists. For that, I cannot do better than to paraphrase the advice of Alfred Sommers: Be balanced, objective and credible. Wait till the evidence is solid; if the data are wanting, accept that you may not have all the answers but in an emergency don’t hesitate to give a guarded opinion. Perspectives other than science are also valuable as health policy involves issues other than what epidemiologists and other scientists know or care about, so do not go beyond your area of expertise.

Scientists should realise that they need politicians and administrators to achieve public health gains and should learn to give them due respect. This problem of overstepping boundaries can only be minimised by aligning public health, administrative and political goals by mutual dialogue.

Booster shots, vaccinating

Booster shots, vaccinating 15 to 18-year-olds (The Indian Express:202101227)

Decisions on booster shots, vaccinating 15 to 18-year-olds, are welcome

<https://indianexpress.com/article/opinion/editorials/covid-omicron-vaccine-the-next-steps-7691717/>

● The Hyderabad-based company's performance during the inoculation project for adults — it complained of production constraints several times in the past six months — should be a cause of concern

A large section of experts believes that a mix-and-match approach to vaccination is better for shoring up immunity compared to an additional jab of the vaccine administered in the primary phase of inoculation.

India will begin 2022 with a new phase of Covid inoculation. On December 25, Prime Minister Narendra Modi announced that vaccination for children in the age group of 15-18 years will begin from January 3. Booster doses — PM Modi described them as precautionary shots — will be administered to healthcare professionals, frontline workers, and senior citizens with co-morbidities from January 10. While the decision on vaccines for children has been on the cards for about two months, the emergence of the Omicron variant of the coronavirus seems to have lent greater urgency to the government's efforts to introduce booster shots. ICMR's real-time tracker shows that breakthrough infections are less than 2 per cent in the general population and around 7 per cent in frontline workers. However, studies point to waning immunity after eight to nine months of receiving the second shot. And Omicron appears to have made the case for boosters even stronger with preliminary data indicating that the variant has evaded vaccine-induced immunity in 50 per cent of those it has infected in India. The highly contagious nature of the variant also increases the risk of infection in the unvaccinated younger population. The decision to broaden the ambit of the inoculation project is, therefore, welcome.

A large section of experts believes that a mix-and-match approach to vaccination is better for shoring up immunity compared to an additional jab of the vaccine administered in the primary phase of inoculation. In India, too, there is preliminary consensus that booster recipients shouldn't receive a third dose of Covishield or Covaxin. The country is well placed to meet this challenge. The government has made advance payments to the Hyderabad-based Biological E to reserve 30 crore doses of the Corbevax vaccine. The jab that teaches the immune system to make antibodies using spike proteins has been heralded as a stronger shield against variants such as Omicron compared to viral vector vaccines such as Covishield and

Covaxin. Covovax, manufactured by the Serum Institute of India under licence from the US-based Novovax, also uses a protein-based platform. Though these vaccines take more time to develop, they are more affordable, and their production is easier to scale up. The SII-manufactured vaccine has already received an Emergency Use Approval from regulatory authorities in Southeast Asia and the WHO. The Drugs Controller General of India has, reportedly, asked the Pune-based company for more data over its EUA application for Covovax. The regulator's doubts must be cleared urgently to enable a decision on the most effective booster.

In October, the DCGI gave an EUA to Zydus Cadila's vaccine for children above the age of 12. On December 25, a few hours before the PM's speech, the regulator approved the use of Bharat-Biotech's Covaxin for the young population. But the Hyderabad-based company's performance during the inoculation project for adults — it complained of production constraints several times in the past six months — should be a cause of concern. There is no time to lose in sorting out such sticky matters.

loneliness

Dealing with loneliness: 'Talk to as many people as you can'(The Indian Express:202101227)

With hectic work schedules, erratic sleep patterns, lockdowns and work-from-home, having meaningful, real-life conversations are getting increasingly difficult.

Read on to find out how you can combat loneliness. (Source: Pexels)

In the present day and age of hyper-connectivity, getting in touch with people is now easier than ever. While the world keeps making leaps and bounds in technological advancements, life in urban spaces can often get quite lonely.

With hectic work schedules, erratic sleep patterns, lockdowns and work-from-home, having meaningful, real-life conversations are getting increasingly difficult. How do you help yourself from loneliness? Olivia Remes, creator and host of The Cambridge Talk Show, a weekly radio show focusing on lifestyle matters and mental health, shared an inspiring TEDx talk to help cope. Check it out here:

She explained how in the current times, it's easy to get caught up with life and lose touch with friends and loved ones. "I'm sure you would agree that this is so interesting that loneliness can physically harm you. The problem is that more and more people are lonely today, in fact it's almost 1 in 3 people. You'd think that with social media, smartphones and facetime that allow us to get in touch with one another instantly that we'd feel more connected. But actually,

the opposite is true: we're lonelier than ever, more depressed and anxious than ever and people are turning to therapy and antidepressants to cope."

She suggested talking to new people to help combat loneliness. "The first strategy to get rid of loneliness is to start talking with as many people as you can."

She recognised that this advice is easier said than done but she recommended starting small, and incorporating small conversations with new people in your regular day-to-day life.

Her next suggestion was to form meaningful relationships with people by engaging in honest conversations. "If you want to take your interactions to a whole new level and create connections that are real with people then you have to share about yourself and open up tell stories about yourself."

Ayurveda advice

Ayurveda advice: Check out this 'top tip' for indigestion (The Indian Express:202101227)

<https://indianexpress.com/article/lifestyle/life-style/holiday-ayurveda-advice-indigestion-7691202/>

Ayurvedic expert Dr Nitika Kohli suggested a remedy of 'detox water' to help combat indigestion.

indigestion-pexelsRead on to know the recipe of a "detox water". (Source: Pexels)

With Christmas and New Year celebrations, it is hard to keep overindulgence at bay. Holiday special food — decadent and delicious — is hard to resist and we won't blame you if you ate too many cakes!

Rich dinners and filling snacks may take a toll on your body and gut, leading to problems like indigestion, flatulence etc. Ayurvedic expert Dr Nitika Kohli took to Instagram to share remedies.

ALSO READ |How good gut health can lead to glowing skin

"Yep, overindulgence is one thing that comes with the festive season! Unfortunately all the rich food and drink, large meals and eating late into the night are all common causes of indigestion."

She suggested a remedy of 'detox water' to help combat this issue. Take a look at the post here:

Dr Kohli said, "Christmas is the one time of year when all our willpower goes out of the window. All we want to do is sit in our Christmas PJs and never saying no to just one more bite of the cakes."

Take a look at the detailed recipe of a 'top tip' to keep pesky indigestion at bay:

*Water– 1 cup

*Fennel seeds– 1 tsp

*Ginger– an inch, chopped

*Ajwain or Bishop seeds– 1 tsp

*Cloves–2

*Jaggery– as per preference

childhood obesity

Study suggests childhood obesity linked to mother's unhealthy diet before pregnancy (New Kerala:202101227)

Supporting women to eat a healthy diet pre-pregnancy could reduce the risk of obesity for their children, suggests the findings of new research l-> View it--> <https://www.newkerala.com/news/2021/181961.htm>

fatty liver disease

Air pollution linked to fatty liver disease: Study (New Kerala:202101227)

Washington, December 26: According to a large scale epidemiologic study, links have been identified between long-term exposure to ambient air pollution and metabolic-associated fatty liver disease (M-> View it--> <https://www.newkerala.com/news/2021/181898.htm>

Chemotherapy

Chemotherapy many not be needed to treat cancer: (New Kerala:202101227)

A team of 11 scientists from the Cleveland Clinic in the US and a researcher from Allahabad University (AU) have found a way in which chemo and radiation therapy will n-> View it--> <https://www.newkerala.com/news/2021/181827.htm>

prostate cancer

A molecule that completely shrinks prostate cancer in just 50 days (New Kerala:202101227)

The Indian Institutes of Technology, Gandhinagar (IIT-GN) has discovered a molecule which can completely reduce prostate cancer in just 50 days. IIT-GN Directo-> View it--> <https://www.newkerala.com/news/2021/181690.htm>