

## Important Vocab for the Editorial

1. **defer** (verb) – postpone, put off, delay, hold off.
2. **dose** (noun) – an amount/quantity of something.
3. **vaccine** (noun) – a biological preparation that improves immunity to a particular disease.
4. **stagger** (verb) – carry out/perform/pursue in stages; time at intervals (of something as they don't happen at the same time).
5. **buy time** (phrase) – delay, linger, be slow, hold back, lag behind.
6. **pursue** (verb) – engage in, conduct, follow.
7. **outline** (verb) – indicate, define, summarize.
8. **scenario** (noun) – situation, background, context.
9. **deferment** (noun) – postponement, delay, rescheduling.
10. **lactating** (adjective) – breastfeeding.
11. **vaccinate** (verb) – inoculate, administer, introduce (with a vaccine to provide immunity against a disease).
12. **ought to** (modal verb) – must, should.
13. **inoculate** (verb) – to inject/introduce a vaccine into the body of someone to produce immunity to a particular disease; immunize, vaccinate.
14. **Oxford vaccine/Covishield** (noun) – (ChAdOx1 nCoV-19) or (AZD1222) is a COVID-19 vaccine candidate developed by Oxford University and AstraZeneca, UK Ltd. (named Covishield in India). Serum Institute of India (SII), a biotechnology company has partnered with global pharma giant AstraZeneca and Oxford University for this vaccine candidate 'Covidshield'.
15. **underlying** (adjective) – fundamental, basic, primary, essential.
16. **vaccination** (noun) – treatment with a vaccine to protect against a particular disease; immunization.
17. **roll-out** (noun) – official launch/introduction.
18. **take stock** (phrase) – review, assess, evaluate.
19. **as well as** (phrase) – and also, and in addition.
20. **ferocity** (noun) – intensity, severity, strength.
21. **cause** (verb) – bring about, result in, give rise to.
22. **free up** (phrasal verb) – to make something available.
23. **to each his own** (phrase) – each person has the right to form his/her own opinions or have his/her own preferences and choices.
24. **fraction** (noun) – proportion, portion, part, percentage.

25. **the privileged** (noun) – wealthy, rich, affluent people.
26. **stagnation** (noun) – lack of activity/development.
27. **inoculation** (noun) – vaccination, injection, immunization; jab, shot.
28. **fall** (noun) – decrease, decline, reduction.
29. **recipient** (noun) – beneficiary, receiver.
30. **optimal** (adjective) – most favourable, optimum, ideal, perfect.
31. **childhood** (noun) – the period of being a child.
32. **human trial/clinical trial** (noun) – a type of research that studies new tests and treatments and evaluates their effects on human health outcomes.
33. **trial** (noun) – test, pilot study, experiment (phase 1, 2,3, and or human/clinical trial).
34. **binding** (adjective) – required, necessary, essential.
35. **antibody** (noun) – immunizer; it is also called ‘immunoglobulin’; a protective protein produced mainly by plasma (blood) cells in the immune system in response to the presence of antigens (disease-causing organisms (bacteria & viruses) and other harmful/toxic foreign substances like insect venom).
36. **shot** (noun) – injection, inoculation (of a vaccine/drug).
37. **marker** (noun) – indicator, pointer.
38. **cell-based immunity** (noun) – an immune response that does not involve antibodies but rather involves the activation of macrophages and NK-cells, the production of antigen-specific cytotoxic T-lymphocytes, and the release of various cytokines in response to an antigen
39. **whereby** (relative adverb) – by which.
40. **confer** (verb) – present, give, grant.
41. **long-lived** (adjective) – lasting, enduring, abiding, durable.
42. **count** (verb) – matter, be important, be significant, mean a lot.
43. **given** (preposition) – considering, taking into account, bearing in mind.
44. **novel coronavirus (nCoV) (SARS-CoV-2)** (noun) – a new strain (type/variety) coronavirus that has not been previously identified in humans. (Courtesy: **WHO**)
45. **uncertainty** (noun) – unpredictability, unreliability, riskiness/precariousness.
46. **documented** (adjective) – confirmed, proven, verified; reported.
47. **breakthrough infections** (noun) – people getting infections after they are fully vaccinated is when the infections are caused by circulating virus variants, with potential immune escape mechanism, which might

reduce the efficacy of vaccines. These are called “vaccine breakthrough infections.”

48. **fall** (verb) – occur, take place, happen.
49. **so far** (phrase) – until now, up to the present, up to this point.
50. **shed** (verb) – cast, send forth, send out, give out, provide.
51. **degree** (noun) – amount, level, extent.
52. **put together** (phrasal verb) – organize, arrange, assemble, compile, collage.
53. **on the other hand** (phrase) – as an alternative, or, as another option, as a substitute.
54. **toll** (noun) – number, count, total (number of deaths).
55. **surpass** (verb) – be greater than, exceed.
56. **expose** (verb) – make vulnerable; subject to something (infectious agents & others).
57. **variant** (noun) – different or form or version or mutant of something (virus).
58. **abound** (verb) – be in large numbers; be plentiful, be numerous.
59. **complacent** (adjective) – careless, casual, unconcerned, uninterested, apathetic, perfunctory; smug, self-satisfied, pleased/proud of oneself, self-opinionated, satisfied, pleased, contented.
60. **gear** (verb) – prepare, equip.
61. **room** (noun) – scope, opportunity, chance (for something to happen).
62. **knee-jerk** (adjective) – unthinking, unintentional, unplanned.
63. **compromise** (verb) – undermine, weaken, be detrimental to.
64. **objective** (noun) – aim, intention, purpose, target, goal.

### **Extending safety: On deferring second dose of COVID-19 vaccine**

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#### **Staggering of vaccine doses should not be to merely buy time until more doses are available**

Pursuing a policy of spreading the interval between two doses of vaccine, the Centre has now outlined more scenarios of second dose deferment. While lactating women are now encouraged to get vaccinated, those who

have recovered from an infection ought to be getting vaccinated three months hence — the recommendation earlier was four to eight weeks. Those inoculated but who have tested positive should defer their second dose by three months after clinical recovery from COVID-19. The recommendations follow from earlier ones that advise increasing the interval from 12-16 weeks for Covishield, the more widely available vaccine. But there are two underlying principles behind these recommendations, the first being a vaccine shortage. Until early April, India had a very different scheme for its vaccination roll-out, appearing to take stock of availability as well as prioritising those at greater disease risk. It was the ferocity of the second wave that caused the government to panic and ‘free up’ vaccine supply applying a ‘to each his own’ approach. While this benefits a fraction of the privileged, it has not improved access as seen by the stagnation in daily inoculations and a fall in second dose recipient numbers.

The second principle is that the timing of the second dose for an optimal boost to the immune system is not clear. A general policy for childhood vaccines in India is a four to eight-week interval. However, clinical trials of the AstraZeneca vaccine in the U.K (18-55 years) showed that binding antibodies (the ones that actually block viruses) were nearly twice as high in those who got their shots 12 or more weeks apart than in doses had within six weeks. The vaccine also appeared to be more protective in those above 18 with a longer dose interval. While antibody levels are a key marker of protection, they are not the only ones. Cell-based immunity, whereby the immune system confers long-lived immunity, counts too. Given that SARS-CoV-2 has been around for less than 20 months, there is uncertainty about the duration of protection. There are also documented cases of breakthrough infections as well as deaths even after a second dose. Though they fall within expected statistical boundaries so far, it is only more inoculations from now that will shed greater clarity on the degree of protection. Put together, these recommendations do buy policy makers time to stagger doses until more vaccines become available from August. On the other hand, the toll from India’s second wave continues to surpass similar daily figures from the U.S. and Brazil. Given that many Indians have still not been exposed to the virus and newer threatening variants abound, there is no reason to be complacent that people will be protected from future waves. The aim of vaccines is to prevent severe disease and death and all policy

recommendations must be geared towards that goal. There is no room for knee-jerk reactions that can compromise this objective.

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