Gonoshasthaya Kendra scientists have expressed sheer frustration over the delay in submitting the report to the Directorate General of Drug Administration (DGDA), which is then supposed to authorise approval for mass production.

"We have nothing to say. We are just frustrated, especially when so many countries are using the rapid test kit and when the infection is rising exponentially in Bangladesh," a scientist of the Gonoshasthaya Kendra told The Daily Star.

The team of scientists -- Dr Bijon Kumar Sil, lead researcher, along with Nihad Adnan, Raeed Jamiruddin and Firoz Ahmed -- developed the antibody kit and an antigen kit.

Dr Bijon Kumar Sil said results could be nearly 100 percent accurate if samples from each patient is run through both tests. Bangladesh could have gone for large-scale testing if the approval had come earlier and that could have helped stem the spread and rise in infections.

A Gonoshasthaya Kendra scientist said no one in the world uses more than 200 kits for a performance trial, but the BSMMU has used about 600. It should not have taken more than two weeks to complete the trial and submit the report.

Despite the outbreak of a pandemic, the authorities have been slow in approval of the kit when authorities in India, the US, UK and European Union have been issuing emergency authorisation approval for rapid testing kits.

The Indian Council of Medical Research and All India Institute of Medical Sciences have recommended

testing kit for Covid-19 to enable faster diagnosis at lower rates and without laboratory examinations of samples.

The kit, produced by Korean firm SD Biosensor, which has a manufacturing unit in Manesar of Gurugram, can be used in field settings, reported the Times of India yesterday.

Following a request on March 18, the DGDA approved imports of regents on April 5 and then Gonoshasthaya RNA Biotech Limited, a sister concern of Gonoshasthaya Kendra, developed the kit and first approached the DGDA on April 26 for validation.

On April 30, the DGDA allowed Gonoshasthaya to have performance trial at the BSMMU, which then formed a committee and on May 12 wrote a formal letter asking Gonoshasthaya to supply kits.

Since May 13, Gonoshasthaya has supplied 600 antibody and 500 antigen kits to the BSMMÚ. The trial of antibody kit was over by June 5 but no report has yet been submitted. The trial of the antigen kit had been suspended as Gonoshasthaya Kendra found discrepancies in the process of saliva sample collection.

"We have since developed a device to properly collect saliva for the antigen kit. But as the antibody trial report is yet to be submitted, we have not supplied the device yet," said Dr Mohibullah Khondoker, GR-Rapid Dot Blot Project Coordinator.

Gonoshasthaya Founder Zafrullah Chowdhury, before he was infected with coronavirus, had told The Daily Star that the authorities were not realising how big of crisis period this is.

20 Indian troops killed

said, adding that New Delhi is firmly committed to "protect the territorial integrity and sovereignty of the nation".

The deaths were the first since the last major border clash in 1967 between the nuclear-armed neighbours - also the world's two most populous countries - which have been unable to settle the dispute along their lengthy frontier.

Thousands of troops from the two nuclear-armed neighbours, backed by armoured trucks and artillery, have been involved in the latest face-off since May in the Ladakh region, bordering Tibet.

China and India have traded accusations over who was to blame for Monday's clashes in Ladakh, which came after military commanders held meetings to resolve the situation.

Indian officials say Chinese soldiers crossed the boundary at three different points, erecting tents and guard posts and ignoring verbal warnings to leave. That triggered shouting matches, stonethrowing and fistfights.

Meanwhile, China accused India of crossing a "disputed border" between the two countries, according to a report by the AFP news agency.

Foreign ministry spokesman Zhao Lijian said Indian troops crossed the border line twice on Monday, "provoking and attacking Chinese confrontation between border forces on

the two sides" "We again solemnly request that India follows the relevant attitude and restrains its front line troops, he said. "Do not cross the border, do not provoke trouble, do not take any unilateral action that would complicate

the border situation." Beijing has lodged "strong protests and solemn representations" to New Delhi, Lijian said.

Indian Defence Minister Rajnath Singh reviewed the current operational situation in eastern Ladakh along with Chief of Defence Staff Gen Bipin Rawat and the three service chiefs. External

Affairs Minister S Jaishankar was also present in the meeting, reported our New Delhi correspondent.

In early May, several Indian and Chinese soldiers were injured in twoday clashes involving fists and stonethrowing at Naku La in India's Sikkim state and Lakakh.

Army officers and diplomats from both countries have held a series of meetings to try to end the impasse, with no breakthrough.

After a series of talks, the Chinese foreign ministry said only last week that a "positive consensus" had been reached following "effective communication" through diplomatic and military through

India's foreign ministry also said the two sides would "continue the military and diplomatic engagements to resolve the situation and to ensure peace and tranquillity in the border areas.

However, Indian sources and news reports suggested that Chinese troops remained in parts of the Galwan Valley and of the northern shore of the Pangong Tso lake that it occupied in recent weeks.

Military experts say one reason for the face-off is that India has been building roads and airfields to improve connectivity and narrow the gap with China's far superior infrastructure. At Galwan, India completed a road leading to an airfield last October. China has asked India to stop all construction. India says it is operating on its side of the Line of Actual Control, the de facto

Relations between China and India have long been prickly.

The nuclear powers fought a brief war in 1962 in which China took territory from India. Further deadly clashes followed in 1967, but the last shot fired between the countries was in 1975.

In 2017 there was a 72-day showdown after Chinese forces moved into the disputed Doklam plateau on the China-India-Bhutan border.

ICU needs attention

"The situation is getting worse day by day as some of the physicians, nurses and technologists are in quarantine. doctors, nurses and technologists who have expertise in ICU management," said the director.

Assistant Professor Nazmul Alam of the department of anesthesia, who is also the in-charge of the ICUs, said, "Only I have a six-month training on ICU management here. To operate the critical medical functions of an ICU, trained medical persons are needed. But we could not find anyone else.

While Nazmul and six medical officers are providing service for the ICU beds in the coronavirus isolation unit, an assistant professor is currently looking after the 10-bed ICU for non-Covid-19 patients.

"Since there is no ICU specialist, I have to do the duties of the ICUs as well as those in the operation theatre. I cannot even go into quarantine," said Nazmul.

A patient's relative, wishing anonymity, said mostly junior and untrained doctors remain on duty at the

"If a patient's condition deteriorates, the junior doctors do not want to do anything and place a video call to the in-charge for instructions. This way a lot of time is wasted," said the relative.

Meanwhile, the poor functioning of the ICU facilities at SBMCH is reportedly forcing many in Barishal to seek treatment elsewhere.

Anwar Hossain, founder of Barishal's Rahat Anowar Hospital, was flown to Dhaka on June 8 with coronavirus-like symptoms. Hospitals with empty ICU beds were not instantly available there, and on June 9, he passed away.

Laskar Nurul Ĥaque, legal advisor of Rahat Anowar Hospital, said, "If

the ICUs of SBMCH were functioning properly, we might not have needed to go to Dhaka and our patient could have

been saved." Moniruzzaman Shaheen, Prof assistant director of SBMCH and incharge of the coronavirus unit, said sometimes they were unable to provide critical patients with oxygen support due to lack of high-flow nasal cannula (HFNC).

Besides, HFNC, plasma separator machines, and more ventilators are needed for saving lives, said doctors of SBMCH.

"We are appealing to the rich to donate life-saving medical equipment, such as high-flow nasal cannula system for oxygen delivery and breathing masks, to the hospital," said Sudip Haldar, president of Indoor Doctors Association, a SBMCH doctors' forum.

He said a critical patient is first sedated before putting into a ventilator. Sometimes, the procedure turns dangerous and deadly.

In such cases, high-flow nasal cannula (HFNC) oxygen therapy gives much better results.

Many rich people can afford the cost of one HFNC system which is around Tk 3 to Tk 4 lakh, the physician added.

Asit Bhushan Das, principal of Barishal Sher e-Bangla Medical College, said, "We sent a letter to the Department of Health Services and the secretary of the health ministry to solve the problem."

However, he feels donation of medical equipment to the hospital will improve the situation quickly.

On Monday, civil society members along with Bangladesh Samajtrantik Dal from a human-chain demanded enhancement of ICU facilities to 100 beds and appointment of more trained manpower at SBMCH.



A niece of Fatema Begum, lying on a gurney, puts her mask on outside the coronavirus unit of Dhaka Medical College Hospital. Fatema, a heart patient, was admitted to the hospital yesterday after she tested positive for Covid-19 while undergoing treatment at National Institute of Cardiovascular Diseases in the city's Shere-Bangla Nagar. The niece would not wear a mask and said she was not afraid of dying from the virus while taking care of her aunt. PHOTO: AMRAN HOSSAIN

SC stays all but 3 HC directives

The health ministry circulars on May 11 and 24 say: all private and government hospitals must have separate arrangements for treating suspected Covid-19 patients and private hospitals and clinics cannot refuse treatment to patients, Covid-19 or otherwise, they have the requisite facilities or

It also said if a private hospital or clinic does not have the requisite facilities or equipment to treat a patient, then it may refer the patients to another hospital and the transfer can only take place after ensuring treatment in the other hospital in consultation with the Covid-19 hospital control room of

During the virtual hearing on the government petition yesterday, Attorney General Mahbubey Alam and Additional Attorney General Murad Reza opposed the HC directives, saying that the government has been relentlessly working to provide treatment to patients whether they are infected with Covid-19 or not.

They argued there was no negligence on part of the government in providing treatment to patients and therefore, there is no necessity for such directives from the HC. They also opposed the HC observation that said "If a patient dies or is deprived of treatment at a hospital due to negligence, it would be considered a criminal and punishable

If the HC observations remain in force, doctors cannot work properly out of fear, they said, adding that several doctors have already died from Covid-19 while treating patients.

Murad Reza told the court no victims have brought any allegations of denying treatment against hospitals.

The writ petitions were moved before the HC on the basis of newspaper reports on alleged negligence of treatment, and therefore those writ petitions are not acceptable, he said.

Murad Reza also argued that there were no specific allegations of violation of the health ministry directives.

Writ petitioners' lawyers opposed the government's stay petition, saying that the HC has issued the directives necessary to protect people's right to life in accordance with the constitution.

Advocate ZI Khan Panna, a lawyer for the writ petitioners, told the apex court that the directives issued by the HC were not against doctors, but for the protection of patients' health.

The mismanagement that takes place in private hospitals is because of their owners, he said, adding that doctors provide treatment to patients in the hospitals amid risk.

The lawyer said the writ petitions were filed as public interest litigation, which can be moved on the basis of newspaper reports, adding that the Indian Supreme Court has introduced the tradition of accepting public interest litigations based on newspaper reports.

The High Court directives need to be upheld to protect people's health, he argued.

He told The Daily Star that the authorities concerned must ensure treatment of patients at both government and private hospitals in accordance with the health ministry directives, although the SC stayed some of the HC directives.

The health ministry and DGHS have to submit a compliance report to the HC by June 30 in line with Appellate Division order, he said, interpreting the Apex court order.

Apart from Advocate ZI Khan Panna, sale of oxygen cylinders.

Advocate Manzill Murshid, Barrister Aneek R Haque, Barrister Mahfuzur Rahman Milon and Advocate Jamiul Hoque Faisal appeared for the writ petitioners during yesterday's hearing. Earlier, the HC bench Justice M

Enayetur Rahim on Monday made a number of observations and issued a number of directives following five separate writ petitions filed recently as public interest litigation seeking necessary orders from it.

Rights organisation Justice Watch Foundation, Deputy Registrar of Bangabandhu Sheikh Mujib Medical University Dr Sheikh Abdullah Al Mamun, Supreme Court lawyers Mahbubul Islam and Aynunnahar Siddiqua filed a petition each.

THE HC DIRECTIVES THAT WERE STAYED BY SC

The HC directives stayed by the SC include: the death of or denial of treatment to a patient due to negligence being a criminal and punishable offence; taking legal action against those displaying negligence while treating patients in a hospital; informing people of the number of ICU beds in government hospitals through media and regular bulletins; making ICU bed management more accountable and launching an ICU hotline; making a countrywide list of private hospitals with 50 or more beds and compiling information on the treatment given to Covid-19 and non-Covid-19 patients since the issuance of health ministry guidelines on May 24; taking necessary measures to stop the sale of oxygen cylinders without prescriptions from registered doctors; and engaging the commerce ministry and Directorate of National Consumer Rights Protection to strengthen monitoring of supply and

Assailants storm hut, kill pregnant woman

OUR CORRESPONDENT, Benapole

DHAKA WEDNESDAY JUNE 17, 2020, ASHAR 3, 1427 BS

Police yesterday recovered the body of a two-month pregnant woman from a hut inside a brick kiln at Khajura in Jashore Sadar upazila.

The victim -- Razia Khatun, 22, wife of Shahid Biswas -- was found dead around 5:00am, said police.

Syed Al Mamun, officer-incharge of the police station, said the victim's husband was the prime accused in Chunnu murder case and got arrested from the spot.

A case was filed in connection with the murder of Razia with Bagharpara Police Station.

According to the case statement, a group of people intruded into the hut and started beating Shahid. At one point, he escaped the scene and sought help from the night guard of the brick kiln.

Returned, they found the naked body of Razia was lying on the ground. The couple used to stay there as Shahid was a worker at the brick kiln.

SI Jumman Khan, in-charge of Khajura police camp, said they recovered the body on information and sent it to Jashore Medical College Hospital morgue for autopsy.

The husband alleged that Razia was gang-raped before being murdered. On the other hand, police suspected that Shahid might have killed Razia.

Doubts grow over

Experts said that unless the transmission of the virus is stopped through active measures, the outbreak will continue. Based on experiences of other

countries, they also said the nature of the novel coronavirus is not like any other virus as it undergoes changes every day. There has been no instance in any

country of the virus going away after reaching the peak.

In many countries, infection rates rose again even after reaching the peak and witnessing a downward trend.

"There is only one option to tackle the virus and that is taking active measures -- maintaining physical distance, early detection, contact tracing and treating infected patients in isolation," Prof Mushtuq Hussain, consultant of the Institute of Epidemiology, Disease Control and Research, told The Daily Star yesterday.

Prof Saif Ullah Munshi, chairman of virology at Bangabandhu Sheikh Mujib Medical University, said, "Even after full implementation of the zonewise approach, it will take a minimum of two weeks to observe a downward trend in transmission."

Echoing the virologist, Prof Abul Kalam Azad, director general of the Directorate General of Health Services, said, "We are observing a static trend in infection for the last few days. If it continues for a week, then we may see a downward trend."

Official data shows that the growth rate for Covid-19 infection in the country is now 1.25, which means every confirmed patient is infecting 1.25 persons on an average.

DAILY UPDATE At the daily virtual briefing yesterday, Prof Nasima Sultana, additional director general (admin) of the DGHS, said 17,214 samples were tested in 61 labs across the country in 24 hours till yesterday afternoon.

On the other hand, 2,237 Covid-19 patients recovered in the same period, taking the total number of recoveries to 36,264, she added. The current recovery rate is 38.38

percent, the DGHS official said, adding that 635 people were put in isolation over those 24 hours. Of the dead, 47 were male and six

female, she said adding that 30 were from Dhaka, 14 from Chattogram, four from Rajshahi, three from Khulna, one from Barishal and another was from Mymensingh divisions.

Of them, one was aged between 11 and 20, three between 21 and 30, two between 31 and 40, nine between 41 and 50, 19 between 51 and 60, 10 between 61 and 70, eight between 71 and 80 and another was between 81-90, Dr Nasima said.

21-DAY LOCKDOWN

The government will impose a 21-day lockdown in red-zoned areas instead of the earlier announced 14-day one.

"The red zone status will be lifted when the situation improves," said a press release issued by the DGHS on Monday.

The residents in red zones will have to work from home and all kinds of public gatherings will be restricted in those areas, it said.

However, healthcare centres, hospitals and institutions with emergency services will remain open.

Adequate testing arrangements will be made for Covid-19 suspects and people who test positive will be kept in home or institutional quarantine.

Only grocery shops and pharmacies of these zones will remain open, while restaurants and food shops will remain open for home delivery services only.

Caught in Shahid's web of deceit

were hiding when MP Shahid, also known as Kazi Papul, got arrested by the Criminal Investigation Department of Kuwait on charges of human trafficking

and money laundering last week. Twelve of the Bangladeshis were nabbed by the Kuwaiti police. Later, they were asked to give deposition in an investigation against Shahid, with promises that they would be compensated and sent back home.

They assisted the police and were deported subsequently.

They came back almost empty-The Daily Star spoke to four such returnees yesterday and learnt how they

were deceived all along. They said the Kuwaiti authorities had romised them of full compensation, ut they were handed only 150 Kuwaiti Dinars (1 KWD=Tk 276) before they boarded a flight that reached Dhaka

vesterday morning. Abdul Alim is one of them.

The 43-year old man from Noagaon reached Kuwait after paying around Tk 7.5 lakh to Shahid's agency, housed in a building in the capital's Fakirapool area,

"It was a work visa for the job of a cleaner. I was told that my job would have an eight-hour shift and I would be paid 140 dinars a month," Alim, a father of two, told this correspondent er phone.

He said when he landed, he found his shift would be 16 hours a day and his monthly salary 100 Kuwaiti dinars. "From the factory where I worked, I

as sent to the airport to work as a day labourer.' There, Alim was allowed to do odd jobs but in exchange he had to pay 8 dinars every day to Shahid's men, he alleged. Two men named Aman and Mahbub would collected the money

from him. coronavirus-driven the Once ckdown began, Alim was sent to a building, owned by the company, in Abbasid area of Kuwait. After a few days, he was sent to a desert camp, belonging to the company

"Around 9:30pm on Monday, Kuwaiti CID police raided the camp and took us to the CID office. I found 11 others there. We were kept there for five to six days," Alim recalled.

It was at the CID building where they saw Shahid and his associate Rashed. The CID officials told them that their company was illegal and that their stay in Kuwait was also illegal.

"At the CID office, the officials asked how much we had given to Shahid, what we were doing and how much we were paying Shahid. We told them everything and then the official said they would give us the money we spent and send us back." But then all of a sudden on Saturday

night they took the 12 people back to collect their belongings and took them to the airport on Monday night. "A CID policeman and some people of the company were at the airport. They

gave each of us 150 dinars and said the rest would be paid later," he said. Alim said he had lost everything and demanded Shahid's punishment. He

said he wanted proper compensations. Similar is the case of Shah Alam. Hailing from Mallick Bari area of Mymensingh, the 29-year-old went to Kuwait on work visa through the company that sent Alim. He also had to

spend Tk 7.5 lakh Alam was told that he would get a cleaner's job there and earn 150 dinars a month.

"But I did not get the job. The arranged food company accommodation for us for two months and then sent me to an airport. I worked there as a porter and I had to give 10 dinars a day to the men of Shahid for managing the job at the airport," he

He alleged that there had been a nexus between CID officials and the men of Shahid. "They all fooled us. We have lost everything.

Mohammad Sohag Mia, another deportee, shared a similar story.

According to a report published in Kuwaiti newspaper Al Rai on Sunday, certain Kuwaiti quarters within the government were involved in residency trade which paved the entry of Bangladeshi workers to the Arab country in exchange for money.

Papul (Shahid) and a Kuwaiti citizen co-own a big recruitment company named Marafie Kuwaitia. He is accused of charging each

foreign worker, mostly Bangladeshi ones, up to 3,000 dinars in exchange for going to Kuwait. The workers also paid huge sums to the company for renewing their

residency every year, said the report. Following a complaint filed on February 16, the Anti-Corruption Commission of Bangladesh began an enquiry into an allegation that Shahid amassed Tk 1,400 crore by trafficking people to Kuwait and laundered the

money to different countries.

Also in February, Kuwaiti media reported that three Bangladeshis were operating a human trafficking racket in the Middle Eastern country. On February 12, a report in the Arab Times said one of the three was a "member of parliament in Bangladesh". According to the report, the trio

"occupied sensitive positions" in three major companies that brought over 20,000 Bangladeshi workers to Kuwait in exchange for an amount believed to be more than Tk 1,391.6 crore.

Neighbourhood-based

FROM PAGE 1 He said they would implement the lockdown decision involving everyone, including local councillors and law enforcement agencies.

City dwellers will also have to

come forward to make the lockdown

successful as it is for their betterment

and they will have to help them even

after accepting their personal sufferings "We will try to bring down the [coronavirus infection] cases to zero level in the areas where the lockdown will be imposed," he said, adding that the lockdown might last for 14 to 21

The Directorate General of Health Services earlier identified 28 areas in DSCC and 17 areas in DNCC as red zones to curb the spread of the virus.

In a video statement yesterday, Dhaka North City Corporation Mayor Atiqul Islam said they were waiting for the maps from the DGHS before putting the red zones under lockdown. He said the DGHS already marked 17

areas of DNCC as red zones. But before

going for the lockdown, the maps were

very necessary to be more specific about

Atiqul said after getting the maps, they would take preparations involving local lawmakers, councillors, law enforcement agencies, and others based on the experience from East Rajabazar, which has been under trial lockdown as a red zone since June 10.

The mayor added that they would need 48 hours for enforcing the lockdown after getting the maps as they would have to prepare for this. On Monday, Atiqul told The Daily Star that they were facing

many challenges while imposing the experimental lockdown in East "We will have to know how much

food is needed [for residents] before enforcing the lockdown," he added.