HEALTHTIMES
Health News For A Healthy Nation

wwww.healthtimes.co.zw

Follow Us On Twitter: @healthtimeszim Facebook: @healthtimesZW

25 May to 29 May 2021

Call: 08644289599, +263 776 280 754 Email: healthtimes.info@gmail.com



Zimbabweans Risk Incomplete Vaccination

By Tanaka Moyo

THE prevailing shortages of first doses of vaccines being administered in Zimbabwe could result in majority of citizens being partially vaccinated if something is not done urgently, a Public Health Expert has warned.

There have been widespread and confirmed reports of shortages of first dosses of the Sinopharm and Sinovac vaccines especially around urban poly clinics resulting in people being turned away without getting jabbed.

In an interview with HealthTimes, Mr Itai Rusike, the Executive Director for the Community Working Group on Health (CWGH) said the issue of shortage of Covid-19 vaccines should be addressed as soon as possible avoid incomplete vaccination.

"We need to address the issue of vaccine equity and avoid the current unfortunate situation whereby some areas are experiencing Covid-19 vaccine stock outs," he said. "The vaccines that are being administered in Zimbabwe require two doses for someone to fully immunized hence the current shortages will increase the likelihood of incomplete vaccination."



Mr Itai Rusike, the CWGH Executive Director

Even though cabinet this week announced that government would procure 500,000 more vaccines from China, the figure still falls below what was promised by treasury a few months where they indicated that they would importing at least 1 Million vaccines every month. Mr Rusike advised government to take measures to bring balance between demand and supply of vaccines.

"The government of Zimbabwe should create a balance between the demand and supply of vaccines especially now that a lot more people are willingly coming forward to be vaccinated. It is unacceptable that the government is...To Page 5

> "We need to address the issue of vaccine equality and avoid the current unfortunate sitution whereby some areas are experiancing COVID-19 vaccines stock-outs."



India, WHO Donate Ambulances To Zim



The donated ambulances

By Patricia Mashiri

THE Indian government together with World Health Organization have donated ambulances to the government of Zimbabwe in a bid to improve the quality of the health system in the country.

In his acceptance speech, Vice President and the Minister of Health, Constantino Chiwenga thanked both the Indian government and the World Health Organization for the donation of 20 ambulances and a consignment of medical equipment.

"In a clear showcase of the sound diplomatic relations that exist between our two countries , the government of India through its embassy in Zimbabwe, donated 10 Mahindra type of ambulances to my Ministry. The gesture attests to the unwavering friendship between the peoples of the two nations, moreso in the prevailing COVID-19 pandemic which to date claimed a huge toll of causalities across globe.

"The World Health Organization also decided to come on board, with a generous donation of yet another fleet of 10 Toyota land-cruser ambulances. Along with the fleet, is a consignment of ventilators, personal protective equipment, overalls, gloves, respirator masks, bio-hazard bags, goggles and Nuclear Buffer. The specialized and fully-equipped ambulances donated are fitted with ventilators to allow the administration of oxygen, to COVID-19 patients and other deserving patients. I am very appreciative to this massive donation by WHO," Vice President said.

In his handover speech the Ambassador of India to Zimbabwe, Vijay Khanduja said it was a great honour handing over a fleet of ambulances to the country as a way of strengthening the relationship between the two countries.

"Today is a historic occasion in the long standing friendship relationship that India and Zimbabwe enjoy. The relationship is based on mutual trust, respect and solidarity. It is the shared past which gives depth and substance to the bilatrael relationship.

"We are passing through unusual and difficult circumstances. The COVID-19 pandemic has affected lives and livelihoods in more ways than one. It is important for the world to face this challenge in a determined and coordinated manner. India and Zimbabwe has stood with each other during the pandemic," Ambassador Khanduja said.

PEPFAR Heroes Award Looms

ON its 18th anniversary in Zimbabwe, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) has announced the 2021 PEPFAR Heroes Award for outstanding individuals who have made a meaningful contribution towards Zimbabwe's response to HIV and AIDS over the past 18 years.

PEPFAR has partnered with the Zimbabwe Network of People Living with HIV (ZNNP+) in a nationwide call for nominations of PEPFAR Heroes from around the country with a deadline of June 30. 12 Heroes will receive awards as part of the World AIDS Day commemorations in December this year with their work featured in the 2022 PEPFAR calendar.

PEPFAR heroes — men and women — have gone above and beyond the call of duty to create an enabling environment for people living with HIV to access health related services. The winners of the award will receive a cash prize and will continue to work as advocates throughout 2022 and to make a difference in their communities as PEPFAR Heroes.

"The journeys of these unsung heroes and heroines have been long and difficult but, the good news is, we continue to build on what they started to improve programming especially as we try to close gaps in HIV prevention and treatment," says Tatenda Makoni, the Executive Director of ZNNP+.

Want to nominate a PEPFAR Hero? Call the ZNNP+ Kutabila WhatsApp number (0734349479) or complete the online nomination form at https://ee.humanitarianresponse.info/preview/5v4xk1S9. Alternatively, send nomination forms to info@znnp.org copying NyakwendeG@state.gov by June 30, 2021. Please find the detailed nomination guidelines on the U.S. Embassy website at: https://zw.usembassy.gov and www.znnp.org .
Over the past 18 years, PEPFAR has contributed more than $1.3 billion to the HIV response in Zimbabwe through a comprehensive package of prevention, treatment, and health support services. Today, more than 1.2 million Zimbabweans living with HIV receive lifesaving treatment.

ZIMBABWEANS AND AMERICANS
IN PARTNERSHIP TO FIGHT HIV/AIDS
PEPFAR



Offerings:

PCR Test

PCR test with urgent test processing for:

Travel | Pre-hospital Admission and other emergency cases

Rapid Test

Rapid antibody and antigen screening tests.

Mobile Testing

On-site testing/mobile service for individuals and groups.

PCR Test results prioritised as required.

Toll Free: 08080174 | 08080175

Call: +263 8677008630 | +263 712 640 639

Email: medlabenquiries@cimas.co.zw

Labs: Main Laboratory, 60 Baines Avenue, Medical Chambers, Harare
Borrowdale Trauma Centre, 2 Borrowdale Lane, Harare

cimas® MEDLABS

White Sadza Is Very Nutritious

By Michael Gwarisa



LAST week, Zimbabwean Journalist, Hopewell Chin'ono torched a storm on social media when he attacked Zimbabwe's staple food, Sadza and suggested through his tweet that Zimbabweans should dump Maize meal Sadza for small grains since Maize was only fit for livestock consumption. "Sadza has ZERO value to our well-being!" he said. "Our ancestors ate superior starch than Sadza. Why aren't we doing the same? Maize is originally Mexican. In advanced economies, it is for cattle!"

He also added that Maize meal is fortified because it lacks the required nutrients for the body. But was Hopewell entirely wrong for suggesting that white maize meal was unfit for human consumption and therefore should be dumped? Only nutritionist know.

Zimbabwe is still experiencing high cases of malnutrition and according to the 2020 Zimbabwe Vulnerability Assessment Committee (ZimVac) survey, Stunting remains the biggest form of malnutrition in the country and in 2020 it was reported to be at 29.4% for children under the age of five. Stunting is caused by the lack of micronutrients in foods and to address the Stunting burden, Zimbabwe in 2015 launched the Zimbabwe National Food Fortification Strategy 2014—2018. The strategy, which is aligned to the National Food and Nutrition Strategy for Zimbabwe, serves as a guide at both policy and implementation levels to prevent micro-nutrient deficiencies.

Zimbabwe's food fortification drive targeted sugar, cooking oil, maize meal, and wheat flour for fortification. According to the fortification strategy, Sugar is being fortified with vitamin A; cooking oil with vitamin A and D; and wheat flour and maize meal with vitamin A, B1, B2, B3, B6, B12, folic acid, iron and zinc. Small grains have however proven to have a lot of micro-nutrients and their non-soluble fibre content is high. This fibre helps to regulate glucose absorption and provides with a satiety effect.

Nutritionists who spoke to HealthTimes said white maize meal and Sadza was equally healthy as small grain meal and is fit for human consumption. Tendai Gunda, a Zimbabwean nutrition expert said the United Nations Food and Agricultural Organisation (FAO) had noted that nutritional value of maize is comparable to other cereals that form the staple of many other nations.

"Maize is somewhat superior to wheat flour and only a little inferior to rice. To say that maize is devoid of any nutritional value is a misnomer. 100g of maize provides approximately between 14% -18% of the recommended daily caloric requirements for an adult. Indeed, maize is not a perfect food either as it is deficient in some nutrients. For example, the protein in maize is deficient in the amino acids' lysine and tryptophan. However, complementing maize with a legume like beans or nyemba improves the quality of protein consumed.

"Iron, Magnesium, Potassium, Zinc, selenium, and Niacin content of maize meets about 25% of the RDA. Be that as it may, the nutrient content of highly polished mealie-meal is greatly diminished by the refinement processes. The government has put in place various strategies to not only to address these losses but also further enrich our staple food with micronutrients that are of public health concern in Zimbabwe," said Gunda.

She added that Food Fortification, bio-fortification promotion of consumption of diversified diets were among some of the strategies being promoted by Nutritionists and the government of Zimbabwe to boost the nutritional value of local foods.

"No one food is a super food, but one food such as our beloved staple food in combination with other food groups will deliver the nutrients our bodies need to function optimally."

Dexter Chagwena, a Nutritionist Consultant in the Ministry of Health and Child Care (MoHCC) said maize meal was not being fortified because it has low nutrients but because fortification was an effective strategy that has proven to work scientifically.

"Sadza is very much fit for human consumption. It does consist of nutrients that are derived from maize. Remember there are carbohydrates, protein and some vitamins in maize. So when you grind whole maize meal, we normally refer to as "Mugaiwa" we get all these nutrients. When we over process maize like we usually do when we sell that maize meal which is too white, we lose most of these nutrients," said Mr Chagwena.

He added that small grains such as pearl millet have this effect called low glycemic index which means when one eats them, their blood sugar does not necessarily shoot up, hence offering protection for conditions related to diabetes mellitus and obesity.

"You fortify a food that is eaten by many people and you reach all those people with the nutrient of choice in a very short time. So in this case we realised that many people (in their blood and bodies), they were lacking iron, vitamin A and folic acid. So we thought to ourselves, what is it that we can do to add these micro-nutrients so that we could reach the entire Zimbabwean population in a very short space of time to prevent health consequences linked to these micro-nutrient deficiencies. That's why we pursued fortification."

He added that data was analyzed on consumption patterns of food in Zimbabwe and it emerged that more than 95% of people in Zimbabwe consume Sadza, cooking oil, flour and sugar on a daily basis in Zimbabwe hence the decision to target these foods for fortification.

"We decided to fortify these foods for this reason. We are only using these foods as a "vehicle" to deliver these micro-nutrients lacking in our bodies. We know that this works because in the 90s we used to have a problem of Goitre and many abnormalities caused by a deficiency in iodine.

"So we took iodine and put it in our salt, because salt was consumed by almost everyone and we were able to eliminate iodine deficiency within 3 to 5 years. We did not select salt because it lacked nutrients or it was an unhealthy or healthy choice, No. We selected salt because it is consumed by the almost everyone and we needed to deliver iodine to everyone in a short space of time. This is what we have done this time with Sadza and other staples."

Dr Tonde Matsungo from the Department of Nutrition, Dietetics and Food Sciences at the University of Zimbabwe encouraged Zimbabweans to watch the portions of Sadza they eat be it white grain Sadza or small colored grain.

"The problem with refined white Sadza is it has less micronutrient content than small grains. Still families can go for straight run Mugaiwa better version of white maize. Now we recommend people to diversify also introduce small grains and also orange maize (rich in pro-vitamin A). So the trick is variety and not that white maize is unfit for humans

""Further we worry about the quantities that people consume Some of the portions are too big for people who are not active. That way it's an issue because people gain weight and become obese thus at increased risk of diabetes or hypertension or cancers and others," said Dr Matsungo.

He added that even though there isn't much need to fortify small grains, thy contain some anti nutritional factors that limit the absorption of nutrients in the gut.

"However, there are preparatory techniques that can be done to reduce these anti-nutrients e.g. Roasting of the small grains before grinding or overnight socking (fermentation) the small grain meal before preparing porridge or Sadza."

Meanwhile, Kudakwashe Zombe a nutritionist and the National Coordinator for the Zimbabwe Civil Society Scaling Nutrition Alliance (ZCSOSUNA) said maintaining a balanced diet is what counts the most as both small grains and white grain maize meal have the same nutritional value.

"White maize meal together with small grains are healthy high carbohydrate foods. The main function of carbohydrates is to provide energy to the body including the brain.," said Zombe.

Humrel Donates Sanitary Wear To Girls With Special Needs

By Patricia Mashiri



Humrell Donates saniatry wear

HUMREL Supply Chain Group together with its partners have donated an assortment of sanitary wear and toiletries to Saint Catherine Special School in Eastle, in a move that is likely to ease challenges faced by girls especially those with special needs in managing the menstrual health.

The donation also coincided with the 2021 Menstrual Hygiene Day which is running under the theme "More action & investment in menstrual health & hygiene now!" Some of the partners who collaborated with Humrel in the initiative include Oxfam, Bowerbrands Media, Windmill Country Manor, Tasha's Hygiene Products and services, Bustop TV and individual sponsors.

Speaking during the handover ceremony Patience Foya, the Director for Humrel Supply Chain group said their donation came following the realization that many girls and women face a myriad of difficulties during their menstrual periods.

"With the growing recognition of the difficulties women and girls face during menstruation in terms of access to preferred material; challenges to accessing access to facilities to dispose of used menstrual management materials as well as the understanding that not having adequate and fit for purpose menstrual hygiene materials is a challenge; for girls and women it could mean days off school or critical work trying to manage bleeding days.

"Use of alternative options like cloth that is not fit for purpose potentially leads to leakages and embarrassment therefore a loss of dignity for girls and women. The selection of reusable pads and menstrual cups as solutions is fit for purpose, ease of use and lifespan of the mentioned options. We are further seeking for partnership to ensure that we amplify the messaging around MHM, improve access to re-usable pads and restore the confidence and dignity of female counter part," Foya said.

The donated sanitary hamper contains a pack of disposable pads, reusable pads which can be used for at least three years, and soap for washing the sanitary pads.

She added that they were raising awareness on the available alternatives of reusable solution, hygiene practice and increase access to information and material.

"We seek to ensure that where the girls and women have no access to facilities to dispose of used menstrual management materials, they can just reuse the available pads," she said.

Meanwhile Mrs Charity Gunda, Headmistress at St Catherine's Special school expressed gratitude to Humrel and its partners for the kind gesture as the communities of People With Disabilities (PWDs) are often forgotten with regards to Sexual and Reproductive Health (SRH) issues.

"Learners here at St Catherine Special School just like others are given maximum attention they are catered for their special needs in preparation for their adulthood," said Mrs Gunda.
"They are empowered with skills so that after school, they will be independent adults. In sports, just like other schools, they are excelling. The school is facing challenges because of the COVID-19 pandemic . We are experiencing low fees payment which is affecting diet, Sewerage blockages needing repairing, Durawall repairs to protect our children since some of them cannot give talk."
She also added that women and girls with or without disabilities were facing challenges during their menstrual periods and there was need to invest in menstrual health at all levels of society.

Zimbos Risk Incomplete Vaccination

failing to procure adequate vaccines to meet the demand of the newly created public interest in getting vaccinated as we risk losing the gains achieved so far as one of the leading countries in SADC region on Covid-19 vaccination program.

"Zimbabwe should join the Covax facility so that we can also benefit from vaccines being offered to the Low and Medium Income countries by the African Union (AU) and the World Health Organisation (WHO) if we are to move towards achieving the required herd immunity of vaccinating at least 60% of the population," he said.

Mr Rusike added the Sinopharm vaccine strategy might be difficult to maintain in marginalized communities as the vaccine requires two dose and it may be hard for some people in rural areas to get the second jab due to some factors thereby resulting in incomplete vaccination.

Meanwhile, Mr Rusike said the, "the decision to select a suitable vaccine for the country should be done after widely consulting health professionals and public health experts taking into consideration the country's ability to manage the cold chain."
In Harare, only Wilkins Infectious Disease Hospital is administering both the first and second doses while centers such as Parirenyatwa and Sally Mugabe Central Hospital as well as Mabvuku Polyclinic had recorded stock outs.

60 And Not Out: Amnesty International Celebrates Diamond Jubilee

Amnesty International was founded in 1961 by Peter Benenson on the idea that together ordinary people can change the world. Today Amnesty is a worldwide movement for human rights, calling on the collective power of 10 million people, each one committed to fighting for justice, equality and freedom everywhere. From London to Santiago, Sydney to Kampala, people have come together to insist that the rights of each and every human are respected and protected.

Sixty years on, we're still battling for a world where human rights are enjoyed by all. And we won't stop until it's achieved.

"When I first lit the Amnesty candle, I had in mind the old Chinese proverb: 'Better light a candle than curse the darkness.'"– Peter Benenson

Our Candle will stay lit for Human Rights as we Celebrate 60 years of taking injustice personally and 15 years of Human Rights Activism and defending human rights in Zimbabwe. Humanity wins



Save-A-Life Promotion



CORPORATE COVID-19 RESPONSE EQUIPMENT SPECIAL OFFER

ProChoice Medtec is a local engineering company specializing in vehicle conversions and hospital equipment manufacture. ProChoice has been in operation since 2016 and has been carving its name in the market with its flagship products which include;

- High specification ambulance conversions
- Hospital beds and related equipment manufacture
- Pop-up clinic deployments

COVID-19 RESPONSE EQUIPMENT OFFER

As a steadily growing player in the hospital equipment space, ProChoice is extending support to the Corporate Sector companies that are setting up COVID-19 support structures for their staff members or are donating to assist communities in view of the acute need that has arisen. The offer has also been designed to directly support Government Departments and Local Authorities is their response effort through developing and locally producing relevant medical equipment and offering these at a discounted rate.

10% OFF
PLUS FREE SUPPORT!
on all COVID-19 related projects specific to the below:

BUY 2 for the price of one





1. Tailor made Ambulance & Related Medical Equipment

Brand new vehicle conversion
ProChoice has strategic alliances with local dealers of mini bus and Toyota (Quantum and Off road) utility vehicles that we convert to ambulances - from a High specification ICU Unit to Basic Care ambulances.

New Covid-19 Compliant Specifications
Our ambulances have been reconfigured to be compliant with all the healthcare provider COVID-19 Protocols.

Client can always determine the level of patient care they require, and the unit will be equipped as such. Other conversion which include hearses or body removal ambulances can also be designed per client need.



2. Hospital Beds
Our Organisation's DNA as an Engineering Technology company has enabled us to develop and deliver hospital ward-care beds with the basic hydraulics for patient positioning. Our Research & Development team is further developing on some of our projects that are using local talent to produce other specialized beds including fully automated theatre tables.





3. Pop-Up Clinic Deployment
The Pop-Up clinic concept-mobile clinics and medical work camps involves physically setting up a movable medical facility in communities where the need if greatest at the time. The pop up clinic is an opportunity for Government, the corporate sector and local authorities to compliment physical hospital structures which evidently are in dire space constraints.

3. Pop-Up Clinic Deployment (cont'd)
The clinic will be a mobile unit built on either a caravan or container which ideally is made to the capacity of dealing with emergencies such as COVID-19. The Clinic will comprise of 2 main components, i.e the Clinic Unit and the Admission Unit.

Clinic Unit
The Clinic unit is the main component whose interior is built from our Ambulance model experience. Using this framework, client specifications can always be adapted depending on specific function

Admission Unit
Modern pop-up tents are used to build an admission unit to support the clinic unit functions.

Through the **Save-A-Life Promotion,** we are committed to do our part to support the COVID-19 response across the country. We are ready to work with our clients to deliver the best possible solutions using our local skills and capacity.

For more information contact:
Tafadzwa Chisveto: +263 772 392 431,
Praise: +263 772 921 242
Email: admin@prochoiceagritec.co.zw

PRO CHOICE Solutions
Your Best Choice

Short Circuit Caused Mpilo Hospital Fire

By Michael Gwarisa

DEPUTY Minister of Industry and Commerce, Raj Modi said the fire that gutted down Mpilo Central Hospital hostels last might have emanated from a faulty and short circuit.

Even though the fire brigade is yet to conclude their investigations, it is believed that residents of the hostels had reported seeing some sparks emanating from the distribution box or electrical room before.

Speaking to Journalists during a tour of the gutted down building, Minister Modi said there was need to scale up fire surveillance and detection systems at the institution to avoid recurring inferno induced disasters.

"This is the second time this is happening here. The last time it happened it was an electrical appliance that was left on and this time its an electrical short circuit," said Minister Modi.

He however urged the institution's administration to pay attention so issues such as electrical faults and other reports and move swiftly before the worst happens.

"On the maintenance side i think there is neglect for some of the things. I hear that there were reports of some sparks that were being witnessed from the circuit board and were reported to the authorities. That's where i believe that's where the fire started."

He added that government would assist in rebuilding the broken down hostels.

"Whatever happened is very bad, we all have to work together and make it work again. As a government, we want to do everything possible to help them finish the reconstruction of this building and everything to make it look normal again."

Meanwhile, Mpilo Central Hospital Chief Executive Officer, Professor Solwayo Ngwenya said the gutted down building houses 30 workers and majority of them escaped through the windows in order to survive the inferno.

"We were woken up last night, there was a terrible fire and we rushed here and found three fire brigade vehicles already at the scene trying to bring down the fire. The fire was very ferocious, it spread very quickly throughout the whole building and the roof started curving in and collapsing.



"We found that people had jumped out through the windows and had collected some of their belongings. The building houses 30 workers and they jumped through windows. We were lucky that no one was seriously injured except a doctor who broke an ankle and someone who inhaled some fumes from the smoke," said Prof Ngwenya.

He added that the estimated loss that was incurred from the fire was not less that US$500,000 and there was extensive damage to the top floor. He also concurred with Minister and said the residents had reported seeing a fire from a distribution box before and that could probably be where the fire started.

"The fire brigade will do an extensive investigation and let us know the extent and the cause of the fire. At the moment we are really shocked and we are saddened by this development. It is quite a massive loss of property and a building." He said this was actually the third time a fire of that magnitude has burnt down a building at the institution.

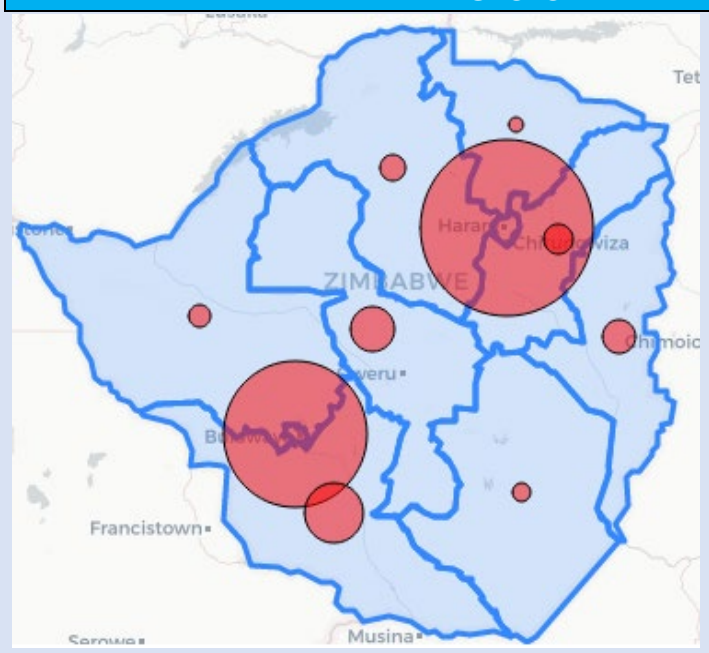
DONATE
Blood
MAKE A WORLD OF DIFFERENC
OUR Target: Collect 97,500 units of blood in 2021
Giving blood is a chance to make a difference. Help us reach our goal for this important cause.
Our Clinics :
Harare
53 Mazowe Street
North, Belgravia
Tel: +263 0242
251851/4/5/6
Email:
info@nbsz.co.zw
Harare CBD Clinic
Joina City Shopping Mall,
2nd floor,
Medical Centre
Tel: +263 0242 – 761 532
Cell: +263 714 645 744
Email: reception@nbsz.co.zw
Bulawayo CBD Clinic
Corner Leopold
Takawira and Joshua
Mqabuko Nkomo street
Byo Main Post Office
Shop A1.
Tel: +263 292 – 887086
Gweru
Mvuma Road, Gweru
Showgrounds.
Tel: +263 0542 223976
/226880
Email: gweru@nbsz.co.zw
Masvingo
Corner Hayles Street/Emslie
Close,
Tel: +263 0239 263573
Email: masvingo@nbsz.co.zw
Mutare
27 George Silundika Street
Tel: +263 020 62789/ 63397
Email: mutare@nbsz.co.zw

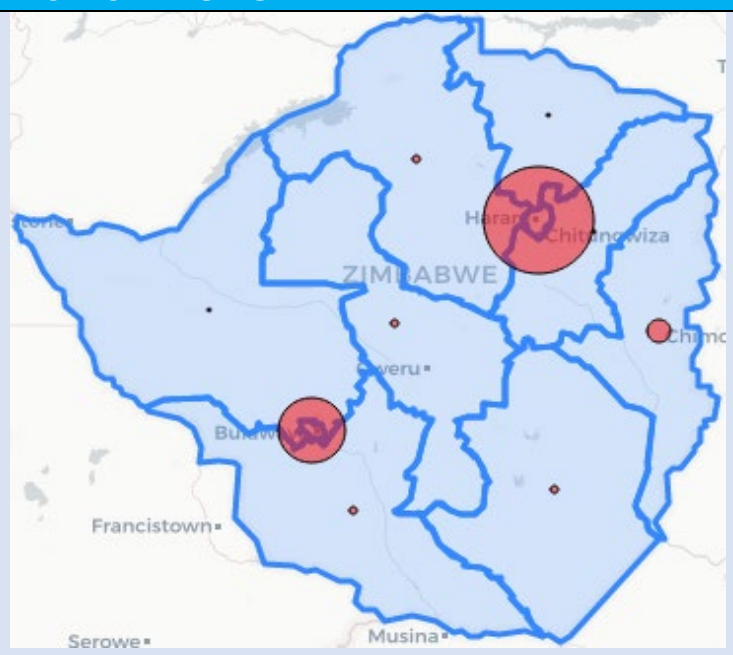
Zimbabwe Covid-19 SitRep 28/05/2021

HIGHLIGHTS TODAY

- **64 New Cases*(All Local)* and 1 Death reported in the last 24 hours. (*7 day rolling average* for new cases rises to 36 today from 31 yesterday).***
- ***Vaccination Update: 8 509 received their 1st dose today bringing cumulative for 1st dose to 656 630 while 14 898 received their 2nd dose bringing cumulative for 2nd dose to 320 166 .(as at 1600hrs)***
- ***As of 27 May 2021, @1500hrs there were 47 hospitalised cases: Asymptomatic 8, mild to moderate 32, severe 5 and 2 in Intensive Care Units.(Mat North and Arundel did not report today)***
- **1 833 tests done today *(Positivity today was 3.5%).***
- **22 new recoveries reported: National Recovery rate stands at 94% and Active cases go up to 762 today.**
- **As of 28 May 2021, Zimbabwe has recorded 38 918 Cases 36 563 recoveries&1593 Deaths.**

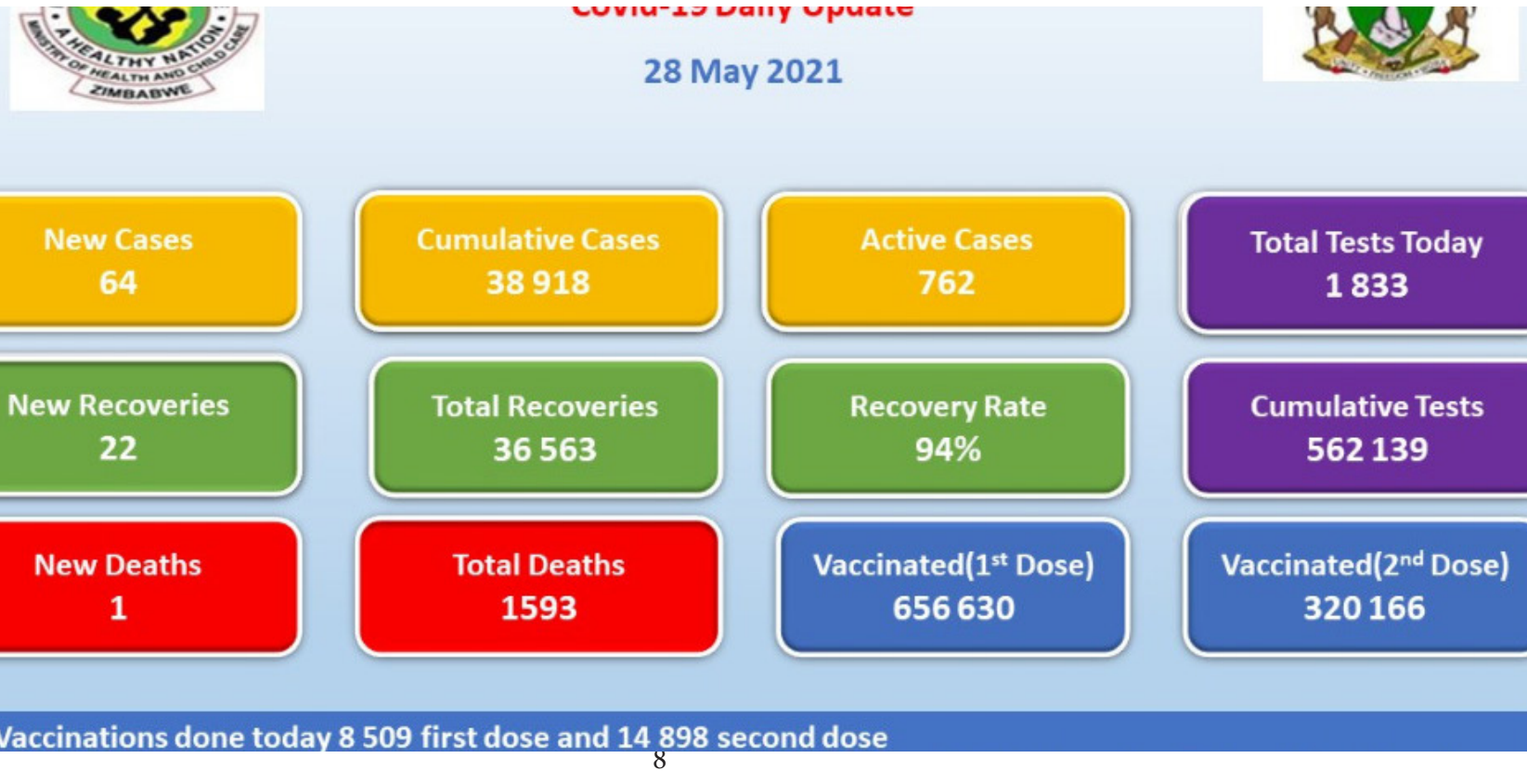
CASES AND DEATHS DISTRIBUTION





Province	PCR Tests + Ag	Cum Cases (New)	Recovered Cases (New)	Active Cases	Deaths (New)
Bulawayo	422	5800(11)	5498(3)	70	232(0)
Harare	839	13209(10)	12202(0)	393	614(1)
Manicaland	83	4087(3)	3877(13)	14	196(0)
Mash Cent	42	1753(1)	1653(3)	8	92(0)
Mash East	9	2591(0)	2467(0)	3	121(0)
Mash West	0	2131(1)	1957(0)	32	142(0)
Midlands	88	2492(0)	2402(0)	16	74(0)
Masvingo	40	2536(17)	2347(0)	120	69(0)
Mat North	116	1450(0)	1388(3)	43	19(0)
Mat South	94	2869(21)	2772(0)	63	34(0)
Total	**1833**	**38 918(64)**	**36 563(22)**	**762**	**1592(1)**

**Provinces with new cases but zero PCR tests conducted respectively received results from NMRL,NTBRL&Pvt Labs*



Isolated And Frowned Upon:

....The Plight Of Zim Women With Obstetric Fistula

By Michael Gwarisa



MEMORY (50) (real name protected) from Bikita, Masvingo experienced Obstetric Fistula for the first time on October, 27, 1995 when she had her second child. At first, she didn't even know what was happening to her, she thought it was just a minor tearing which would heal after a few days. Obstetric fistula is described as the "most devastating birth injury" by the World Health Organization (WHO), that results in continuous and uncontrollable leaking of urine or faeces, resulting in social stigmatization and lifelong emotional scars.

Even though she was sewn up after the birth experience, she started experiencing challenges controlling her stool from coming out even in public spaces. Because it was not a major tearing, she went on to have her third, fourth, fifth and sixth children and all this while she was not being fixed or sewn up.

Trouble came after the birth of her sixth child on August, 3 2011, when the tearing worsened to the extent of linking her rectum and birth canal. She couldn't control her bowel movement and neither could she stop urine from coming out owing to the injuries. She approached her husband who turned down her request to get repaired . She became an outcast as no one wanted to associate with her due to her condition.

"People would laugh at me and tell me that I smell. Since I couldn't control my bowel movements, it made it difficult for me to attend meetings or travel long distances. I only attended events which had toilets close by. I couldn't even participate in other community initiatives.

"When preparing for church, I would make sure the previous night I just eat a small portion of food so as not to feel the urge to use the rest room frequently the following day. Since 2011 up to today, I was now making sure that whenever I wanted to travel, I would limit food Intake," said Memory.

Memory recently visited Harare following the intervention by Amnesty International Zimbabwe who are facilitating surgery for her and other women who have the same condition. Memory's story is not an isolated one as majority of women who develop post birth injuries and Obstetric Fistula are forced into a shell due to high-level of stigma and discrimination at the hands of society.

Even though Tariro (42) (real name protected) from Zaka in Masvingo has healed following her successful repair, she recalls the amount of stigma she faced following her Obstetric Fistula diagnosis which led to her using a urine bag for at least two years.

"I face developed Obstetric Fistula in 2017 when I was operated on after my unborn child had died before delivery at Mashoko Hospital. They then transferred me to Masvingo after realizing that I had developed an injury in the birth canal. In Masvingo they told me they had no capacity to deal with my condition. They told me to use a urine bag, which I did.

"When I returned home, people started ostracizing me saying I stink. It was traumatic. I eventually stopped going to church because people would say I make them uncomfortable. I then met a certain gentleman who told me that I could get assistance. On December, 16 2019, I had my surgery and i got healed. I no longer carry a urine bag now," said Tariro.

According to a Report titled, "I never thought I could get healed from this" that was recently released by Amnesty International, women and girls in Zimbabwe are at a greater risk of life changing childbirth-related injuries, including obstetric fistula, as many shun public healthcare facilities in favor of home-based deliveries due to inadequate health infrastructure, cultural practices and high hospital costs.

The reports also gathered that women and girls face high levels of stigma and discrimination due the Obstetric Fistula condition and in turn and this jeopardizes their economic prospects.

Mandipa Machacha, the Amnesty International regional Researcher Economic, Social and Cultural Rights for Amnesty International Southern Africa Regional Office said Obstetric Fistula related stigma was real and there was need to bridge the information gaps rampart in society.

"There is widespread lack of information about the causes and treatment of Obstetric Fistula in Zimbabwe and this has been found to increase levels of discrimination against women with Obstetric Fistula In Communities. We reported incidences where women suffered discrimination at the hands of family members who wouldn't even allow them to cook saying they were dirty and girls of a young age being moved from house to house just because family members couldn't stand the condition.

"We have also learnt of women who were left by their husbands and women who had relatives of their husbands encouraging family members to leave them for a better woman or second wives. Additionally, the stigma results in women not being able to work and women who have Obstetric Fistula end up facing economic challenges. There was a case of women who used to work as a housekeeper earning a decent salary of US$200.00 but her employer fired her the moment she discovered that the women had Obstetric Fistula," said Machacha.

Meanwhile, the Programs Specialist for Reproductive Health in the United National Population Fund (UNFPA), Dr Edwin Mpeta said there was need for psychosocial support for survivors of Obstetric Fistula post-surgery.

"For the global campaign against Obstetric Fistula, the key main pillars are firstly prevention. This is very important, we need to close the tap, we need to prevent, yes we may not be able to close the tap totally so those women that are affected really need to be treated and repaired so treatment and repair is the second pillar on the global campaign.

"Then we have the third pillar which is support after surgery. You notice that some of the survivors will be victimized and maybe isolated and some may need to be reintegrated back into the society so that is very important. The fourth pillar is around advocacy including resource mobilization this is also key in terms of support and repair and somebody has to take care of the bill," said Dr Mpeta. According to the World Health Organization (WHO), obstetric fistula is preventable by reducing the number of early and unplanned pregnancies, ending harmful practices (such as child marriage), and ensuring access to quality emergency obstetric care, especially access to caesarean sections. When access to quality treatment is available, obstetric fistula is also curable, with surgical success rates as high as 92%.

Zim To Receive 500 000 vaccine doses



By Patricia Mashiri

ZIMBABWE is set to receive 500 000 Sinopharm vaccine doses which were procured from China in June to boost the vaccination programme which is currently underway in the country.

Speaking during a Cabinet briefing Senator Monica Mutsvagwa, the Minister of Information, Publicity and Broadcasting Services said they were expecting the vaccines in the country next month.

"Regarding vaccine procurement, the public is informed that delivery of the 500 000 Sinopharm vaccine doses which were ordered from China is expected in June.

"Government continues to urge the public to go to the nearest health facility to receive their COVID-19 vaccine so that the country achieves the required herd immunity in order to control the spread of the disease," Mutsvangwa said.

She added that the two-week lockdown which was imposed on Kwekwe was after the detection of COVID variant B.1.617 which is prevalent in India and the measure was done to curb the spread of the deadly variant.

Mutsvagwa said all 31 samples which were taken from staff and learners at Goldridge Primary School in Kwekwe, after three positive cases which were reported previously were all negative.

"Concerning primary and Secondary Schools, Cabinet was advised that a total of 837 COVID-19 cases have been detected in schools since they were opening in March, 2021.

"Total recoveries in schools stand at 796, leaving the number of active cases at 39, demonstrating the effectiveness of the surveillance system and control measures in place," Mutsvagwa said.

113 cases were reported yesterday with 2 deaths in the last 24 hours. The 94 reported cases were from Masvingo.

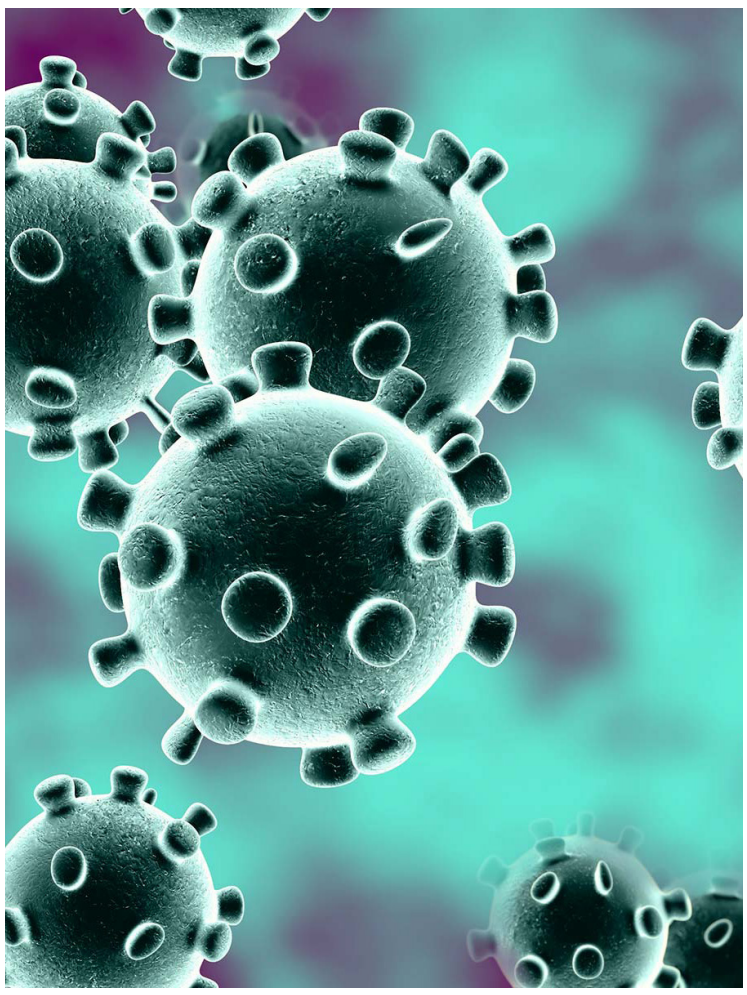
Zim COVID-19 Cases Start Increasing

THE number of active COVID-19 rose to 699 in the past 24 hours following the recording of 113 new cases with majority of cases having recorded in Masvingo.

According to the Ministry of Health and Child Care (MoHCC) daily Situation Report, The 94 cases reported today from Masvingo include 16 that tested positive yesterday and 78 that tested positive, all from a localized outbreak at an education institution (Bondolfi Teacher's College) in Masvingo district.

"113New Cases(All Local) and 2Deaths reported in the last 24 hours. (7 day rolling average* for new cases rises to 30 today from 16 yesterday).

"As at 1600hrs)•As of 25 May 2021, @1500hrs there were 39 hospitalised cases: Asymptomatic 3, mild to moderate 24, severe 8 and 4 in Intensive Care Units. (Manicaland, Masvingo, Midlands, Mat North, South and Mash Central did not report today)." Meanwhile, 3 978 received their 1st dose today bringing cumulative for 1st dose to 643 531 while 5 072 received their 2nd dose bringing cumulative for 2nd dose to 293 509 .



e-A-Life Promotion

10% OFF PLUS FREE SUPPORT!

BUY 2 for the price of one

QUIPMENT SPECIAL OFFER

g company specializing in vehicle conversions and hospital equipment manufacture.
2016 and has been carving its name in the market with its flagship products which include;
nversions
ment manufacture



Hospital Beds



Pop-Up Clinic Deployment

Through the **Save-A-Life Promotion,** we are committed
COVID-19 response across the country. We are ready to
best possible solutions using our local skills and capaci

For more information contact:
Tafadzwa Chisveto: +263 772 392 431
Praise: +263 772 921 242
Email: admin@prochoiceagritec.co.zw

Meditec- Specialised Vehicles & Ambulance Conversions, Manufacturers of Hospital Equipment

29
MAY
2021

Doctors & Nurses on a mission

ARC

Harare pharmacy

Angels Foundation
Bringing hope to those in need

#FRONTLINE ZW

CentraHS

RUNARC

HEART F
THE NATIC

Let's Talk Mental Health Zimbabwe
Our Youth, our wealth , mental health is preserved wealth

THE CANCER ASSOCIATION OF ZIMBABWE

POPUL
SERVIC
ZIMBA



DOMBOSHAVA MEDICAL, DENTAL & MATÉRNITY OUTREACH

PLATINUM PARTNERS

NEDBANK
see money differently

Contact Details
Eddie: 0772379041
Vanessa: 0782217146
Joyce: 0779520700

OUR GOLD PARTNERS

GREENWOOD WHOLESALER
DELIVERING HEALTH

Nedbank Sponsors Medical, Dental & Maternity Outreach

By Michael Gwarisas

THE Doctors and Nurses on a Mission has announced that Nedbank has come through as the sponsor for their Medical, Dental and Maternity health outreach program to be held in Domboshava on May, 29, 2021.

In an interview with HealthTimes, Mr Edmore Munyoro said the bank's sponsorship had come at the right time and will facilitate ease of health service delivery on the day.

"So Nedbank Zimbabwe has answered our plea seeking sponsorship for our upcoming medical, dental and maternity outreach scheduled for Saturday 29 May 2021 at Molife Primary School in Domboshava. Nedbank has come on board is purchasing medications which will be given for free to the patients that shall be assisted during the medical, dental and maternity outreach. The bank's sponsorship is instrumental and will be make the outreach possible.

"The banking institution is also purchasing BP testing machines and glucometers and stripes which are instrumental in the recording of blood pressure and glucose in patients. Angels Foundation Zimbabwe through the doctors and nurses on a Mission project is very grateful to the amazing support that has come at the right time," said Dr Munyoro.

He added other health service providers will also be present offering different services as part of their efforts to take healthcare service delivery to the people.

"We are happy to be having services provides such as the Cancer Association of Zimbabwe which will be offering free cervical and breast screening, Adult Rape clinic which will be providing free psycho-social support to rape victims, mental health which will be providing mental health sessions, maternity services such as ante-natal care, ultrasound scan advice and education offered by Domboshava mediclinic, women health services which will be offered by Population Service Zimbabwe.

"Angels Foundation Zimbabwe is partnering Heart for the Nations, with support from from Greenwood wholesalers, Domboshava mediclinic, Centra Health suites, Harare Pharmacy, Nozizwe mother of Nations Trust and Frontline Zimbabwe respectively."



Since launching in October 2018, the Doctors and Nurses on a Mission project has to date conducted 14 medical outreaches in Harare, Chitungizwa, Chiendambuya, Chinhoyi, Stappleford, Marondera and Mhondoro assisting over 600 people with the majority of beneficiaries being the elderly, with the Domboshava medical, dental and maternity outreach being number 15

"Healthcare is one of our key focus areas as an organization which has enabled us to launch and run the doctors and nurses on a mission project for the past 2 1/2 years. Our target is 200 people which have been broken down to come in batches of 30 people per one and half hours in observation of covid-19 restrictions."

COVID-19 exposes children to Child labor

A report by the Human Rights Watch shows that there has been a rise in Child labor in countries like Ghana, Nepal and Uganda due to the COVID-19 pandemic.

According to the International Labour Organization even though the three countries had made remarkable strides in reducing child labour which had decreased by approximately 94 million between 2000 and 2016 presenting a 38% drop, the prevalence of child labor is on its way up.

Jo Becker, Children's Rights Advocacy Director Human Rights Watch said policies protecting children should be expanded to protect children's rights.

"Many children feel they have no choice but to work help their families survive, but a rise in child labour is not an inevitable consequence of the pandemic. The Nepali government and international donors should expand Nepal's relatively small cash transfer program to keen children out of exploitative and dangerous child labour," Becker said.

Human Rights Watch interviewed 25 children with the ages between 8 and 16 who reviewed that they worked in brick kilns, carpet factories, construction, mechanics, cotton candy, vendors selling tea. Nearly all children who were interviewed brought to light that they were negatively affected by the pandemic especially their families' income.

The interviewed children showed that they were working 12hours per day particularly during school closures due to lockdown. They reported fatigue, dizziness back aches, pain in their hands, fingers and legs among others.

"My fingers hurt from knotting the threads, my eyes hurt from looking at the design map … and I sit down for hours so it really hurts," said a 14 year old girl who worked in a carpet factory.

The child labour has been increased by the school closure in March 2020. The Ministry of Education tried to provide distance learning programs through internet, radios and television but



#TalkingCOVIDWithDrGrant: Different Variants, Similar Control Strategies

By Dr Grant Murewanhema

THE Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) is the causative virus for the disease better known as COVID-19. It belongs broadly to a class of viruses known as coronaviruses, and people are more familiar with the previous SARS and MARS outbreaks. None of these ever got to the scale of the current COVID-19 pandemic.

Viruses, such as SARS-CoV-2, which spread rapidly, also multiply very rapidly in a process called replication, where copies of similar virions continue to be made. Now, as you will be familiar with, or at least expect, processes which occur rapidly without efficient control mechanisms are error prone, and this applies to SARS-CoV-2 replication. The errors in replication lead to structural changes in the components of the virus, and this is called mutation.

Mutations can result in minor and inconsequential alterations to the structure of the virus, or can lead to massive changes in the structure of the virus. We are familiar with influenza viruses that periodically undergo processes known as antigenic shift and antigenic drift.

Antigenic drift leads to minor changes in the structure of the influenza viruses, and the pathogenic potential does not change much, and the same vaccines remains efficacious. Sometimes the influenza viruses undergoes antigenic shift, which is a major structural change, producing an almost different virus with different pathogenic potential, and rendering existing vaccines useless against the new variants. Scientists have remained busy with altering influenza vaccines over time, and people have had to receive different jabs over time to cater for the changes and keep the immune system prepared.

It's not surprising therefore that the SARS-CoV-2 viruses have also been undergoing frequent mutations globally. A lot of the mutations have been inconsequential; however, some have given rise to variants of concern. The two particular variants of concern people have been familiar with include the so-called South African variant, and more recently, the so-called Indian variant, and of course there are others. Just over 18 months since discovery, so much is still to be discovered about SARS-CoV-2, and even newer are the vaccines, with the earliest having been used in the population for about 6 months or so.

The vaccines in use include the mRNA vaccines such as the Pfizer, which are relatively novel, the inactivated virions such as Sinopharm and Sinovac, chemically inactivated through an alcohol-based compound and the viral-vector based vaccines carried on a non-pathogenic adenovirus vector. Fears are that major mutations could potentially render most of the vaccines useless against mutant strains, and pose major blows to COVID-19 pandemic control strategies. Interestingly, the Burnet Institute in Australia is working on coming up with universal SARS-CoV-2 vaccines that will be efficacious against all strains. It remains to be seen how far they can go with this exciting science.

People often ask why there is so much hype about vaccines. Vaccines are known to be the best non-user dependent primary prevention strategy for rapidly spreading infectious diseases, and significant strides have been made in control since discoveries by Edward Jenner over a century ago. Smallpox has been eradicated, polio is near eradication, and mortality from tuberculosis and measles has been significantly reduced, whilst complications from rubella have also been remarkably reduced. We are also excited that we now have effective vaccines against Human Papilloma Virus which causes cervical cancer, and we are hopeful that we will significantly reduce the incidence of this cancer that kills many women in Sub-Saharan Africa over the years.


Dr Grant Murewanhema

Of course, due to its elusive nature, the search for an efficacious HIV vaccine has been challenging over the years, though significant progress has been made and important insights have been gained. Vaccination against SARS-CoV-2 has the potential to reduce new infections, reduce disease severity and reduce mortality from severe COVID-19.

The population worldwide should therefore be vaccinated to achieve adequate control of the pandemic. Unfortunately, the vaccination roll-out globally still faces several challenges and is not yet a perfect programme, and also faces serious vaccination hesitancy in other parts of the world, such as in Zimbabwe. Not only are we faced with vaccination hesitancy, but supply chain challenges, unequitable distribution of vaccines, and nationalisation by powerful nations. At the rate at which countries such as Zimbabwe are vaccinating, it may take several years before we reach sufficient levels to attain herd immunity. To date, Zimbabwe has vaccinated just over 600000, which falls far off the target of 60% of the population.

Like in the control of HIV, we have to use a combination of biomedical interventions available to achieve COVID-19 pandemic control, as none of the available strategies is hundred percent efficient and we have not yet vaccinated adequately. Regardless of the variants, the mode of transmission of SARS-CoV-2 remains the same, and therefore our strategies to prevent new infections and break the chains of transmission remain the same. Measures that we have been practising, such as physical distancing, wearing of facemasks, appropriate hand hygiene and avoiding overcrowding and unnecessary travels remain effective. Our people have a tendency to move about even when not necessary, of course taking after those who lead us.

The variants do not move by themselves, but they are moved by people. It remains absolutely necessary to test all returning residents, or visitors to Zimbabwe, and to put them in isolation or contact as necessary. A piecemeal approach where other people are seen as superior and allowed to break protocol only serves as a recipe for disaster. We also need to continue appropriately tracing contacts of confirmed cases, and quarantining them appropriately. Active surveillance countrywide remains an indispensable aspect of COVID-19 pandemic control.

The government and the people should drop the current relaxed mode, and go into full scale active prevention. With our resource limitations, prevention remains the best tool available to us. Zimbabwe is not able to cope with large scale outbreaks of an infectious disease outbreaks, as our public health sector is faced with several other challenges. The disaster that happened between December and February are a clear attestation to our capacity limitation, and the responsibility lies within our capable hands to avoid such similar situations in the future.

(Dr Grant Murewanhema is an epidemiologist, public and global health practitioner and Registrar in Obstetrics and Gynaecology who writes in his own personal capacity. All opinions expressed in the article are independent)



Zimbabwe Rolls Out "SAYANA PRESS," A New Long-term Contraceptive Method

By Michael Gwarisa

A modern and long lasting but reversible contraceptive method called Sayana Press, is currently being rolled out across Zimbabwe in a move that is set to expand birth control options for women.

The contraceptive product was piloted in 2020 while the roll-out commenced in April 2021 covering, Mashonaland East, Matebeleland North, Bulawayo and Matebeleland South. In other parts of the country, the Sayana is only being administered at Zimbabwe National Family Planning Council (ZNFPC), Population Services International (PSI) and Population Services Zimbabwe (PSZ) clinics.

Speaking to HealthTimes, ZNFPC Masvingo Provincial Marketing and Communication Officer, Mr Herbert Chikosi said the Sayana contraceptive method was getting an overwhelming response.

"In terms of reception it has been well received especially by youth for its privacy, and for being self-injectable it comes with reduced transport costs. Some have indicated that it has low to less side effects, in comparison to other methods," said Mr Chikosi.

Here are few points you might need to know about Sayana Press:

What is Sayana Press?

Sayana Press is a contraceptive (pregnancy prevention) method that women can choose to use among other methods of family planning. It is along lasting effective and reversible method that is given by injection. There are two kinds of injectable pregnancy prevention methods available in Zimbabwe; both containing the medicine Depot Medroxyprogesterone Acetate (DMPA). These are Depo Provera (sometimes known as Petogen) and Sayana Press.The two birth control methods are made with progestin. Progestin is a natural hormone, Progesterone that is made by a woman's body.

Sayana Press, like Depo, is given every three months (13 weeks). The difference between the two is that Depo Provera (Petogen), is injected into the muscle (Intramuscular) of the upper arm or the buttock, whilst Sayana Press injection is given into the fatty tissue (subcutaneous) of the thigh, back of the upper arm or abdomen. Sayana press has an added advantage that if the client is comfortable, she can inject herself if given the authority and education to do so. However, as of now in Zimbabwe, Ayana Press is only administered by trained health care providers.

How Sayana Press Works?

Sayana Press moves slowly from the injection site into the blood stream. The progestin in Sayana Press keeps a woman's eggs from leaving the ovaries. It also makes the mucus at the cervix thicker. This keeps sperm from passing through the cervix and fertilizing the egg. Progestin also keeps the lining of the uterus from growing thick, which makes it difficult for a fertilized egg to grow there.

Who can Use Sayana Press?

Most women can use Sayana Press including those who:

Are breastfeeding a baby who is at least six weeks old

Cannot, or do not want to use other contraceptive methods

Have sexually transmitted Infections Including HIV

Are young. However, in adolescents this should only be after other methods of contraception have been considered unsuitable or unacceptable

Are taking medicines, including ARVs and other HIV related medicines.

NB// Women may choose either Depo-IM (Depo Provera/Petogen) or Sayana Press.It is their choice

Although most women can use Sayana Press, those who have or had the following conditions,should consult their health service provider for advice:

Migraine headaches that began or got worse after getting the Sayana Press or Depo Injection

Heart attack or stroke

Serious liver condition

High Blood Pressure

Breast Cancer



Janssen single-dose Covid vaccine approved by UK

A single-dose Covid vaccine made by Janssen has been approved for use in the UK by the medicines regulator.

The vaccine was 85% effective in stopping severe illness from Covid-19 in trials and has met expected safety standards.

Twenty million doses have been ordered for the UK and will arrive later this year.

It will be the fourth vaccine to be used in the UK to protect against Covid-19.

More than 38 million people have now received a first dose of a vaccine in the UK - nearly three-quarters of the adult population.

The vaccine can be given to people aged 18 and over and is likely to be used as a booster jab for care home residents ahead of winter because it can be easily stored and transported at fridge temperatures.

The UK's Joint Committee on Vaccination and Immunisation (JCVI) will produce advice on exactly who should receive the Belgian-made jab in due course.

The single-dose option has already been authorised by the European Medicines Agency (EMA), the Food and Drug Administration (FDA) in the US and the World Health Organization (WHO).

The vaccines that work - and the others on the way

How many people have been vaccinated so far?

Who can book their Covid vaccine now?

Covid vaccines and rare clots - what do we know?

Nadhim Zahawi, vaccine deployment minister, said the Janssen jab would be "another weapon in our arsenal to beat this pandemic".

"We are doing everything we can to vaccinate all adults as quickly as possible and I encourage everybody to come forward for a jab as soon as they are eligible."



First Minister Nicola Sturgeon said the approval was "really good news" but "we're focused right now on the supplies we actually have and getting them into people's arms as quickly as possible", she said.

Originally, the UK ordered 30 million doses but reduced its order after the vaccination programme in the UK picked up pace.

The vaccine, developed by Johnson & Johnson's pharmaceutical arm, Janssen, uses the same technology as the Oxford-AstraZeneca one and is likely to be more suitable for older adults than younger people. Under-40s are being offered an alternative to AstraZeneca in the UK because of a potential link to a type of rare blood clot in the brain.

Both vaccines use a modified version of a different virus to deliver instructions to the body's cells to fire up the immune system and produce antibodies.

Since the Janssen jab is given as one single dose, it could speed up rollout to vulnerable people in care homes and those living in remote locations.

It has not yet been tested against the variant first detected in India which is spreading fast in the UK, although at low levels. BBC

58 patients of Mucormycosis recovered in Haryana; 590 yet under treatment

At least 58 patients suffering from Mucormycosis (Black Fungus) and admitted in various hospitals across Haryana have recovered from the deadly disease. So far, there have been 756 cases of Mucormycosis reported across Haryana out of which 648 are under treatment.

State government has also constituted a technical committee that has approved 975 injection of Amphotericin B for about 515 patients.

According to the details provided by the state health department, out of 577 patients whose clinical data has been analysed by the state health department so far, 442 are male and 135 are female.
A total of 508 patients were found to be suffering from diabetes.

On analysing the Mucormycosis (Black Fungus) patients, it was found that about 86 per cent had proven history of infection with Covid-19 virus. "A total of 498 patients were tested COVID positive and 79 patients revealed no history of Covid infection, while 61 patients had other immune-compromised conditions. As part of the treatment for Mucormycosis, 462 patients have so far been given steroid therapy, 254 given Oxygen therapy", a government spokesperson said.

As far as the cases coming in from parts of Haryana, over 16 districts have so far reported cases of Mucormycosis with Gurgaon showing highest such 216 cases till date followed by Hisar that has, so far, reported 179 cases and 145 cases reported in Rohtak district, till date.

Haryana has also floated a global tender for 15000 vials of Amhotericin B vials that are being used for treatment of Mucormycosis.



Health minister Anil Vij has also directed officers to increase the strength of beds dedicated for Mucormycosis patients in all medical colleges. While hospitals currently have 20 dedicated beds, each, directions have been issued to increase it to 75 beds per medical college.

State government has also made a requisition of 12000 Amphotericin B injections from the union government. Mucormycosis was also declared as an epidemic in the State on May 18 forming regulations called "The Haryana Epidemic Diseases (Mucormycosis) Regulations, 2021".