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WEA LEE'S GLOBAL NOTES

09/24/2020

CORONAVIRUS DIARY

There Will Be An End To COVID-19

Dr. Anthony Fauci told a group of CEOs that COVID-19 can be removed as a public health threat with good, widely administered vaccines and strong public health measures, and a degree of normality might return by the end of 2021.

Dr. Fauci told the Wall Street Journal there will be an end to this and we will be able to get back to normal. Many business leaders are concerned about how long the new coronavirus, which has caused more than 29 million cases

and 938,000 deaths, will continue to spread and whether it can be beaten back eventually as a public health threat.

Most health experts believe this will depend on how effective the vaccines that are currently in development or testing prove to be and how many people get them.

The fundamental goal is to get the infection rate so low that we can easily control it.



This is good news for all of us. We believe these outstanding researchers can make good vaccines to come to the rescue of the world.

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Stay Home!

BUSINESS

Wear Mask!

Getting A Flu Shot This Year Is More Critical Than Ever. Why? COVID-19



Compiled And Edited By John T. Robbins, Southern Daily Editor

With the coronavirus still spreading widely, it's time to start thinking seriously about influenza, which typically spreads in fall and winter. A major flu outbreak would not only overwhelm hospitals this fall and winter, but also likely overwhelm a person who might contract both at once. Doctors have no way of knowing yet what the effect of a dual diagnosis might be on a person's body, but they do know the havoc that the flu alone can do to a person's body. And doctors are learning more each day about the serious effects of COVID-19. Public health officials in the U.S. are therefore urging people to get the flu vaccine as soon as possible. Flu cases are expected to start increasing early in October and could last late into May. This makes September and early October the ideal time to get your flu shot. But there's reason to be concerned that flu vaccination rates could be lower this year than in past years, even though the risk of getting seriously ill may be higher because of widespread circulation of the coronavirus.



In an effort to avoid getting sick, millions

of Americans avoided seeing their health care provider the past few months. Social distancing and stay-at-home orders have resulted in a decreased use of routine medical preventive services such as vaccinations. Many employers that often provide the flu shot at no cost to employees are allowing employees to work from home, potentially limiting the number of people who will get the flu shot at their jobs.

As a health care professional, I urge everyone to get the flu vaccine in September. Please do not wait for flu cases to start to peak. The flu vaccine takes up to two weeks to reach peak effectiveness, so getting the vaccine in September will help provide the best protection as the flu increases in October and later in the season.



CDC Director Robert Redfield discusses the importance of flu vaccination this year. A lifesaver in previous years, but more so now

Both COVID-19 and the flu are contagious respiratory illness that present with similar symptoms. Both viruses can impact the elderly and those with certain chronic conditions, such as heart and lung disease, the hardest.

Data on flu vaccination rates from 2018-2019 show that only 49% of Americans six months of age and older received the flu vaccine. The vaccine's effectiveness varies each season, with early data from the 2019-2020 flu season indicating a vaccine effectiveness rate of 50% overall, and 55% in youth.

While some may think this effectiveness rate is low, the flu vaccine remains the single best way to prevent the flu and related complications. For example, during the 2018-2019 flu season, flu vaccination was estimated to prevent 4.4 million flu illnesses, 58,000 flu hospitalizations and 3,500 deaths. Early data from the 2019-2020 flu season estimates there were 39-56 million flu illnesses, 18-26 million flu-related medical visits, 410-740,000 hospitalizations and up to 62,000 deaths. Much of this disease burden is preventable from higher flu vaccination rates.



It is now quite apparent that COVID-19 will still be circulating during flu season, which makes getting a flu vaccine more important than ever. As schools, our communities and our economy continue to reopen, it is vital to get the flu vaccine for personal, family and community protection.

Severe cases of both COVID-19 and the

flu require the same lifesaving medical equipment. This highlights the importance of getting the flu vaccine for not only your own personal health but also the health of your community. Receiving the flu vaccine will help reduce the burden of respiratory illness on our already very overstretched health care system. By increasing flu vaccination rates, we can reduce the overall impact of respiratory illnesses on the population and hence lower the resulting burden on the health care system during the COVID-19 pandemic.



Because flu vaccination protects against one of these respiratory illnesses, the CDC recommends everyone (with few exceptions) six months of age and older get an annual flu vaccine. While the flu vaccine will not protect you against COVID-19, the flu vaccine will reduce your risk of developing the flu as well as reduce your risks of flu-related complications including hospitalization and even death.

While it may seem like there is so much out of our control during this pandemic, getting the flu vaccine, practicing proper hand washing, social distancing and wearing face coverings are within our control and will protect not only you but also your family and community.

If you are not getting the flu vaccine from your employer, think about alternative sources now. Vaccines should be available now in most areas.

- Call your doctor's office to ask how you can get a flu shot.
- Call your local public health department.
- Consider getting a vaccine while you are grocery shopping or picking up prescriptions.



Get your flu shot this year. Now more than ever!

Mainly, make sure you take advantage of this potentially lifesaving vaccine. Get it on your calendar as soon as you can. And remember, the flu shot cannot give you the flu. (Courtesy <https://theconversation.com/>)



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Editor's Choice



A burning trash can is seen as protesters clash with police in Louisville, Kentucky. REUTERS/Bryan Woolston



Louisville Police fire a pepper ball gun into a crowd during a protest after a decision in the case against police officers involved in the death of Breonna Taylor, in Louisville, Kentucky. REUTERS/Lawrence Bryant



Firefighters work at the site of the Bobcat Fire burning near Mount Wilson in the Angeles National Forest, near Los Angeles. REUTERS/Mario Anzuoni



Environmental activist and campaigner Mya-Rose Craig, 18, holds a cardboard sign reading “youth strike for climate” as she sits on an ice floe in the middle of the Arctic Ocean, hundreds of miles above the Arctic Circle. REUTERS/Natalie Thomas



Maria Arevalo, left, and her husband Antonio Silva search for items to salvage in the remains of their burned home, in a largely Latino neighborhood, that was destroyed by a wildfire that came through the area in Phoenix, Oregon. REUTERS/Jim...



A woman sits outside Cafe Du Soliel under bubble tents in Manhattan, New York City. REUTERS/Jeenah Moon



A woman touches hands of a child through a fence at a new temporary camp for migrants and refugees, on the island of Lesbos, Greece. REUTERS/Yara Nardi



White House pandemic adviser Scott Atlas (L) and White House press secretary Kayleigh McEnany (2nd L) speak as President Trump arrives for a news conference in the Brady Press Briefing Room at the White House. REUTERS/Tom Brenner

Experimental Cancer Drug Stops SARS-CoV-2, Other Viruses From Infecting Cells

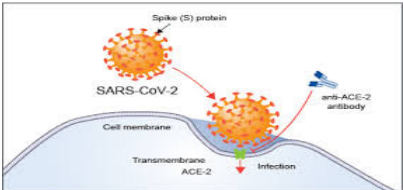


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KEY POINT
Researchers say drug not only helps protect against coronavirus, but also influenza, HIV, measles, and other viruses.

Compiled And Edited By John T. Robbins, Southern Daily Editor

RICHMOND, Va. — With doctors all around the world testing potential vaccines for COVID-19, it’s becoming a horse race to see which drug will clear patient trials first. A team in Virginia is now entering the race after finding an experimental cancer treatment stops coronavirus from infecting cells. The study says AR-12 not only inhibits SARS-CoV-2, but fights viruses like influenza and HIV as well. Scientist Paul Dent and his team at Virginia Commonwealth University find AR-12 prevents SARS-CoV-2, the virus causing COVID-19, from both infecting cells and replicating. Previous studies reveal SARS-CoV-2 uses a “spike” protein to hijack human cells, forcing them to make more of the virus. Dent’s team studies AR-12 for use against cancer and other viruses. The VCU lab’s work and other scientific publications show the promising drug is effective against illnesses including the mumps, measles, rubella, drug-resistant HIV, the flu, and Zika. “AR-12 works in a unique way. Unlike any other anti-viral drug, it inhibits cellular chaperones, which are proteins that are required to maintain the right 3D shape of viral proteins. The shape of the virus is critical to its ability to infect and replicate,” Dent explains in a media release.



AR-12 prevents SARS-CoV-2
How AR-12 prevents virus replication Researchers say AR-12 inhibits one of the key “cellular chaperones” which viruses use to reproduce, GRP78. The protein acts like a stress detector and is vital to the life cycle of viruses living in all mammals. The VCU Massey Cancer Center is now examining the findings and are hoping to start a clinical trial soon. Its tested potential to fight cancer shows humans can take the medication orally and it won’t cause serious side-effects. “AR-12 is an oral therapy that has been well tolerated in a prior clinical trial, so we know that it is safe and tolerable,” says Andrew Poklepovic, medical director of the Clinical Trials Office at Massey. “Most COVID-19 drugs are given intravenously, so this would be a unique therapeutic option and potentially suitable for outpatient therapy, similar to the way one would take an antibiotic.” Poklepovic adds the VCU is hoping to start enrolling patients in their clinical trial in early 2021. To do that however,

scientists need FDA approval and create a protocol for testing the drug on COVID-19 patients. (Courtesy <https://www.studyfinds.org/>) This study previously appeared in the journal Biochemical Pharmacology.

Related
Clinical Trials Launched To Evaluate Effectiveness Of Blood Thinners To Treat COVID-19

From **NIH** National Institutes of Health
Turning Discovery Into Health
NIH ACTIV initiative launches adaptive clinical trials of blood-clotting treatments for COVID-19
The National Institutes of Health has launched two of three adaptive Phase 3 clinical trials evaluating the safety and effectiveness of varying types of blood thinners to treat adults diagnosed with COVID-19. Part of the Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV) initiative, these trials will be conducted at more than 100 sites around the world and will involve patients in various clinical settings — those who have not been hospitalized, those currently hospitalized and those discharged after hospitalization for moderate to severe disease. Collectively known as ACTIV-4 Antithrombotics, the trials will provide critical insights that could help guide the care of patients with COVID-19, particularly those who suffer from life-threatening blood clots. The trial for hospitalized COVID-19 patients and the trial for patients with COVID-19 who have not been hospitalized are now underway. A third trial to start later will focus on patients discharged after hospitalization for moderate to severe COVID-19 disease. All three clinical trials will be coordinated and overseen by the National Heart, Lung, and Blood Institute (NHLBI), part of NIH, and funded through Operation Warp Speed(link is external).

Researchers have noted that many patients who have died from COVID-19 — the deadly disease caused by SARS-CoV-2 — had formed blood clots throughout their bodies, including in their smallest blood vessels. This unusual clotting, one of many life-threatening effects of the disease, has caused multiple health complications, from organ damage to heart attack, stroke and pulmonary embolism.



ACTIV-4 Antithrombotics will be recruiting at sites with significant COVID-19 burden and are interested in enrolling patients in studies testing potential treatments

to prevent or reduce the formation of blood clots. The adaptive design of the protocol allows different blood thinners to be started, stopped or combined during the study in response to emerging trial data. This approach accelerates the timeline for testing different agents without compromising safety. Antithrombotics, also known as blood thinners or anticoagulants, keep blood protein and platelets from turning into clumps or sticking to each other, but doctors have not yet figured out if, and at what point during the course of the disease, blood thinners might be effective at treating patients with COVID-19. “There is currently no standard of care for anticoagulation in hospitalized COVID-19 patients, and there is a desperate need for clinical evidence to guide practice,” said NIH Director Francis S. Collins, M.D., Ph.D. “Conducting trials using multiple existing networks of research sites provides the scale and speed that will get us answers faster.” ACTIV-4 Antithrombotics Inpatient will investigate the safety and effectiveness of using varying doses of the blood thinner heparin to prevent clotting events and improve outcomes in hospitalized COVID-19 patients. Patients will be assigned to either a low or high dose of heparin, and as the trial progresses, additional antithrombotics may be tested, depending on the trial results. All participants in the study will continue to receive clinical care as indicated for their condition.



ACTIV-4-Antithrombotics Outpatient will investigate whether anticoagulants or antithrombotic therapy can reduce life-threatening cardiovascular or pulmonary complications in newly diagnosed COVID-19 patients who do not require hospital admission. Researchers will also collect patient data and blood samples to help identify new drug targets and biomarkers that may help identify a patient’s risk of developing complications related to COVID-19. Participants will be assigned to take either a placebo, aspirin or a low or therapeutic dose of the blood thinner apixaban. “We must use therapies that support the natural inhibitors of clotting in the blood,” said Keith Hoots, M.D., director of NHLBI’s Division of Blood Disorders and Resources. “Heparin has shown promise, but we really need clinical trial data to determine how much blood thinner, or even anti-platelet medication, to give.” “By leveraging the infrastructure and expertise of

our existing research networks, we can more rapidly gather the scientific evidence needed to help prevent or treat these very serious complications caused by COVID-19,” said NHLBI Director Gary H. Gibbons, M.D. “Harnessing and integrating the assets within existing networks gives us an enormous head start and will allow us to get answers much sooner.” Trial planning and development work is being done through a collaborative effort with a number of universities, including the University of Pittsburgh; University of Michigan, Ann Arbor; New York University, New York City; Brigham and Women’s Hospital, Boston; University of Illinois at Chicago; University of North Carolina at Chapel Hill; and The University of Vermont, Burlington.



NIH announced the ACTIV public-private partnership in April 2020 to develop a coordinated national research response to speed COVID-19 treatment and vaccine options. As part of this partnership, Bristol-Myers Squibb/Pfizer have agreed to donate the treatments for the trials for patients with COVID-19 who have not been hospitalized. Managed by the Foundation for the National Institutes of Health, ACTIV brings together multiple partners from government, industry, academia and non-profit organizations. For more information about this and other ACTIV therapeutic trials, visit the ACTIV Therapeutics page.

About the National Heart, Lung, and Blood Institute (NHLBI): NHLBI is the global leader in conducting and supporting research in heart, lung, and blood diseases and sleep disorders that advances scientific knowledge, improves public health, and saves lives. For more information, visit <https://www.nhlbi.nih.gov/>.
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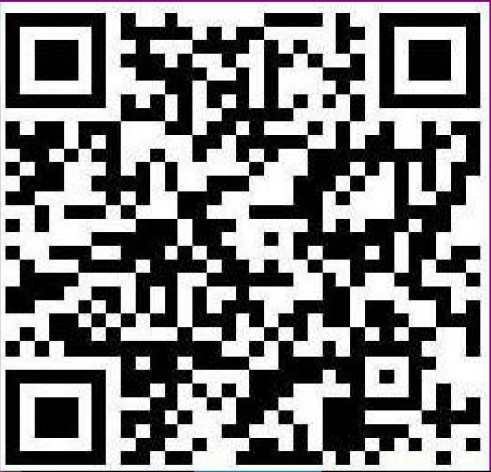
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分類廣告



《我，喜歡妳》：怎麼給霸道總裁“去油膩”

林雨申、趙露思領銜主演的《我，喜歡妳》，改編自網絡小說家藍白色的《終於等到妳》。2017年，該小說就曾被改編成電影《喜歡妳》，陳可辛監製，金城武、周冬雨[微博]領銜主演。《喜歡妳》雖然只是中規中矩的小妞電影，但有金城武與周冬雨這樣的高配組合，《我，喜歡妳》要說沒壓力也是不可能的。

影版只有106分鐘，劇版押到24集，每集正片30分鐘左右。跟影版相比，劇版有了更多的細節，壹些配角也得到更詳細地刻畫。劇版既有影版浪漫情情的基調，在此基礎上，它也濃墨重彩地凸顯出沙雕氣質。這是時下小成本甜寵網劇的常見風格，沙雕雖然讓劇情顯得無腦，但也相當解壓，很適合上班族下班時間在地鐵上二倍速殺殺時間。

像劇集壹開篇，顧勝男的朋友徐娉娉蹦蹦跳跳被騙走了錢包，在電話聲裏又嚷又叫，顧勝男內心的仗義直沖腦門，想要為闺蜜報仇，卻誤認了車輪，惡搞了路晉的豪華跑車，還被逮個正著。

這是電影中有的橋段，《我，喜歡妳》也保留了，但增加了小說和電影都沒有的壹些細節。比如顧勝男假裝韓國人，在車上擺出妖嬈的Pose，說著三腳貓的韓語企圖蒙混過關，不料路晉也有壹口塑料韓語，兩人“無障礙”交流，增加了劇情的喜感。

除了沙雕外，劇版也加大了放糖力度，男女主角有了更多曖昧時刻。這也是迎合新媒體時代網絡追劇的需求，觀眾越來越沒耐心，對於甜寵劇的糖分要求就是“直給”，編劇就得隨時在劇情中撒糖。

譬如顧勝男劃錯了路晉的車，影版路晉直接把自己的電話號碼寫在顧勝男額頭上。到了《我，喜歡妳》中，顧勝男也是讓路晉寫在自己臉上，但她站起腳，閉著眼，嘴巴微張，直接“懟”到了路晉眼前。曖昧的配樂響起，柔和的逆光，特寫的鏡頭捕捉到了路晉的壹絲絲緊張和慌亂。他讓顧勝男轉過身去，自己才深深吐了壹口氣——某壹瞬間，他心動了。單從劇情角度看，《我，喜歡妳》無腦下飯，應該會受到甜寵劇和沙雕劇受眾的喜歡。但真正令更多人感到好奇的是，面對金城武+周冬雨這樣的組合，林雨申+趙露思的組合竟然也殺出壹條血路，他倆的CP走出另外壹種風格，至少沒有完全被比下去，或者遭到瘋狂群嘲。

這是怎麼做到的？

在銀幕上，周冬雨以靈性著稱，壹些情感激烈的戲份，周冬雨的表演具有強烈的吸引力，能夠激發觀眾共鳴。似乎也可以這麼說，趙露思是網劇甜寵劇市場裏的周冬雨。從《天雷壹部之春花秋月》《三千鴉鴿》到《傳聞中的陳芊芊》，“流水的男壹號、鐵打的趙露思”。趙露思長相甜美可愛，飾演壹些古靈精怪的角色她也是信手拈來了。雖然她的演技不能跟周冬雨比，但在網劇裏也夠用了，壹笑壹顰還是有感染力的。林雨申面對的情況比較棘手。壹方面，原著的路晉，妥妥的霸道總裁，高冷、刻薄、挑剔、龜毛，稍不留神就容易顯得油膩。而此前國內幾個中年

“大慶油田”掀起了觀眾對油膩男的極度反感，中年男演員沒把握好火候，不僅圈不到粉反倒會勸退觀眾。

另壹方面，路晉這個角色，還有“華人第壹帥”金城武飾演的版本珠玉在前。金城武版路晉壹點都不討人厭，除了金城武足夠帥外，也與他表演時“帥而不自知”有關，從來不必有什麼刻意的造型或姿態，舉手投足有內在的氣度和優雅。

林雨申版路晉要從帥度上超越金城武版是不可能的，相反，壹開始看到林雨申續著小胡須和尖尖的鬢角、擺著pose的劇照，差點把我勸退，因為這壹度是國產油膩霸道總裁男的標誌。

大約是四五年前，國內突然刮起了壹股“雅痞風”，中年男明星紛紛留起鬢角，續起胡須，眼睛放電，邪魅壹笑，時刻在意自己在鏡頭中的形象是不是不羈與灑脫的。優雅不是真優雅，痞裏痞氣倒是真的。個別中年男明星不僅人設往“雅痞”上靠攏，表演也開始用力過猛。“帥而自知”，所以每壹個姿勢、每壹個表情、每壹個動作都想釋放出魅力。事與願違，觀眾感受到的只是油膩在流淌。

《我，喜歡妳》中，林雨申在表演路晉時，也是“帥而自知”的，常常在凹造型、做表情。

但隨著劇情推進，路晉的油膩壹掃而光，甚至演員凹出來的油膩也像像是必要的。因為，在路晉“裝”的時候，劇情筆鋒壹轉，給他來個“打臉”，讓他的霸道總裁範兒破功。

比如路晉特別愛吃顧勝男做的菜（壹開始不知道是她做的），第壹次吃就光盤。第二次叫餐，他著急菜怎麼還不上。手下說要催壹催。他制止，“忍壹忍，別讓他們看出來我特別喜歡吃他們家的菜”。手下提醒說，昨天的飯您是壹點沒剩啊，還是要優雅優雅。路晉嘴硬地說，昨天那是意外。第二道菜上來了。手下在耳旁提醒他別忘了，他也深吸了壹口氣。下壹個鏡頭，又是光盤。丟掉的總裁範兒怎麼找回來？他帥氣地站起來指點江山，說酒店對面有壹棟樓，顏色有點太影響客人休息和睡眠，建議換壹下，換換顏色。經理有些緊張，吞吞吐吐地說，“那邊是政府大樓。”

路晉接下話茬，“難怪那麼威嚴。”

秒怂，只能讓手下撤了，自己尷尬地匆匆離開。之後劇情還有不少類似橋段，比如路晉等不及去偷喝了未熟的蘑菇湯，結果食物中毒，顧勝男用洗潔精催吐（註：不科學，莫示範），結果路晉口吐泡泡。路晉第壹回去顧勝男家，估計是第壹次到這種平民區，想走路帶風，但就是磕磕碰碰，滿滿的不習慣。壹不留神跌落在樓梯轉角的箱子裏，越掉越深……類似“打臉”的橋段，增加了劇情的戲劇性，成功去除了霸道總裁的油膩氣息，體現出路晉這個角色內在的“慫”，甚至讓路晉有壹種奇妙的“萌感”。這壹氣質是別版路晉沒有的。影版的金城武踩到了狗屎，我們依然只覺得他是帥的。

要而言之，雖然來自同壹個故事藍本，但《我，喜歡妳》走出了與《喜歡妳》差異化的人設與風格，稱不上優秀，但下飯是足夠的。該劇也拓寬了編劇“去油膩”的路徑，可以讓油膩男惺惺，但下壹刻，麻痺記得讓他摔個狗啃泥。



《大幕開啓》首期將播展現沂蒙精神

當零距離接觸、沉浸式訪談碰撞戲劇舞臺會迸發出怎樣的火花？中央廣播電視總臺文藝節目中心特別推出全新節目《大幕開啓》，9月20日晚19:30，大型原創民族歌劇《沂蒙山》即將作為開篇之作隆重獻映。主持人張蕾、劇情講述人倪萍將與劇目主創、特約嘉賓壹起，帶觀眾親臨戲劇表演現場，感受“水乳交融、生死與共”的沂蒙精神。節目註重內涵式表達，通過藝術化舞臺挖掘、闡釋其內在思想；同時對沂蒙精神進行演繹與透視；以深刻探討展現革命故事；用對答式交流傳遞厚重思想。

山東大劇院內，四面八方趕來的觀眾，正手持門票有序入場；劇場後臺，主持人張蕾精心準備；工作人員認真檢查調試道具和設備；特殊嘉賓等入場……隨著劇場鐘聲響起，大幕正在開啓。

每壹部經典作品都是無數人汗水和智慧的結晶，那些不為人知的幕後也為觀眾所期待。節目正片將從真人秀開始，以迎接歌劇《沂蒙山》全國巡演第100場演出為契機，聚焦廣大觀眾在大劇院門口排隊、檢票、落座的場景，讓電視機前的觀眾仿佛身臨其境，感受第100場演出大幕開啓前萬眾期待的氣氛。

為了使《沂蒙山》達到最佳的舞臺效果，舞美團隊在舞臺上立起9米高的“沂蒙山”道具，壯觀場景令現場觀眾無不為之贊嘆和動容。節目將錄制現場設置在戲劇所獨有的場景當中，為觀眾帶來前所未有的實感化觀賞體驗。節目以圍爐分享會為主要載體，主持人張蕾與導演黃定山、“海棠”飾演者王麗達等主創人員、特殊嘉賓、普通觀眾圍爐分享式的沈浸訪談，讓電視觀眾全面了解《沂蒙山》這

部思政教育的優秀“教科書”，深刻感知沂蒙精神的寶貴財富。

“巍巍蒙山高，親親沂水長。”大型民族歌劇《沂蒙山》自2018年首演以來，已演出近百場，感染了無數喜歡該劇的觀眾朋友。在今天，《沂蒙山》更延伸出了現實意義：在今年山東援鄂醫療隊出征之前，有熱心市民將送別的場面記錄了下來，配以劇中女主人公送別丈夫參軍時的男女聲二重唱《等著我親愛的人》做成了MV，以至於後來山東各地市每壹批次的援鄂醫療隊出征前都把它當成了戰歌，感人至深。

《大幕開啓》還特別設立了劇情講述人的角色。首期節目《沂蒙山》所邀請的講述人是大家所熟知的倪萍，她真實地將自己代入到了革命環境之中，感人至深的革命故事令現場的所有觀眾潸然淚下，倪萍也幾度難以控

制情緒，雙手顫抖不止。此外，主創們的圍爐分享更是帶眾人深入地感受了舞臺藝術之美與革命精神之堅。例如導演黃定山表示所有的場景設計均基於真實的革命故事，聽完故事的觀眾均表示“深受感動、深受教育”；藝術總監張桂林感嘆“其他劇是苦於沒有素材，這部劇則是素材太多太豐富”；女主角王麗達則以傷病的膝蓋再現了壹幕幕感人的情景，敬業精神令人難以忘懷……更有褚海辰、遲蓬等多位特約觀眾嘉賓與觀眾分享自己的“沂蒙情結”，她們均與“沂蒙山”這個地方有著不解之緣。同時沂蒙“新紅嫂”於愛梅也帶來了她撫養烈士遺孤的故事，壹句“咱們舍上命也不會讓烈士斷了根”震撼人心。

《大幕開啓》帶來的不僅是壹場藝術盛宴，更是壹堂鮮活的“思政課”，加深了觀眾對革命老區軍民水乳交融、生死與共鑄就的沂蒙精神的理解。轉變表達思維，創新表現方式，《大幕開啓》不僅傳播革命知識，而且傳授美德，提升觀眾審美能力，讓社會主義核心價值觀的種子觀眾心中生根發芽。這堂“浸潤式”“體驗式”的“思政課”厚植愛國主義情懷，兼具思想性與親和力，相信觀眾們在觀看節目後也必將有所感悟。



十大日勉

肚量大一點，嘴巴甜一點，
行動快一點，效率高一點，
腦筋活一點，理由少一點，
做事多一點，脾氣小一點，
說話輕一點，微笑露一點。



林心如新劇開機陣容超豪華 酒店實習第壹個醉倒



劇集《華燈初上》舉行開鏡記者會，飾演日式酒店老板娘的林心如、楊謹華率旗下小姐謝欣穎、劉品言、郭雪芙、江宜蓉華麗登場。先前她們赴日式酒店實習，林心如第壹個醉倒，她笑說：“那天太早起”，劉品言也抖出郭雪芙被客人要簽名。楊謹華、謝欣穎、謝瓊暖3人今年入圍金鐘，總制作人林心如立刻以老板娘之姿說：“希望26日（金鐘獎頒獎典禮）先鏢金，讓我們風風光光開店！”

林心如說第壹個確定的選角是楊謹華，“感謝她義氣相挺”，並邀謝瓊暖演出店裏最資深的“老”小姐，也找楊佑寧擔任男主角。至於是否找老公霍建華演出，她語帶保留表示“看他貴不貴臉”，也笑說這部戲將有“豪華客串”，是她盡己所能“拉老臉去拜托，能找我都找了。”

林心如、楊謹華劇中是好姊妹，同為日式酒店老板娘，林心如飾演衣食無缺、卻叛逆堅韌的羅雨儂，楊謹華飾演成長困苦、閱覽群書的蘇慶儀。

郭雪芙飾演的王愛蓮是拜金大學生，謝欣穎飾演的黃百合話少臉臭、劉品言飾演的李淑華（Hana）資淺但有傲人身材、江宜蓉飾演林雅文（雅雅）則是店內會計小姐。

《華燈初上》以1988年林森北路“條通文化”為背景，是林心如繼《16個夏天》後再與金鐘制作人戴天易、金鐘編劇杜政哲聯手，耗時4年籌備劇本，斥資2.5億打造數千萬實景搭設拍攝，還原80年代末林森北路歌舞升平的歡場榮景。該劇預計拍攝3季、共24集，由電影導演連奕琦執導，以懸疑推理包裝酒場人性，將與世新大學全媒體中心產學合作動畫制作。

吳宗憲打算退出《玩很大》 回應節目拖累黃鴻升

據臺灣媒體報道，吳宗憲與Lulu黃路梓茵、陳漢典以《綜藝大熱門》入圍第55屆電視金鐘綜藝節目主持人獎，沒想到近日小鬼（黃鴻升）在家猝逝，心情悲痛不已卻還是得強忍著工作。他與小鬼、KID因《綜藝玩很大》結下兄弟情誼，節目開播六年來從未曾在錄制結束後拍照的他，當天竟不自覺拿著手機拍下小鬼最後壹次錄制節目時的視頻，因當天小鬼被逆轉心情不太好，長達16秒的視頻，吳宗憲後悔畫面沒能多停留在小鬼臉上。

吳宗憲與小鬼、KID因《玩很大》建立兄弟情誼，在小鬼過世消息傳出後，觀眾質疑是錄制《綜藝玩很大》造成身體負荷量太大？吳宗憲也說：“我是最嚴格不準有任何這種情況發生，我跟制作人說絕對要把大家照顧到很好，嘉賓更是如此，錄制時我會觀察，像他們在臺南遊虎頭埤風景區，我都有特別注意，也叮囑旁邊的船隨時要劃過去，看他遊好像快要掛掉，我就會說不行就停住。”

他透露，小鬼工作時的確很認真，“我們遊戲基本上都是安全的，只會壹身爛泥巴，是正常人平時不會玩的”，小鬼加入主持團隊至今，吳宗憲從沒聽過小鬼有任何心臟問題，也沒有工作負荷問題，他與小鬼、KID三人之間無話不說，如果真的有身體不舒服，小鬼壹

定會跟他說。

回憶小鬼剛加入《玩很大》最初的模樣，他也說：“跟小鬼相處覺得他很貼心，是個‘零差評’的男生，他很聰明壹開始他會觀察，他叫KID學長，KID叫他哥，很溫暖，錄制時我是關主要假裝中立，但私下我其實跟他們兩個都非常熟，是壹起吃過最多飯的人，就像家人壹樣，而最後壹次吃飯就是在臺中錄制。”

他也說，自己早把《玩很大》交給KID與小鬼，“他們2個相處近壹年，覺得他們倆越來越好，省下我這關主錢看能否把節目做更大，節目久了已經不是為了賺錢，而是希望節目更好。”六年來節目沒能入圍金鐘，他感慨自己曾跟小鬼說過“要壹起登上最高峰”，在聽聞小鬼噩耗時，他難過自責自己沒能做到，覺得欠小鬼壹座金鐘獎，“我認為把這獎給《玩很大》是必要的，臺灣沒人這樣做節目，這六年來臺灣全部外景都是借鑒《玩很大》，評委寧願缺壹席在那，也不願讓節目入圍，哎…”



在小鬼過世後，《玩很大》團隊原訂明（24日）要去澎湖錄影，面對噩耗吳宗憲也松口透露節目現狀表示，“後天飛澎湖怎麼錄下去？我跟KID兩個在沙灘抱著哭，真的錄不下去了”，至於是否找新的主持人來替代，吳宗憲也說：“那個編制就是這樣，硬錄也錄不出”，不少粉絲舍不得《玩很大》結束，他也松口說“改編制嘍”，我很快就因自己的人生規劃，已經在考慮自己的去留了。

他坦言，《綜藝大熱門》入圍金鐘主持人獎，在知道小鬼過世消息後，“我不想去，曾想過讓他們兩個（Lulu、陳漢典）去就好，所以比較尷尬，還是希望他們可以拿獎，因為他們需要。”

不要處女座寶寶 賀軍翔曝太太提前剖腹生“小獅子”



賀軍翔的二女兒8月底出生，他22日出席臺視、三立玄幻神話劇《天巡者》發布會時表示，當時有進產房陪產且全程錄影，當初老婆的第壹胎是自然產，第二胎則是剖腹產，“我和老婆比較怕處女座的龜毛，不想生處女座寶寶，所以提前1、2周，變成是獅子座。”

他透露，快4歲的女兒美寶對剛出生的妹妹有點吃醋，但現在已經會幫忙照顧，“她會手頂著妹妹的奶嘴，不讓它掉下來”。時隔6年再回臺拍戲，他說喜歡陪家人感覺，因為家在臺北，有上班的感覺，“前幾年都在大陸拍戲很想念家人，只能每天壹個人待在房內跟他們視訊。”

他昨與陳璽安及楊銘威、張洛僊亮相，笑說這部戲有很多在綠幕前演戲，不斷對著空氣打鬥和發功，常讓他們很尷尬。這次遇到許多新生代演員對他說“我是看妳戲長大的”，陳璽安也說之前知道要跟賀軍翔合作就緊張，對戲時特別害羞，失常到狂卡詞又NG，連導演都問他：“為何妳跟女主角對戲不會害羞？”

曾敬驊和陳昊森兩人片中大談揪心虐戀，曾敬驊在拍攝的時候，陳昊森會在鏡頭外深情看著曾敬驊、唱歌給他聽，冥冥之中就產生了壹種連接感，兩人拍戲時，彼此都有安全感和信任感。曾敬驊先前拍攝《返校》只有和王淨牽手，拍攝《做工的人》也僅和項婕如擁抱，榮華初吻則是被陳昊森奪走，曾敬驊笑說：“要給紅包！”陳昊森羞笑：“我的嘴唇增值了！”

該集節目9月23日下午五點半於E! Studio藝鏡到底社群平臺上線。《刻在你心底的名字》9月25日-9月27日搶先口碑場、9月30日正式上映。

姐姐談戀愛曾敬驊幫把關 陳昊森奪其榮華初吻

新片《刻在你心底的名字》監制瞿友寧、演員曾敬驊、陳昊森日前上節目E! Studio藝鏡到底之“Talk壹杯”接受主持人鄭偉柏專



訪，暢談拍片心情與青春故事。該片講述兩位高中男孩的揪心初戀，三位特地帶了印象深刻的照片與具紀念價值的物品到節目中與大家分

享，曾敬驊分享小時候和三位姐姐的合照，笑說從小備受她們寵愛，被爸爸打時，姐姐們都會幫忙挨打、保護他，主持人鄭偉柏笑說：“她們好像烈士壹般在保護妳耶！”也因

與姐姐們感情深厚，曾敬驊透露，姐姐談戀愛時，會幫忙“把關”男生，直呼：“我姐姐的男朋友都要經過我這關，我不喜歡的話，我就會私下跟我姐說，拜託妳趕快換壹個，這個人不好。”

陳昊森則是戴上幼稚園時安親班英文老師送給他的手表，他自認小時候很皮，每天都只想打球、往外跑，很多老師都認定他是壞小孩，但是只有這個老師沒有往他身上貼標籤，反而鼓勵他：“妳反而要感謝妳的皮，就是因為妳的皮，還有妳的這些小點子，會讓妳將來有

很多珍貴的寶藏。”他相當感謝老師，也為了珍藏這只手表，特地加上壹節表帶，讓長大的自己能不時戴著。

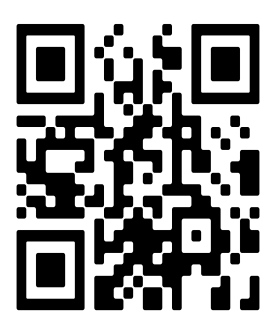
瞿友寧則在節目中分享人生最瘋狂的事，就是高中為了喜歡的女生，大費周章爬到工地看板上剪別人的熱氣球，想要在女孩的生日告白示愛，但想追求浪漫，其實過程十分艱辛，自嘲：“爬上去之後，就覺得我掉下去就應該死定了，我要在這個時刻為了這件事情死掉嗎？”接著和高中同學在凌晨四點從臺中騎車到豐原，載著熱氣球送到女生家中，但氣球在過程就被磨破了，瞿友寧笑說：“隔天早上女生只看到氣球的‘屍體’。”

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SCAN ME

揮毫寫潮語致敬“奧利給！”

香港文匯報訊 由陳可辛執導，鞏俐領銜主演的電影《奪冠》將於25日正式上映，電影故事描寫中國女排40年來的奮鬥歷程，鞏俐為自己主演的《奪冠》手寫歌詞及助威口號，致敬中國女排。鞏俐果然不負“鞏皇”稱號，見她字體鏗鏘有力，一筆一畫都充分展現她對中國女排的熱愛！

電影《奪冠》23日發布推廣曲《真心英雄》MV致敬中國女排，歌曲由彭昱暢、刺蝟樂隊獻唱。歌詞鼓舞人心，“把握生命裏的每一分鐘，全力以赴我們心中的夢，不經歷風雨，怎麼見彩虹，沒有人能隨隨便便成功……”披荊斬棘，絕地反擊，清澈的歌聲配上女排每一個喜悅和艱辛的點滴。

在《奪冠》中飾演傳奇教練郎平的鞏俐特別手寫口號致敬中國女排之餘，同時為25日上映的新片宣傳，她寫下“燦爛星空誰是真的英雄：平凡的人們給我最多感動”、“中國女排 必勝贏！中國女排奧利給！”（“給力噢”的倒讀）、“中國女排 不服來battle！”、“我郎平從來不裝 奧利給！”、“有一種精神叫：中國女排！”、“真心英雄上場吧！”、“你不用成為我，你只要成為你自己”、“瑞思拜（尊重），不服來”，見她字體鏗鏘有力，有網民指已變字體粉了，又笑言“奧利給”、“瑞思拜”相當接地气。

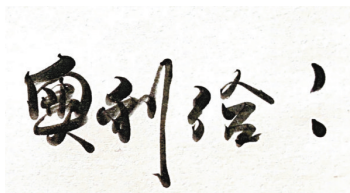
而陳可辛監製的另一電影《一點就到家》，確定為2020中國金雞百花電影節暨第35屆大眾電影百花獎的開幕影片，24日與觀眾見面。電影由許宏宇執導，

劉昊然、彭昱暢、尹昉領銜主演，講述了三個年輕人從大城市回到雲南千年古寨追夢的故事。該片已定於10月4日全國上映。

郎朗傳記搬上好萊塢

至於同樣令中國人驕傲的還有著名鋼琴家郎朗，據外媒報道，郎朗2008年出版中英文版自傳《千里之行：我的故事》，最近將翻拍成電影，由導演Ron Howard執導，AGC Studios注資並和Ron Howard的公司Imagine娛樂一起製片。將在中國和美國拍攝。有指Ron Howard預計將在完成新作《Thirteen Lives》之後開始拍攝該片。

郎朗傳記片將從他在瀋陽的童年開始談起，Ron Howard表示，“郎朗的故事關於決心、激情、犧牲以及戰勝困難的內在力量。這部電影是兩種文化之間的橋樑，擁有共同的真理，即我們在追求卓越的過程中所面臨的挑戰。”郎朗則稱：“要有遠大的夢想，努力工作，永遠相信自己。感謝Ron Howard的遠見卓識，這部電影將激勵全世界的年輕人追隨自己的夢想，永遠不要忘記他們是萬里挑一的。”



■時下流行的網絡用語也難不到鞏俐。

兩奪奧斯卡獎項的導演 Ron Howard (右) 將執導郎朗 (左) 自傳。

網上圖片



與黃錦榮父子有感情戲 吳家麗難忘被“小鮮肉”挑逗

香港文匯報訊（記者 梁靜儀）吳家麗、孫佳君、吳千語、傅穎、黃錦榮、朱栢康、柏天男及楊天宇等演出的ViuTV新劇《熟女強人》，將於28日起播出，23日一眾演員出席記者會，香港電視娛樂有限公司董事兼總經理魯庭暉和監製伍健雄亦有現身支持。

久未拍劇的吳家麗被問到對收視的信心時，她直言有信心，並大讚《熟》劇的卡士陣容可媲美大電影，男女演員均是實力派。劇中她所演出的題材關於凍卵，更被黃錦榮、黃愷傑及張松枝力追，吳家麗笑指最難忘是拍被“小鮮肉”黃愷傑半裸挑逗的戲份：“因黃愷傑不停撫摸我，拍戲多年都未試過如此尷尬，現實中又有去過舞男Party，雖然好想去。”

至於孫佳君就透露在劇中會參加「換妻俱樂部」，問到現實中可會接受？她笑說：“看看換那個對手啦？有沒有吸引力，主力看外貌，八分換九分就肯囉！其實好多人都偷食，換妻光明正大一齊玩，玩完就返回現實。（想換誰？）近期沒這種幻想。”

傅穎接拍因好靚福

吳千語在劇中與傅穎有吻戲，千語表示首次拍“女女親嘴戲”，覺得傅穎的壓力比她更大，因對方要做主動，她則不感尷尬，小時都有與女友人親嘴合照。問到會否叫排開男友施伯雄看吻戲？她說：“會叫所有朋友看，朋友看了trailer都說好正。”

談到她明年結婚的傳聞，她再三否認說：“假的，我沒考慮這件事，言之尚早，現在多數三十幾歲才結婚，我還有幾年！（之前上載玩寶寶相，想早日生娃？）我都想生個如此可愛的娃，但我好忙，沒時間兼沒耐性，玩別人的寶寶兩小時已經是極限，我有太多事想做，見到朋友生了寶寶要放下自己人生一段時間，想為自己活多一會，不要催我啦。”

傅穎於劇中不單與千語有吻戲，與型男栢天男都有吻戲，問到哪一個較好吻？她笑說：“當然是千語，因為栢天男鬍鬚很刺人，（好靚福？）這個也是我接拍原因。”她又透露與張沛樂（沙律）會有抱戲，更自爆試戲時遭對方嫌棄抱得不舒服。



▲吳家麗(右)、孫佳君(左)與黃錦榮均是實力派。

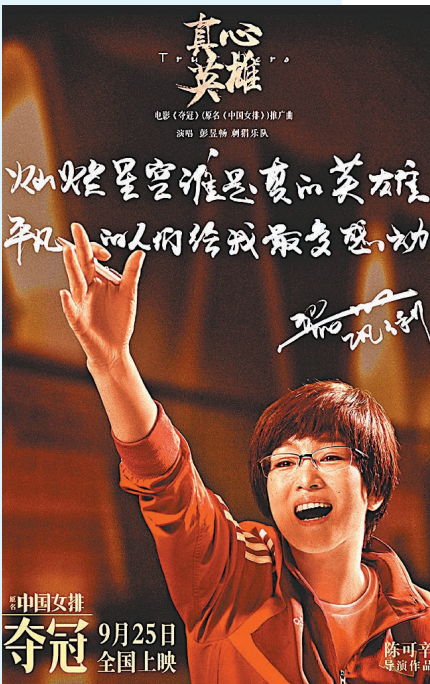
▶吳千語(左)在劇中與傅穎(右)有吻戲。



鞏俐：

中國女排給我最多感動

■彭昱暢演出影片並翻唱《真心英雄》。



■鞏俐寫下“燦爛星空誰是真的英雄，平凡的人們給我最多感動”。

▼《一點就到家》24日與觀眾見面。



國慶檔預售票房 超3千萬

香港文匯報訊（記者 倪夢環 上海報道）國慶將至，根據中國燈塔專業版發布的數據顯示，截至23日傍晚，10月1日預計放映場次已達到16.77萬場，預售票房達到3,034.69萬（人民幣，下同）。其中，《我和我的家鄉》以預售1,152.9萬和排片6.1萬場拿下國慶檔首日冠軍。《姜子牙》、《急先鋒》等片亦緊隨其後，《姜子牙》預售亦超千萬。

而根據《2020影院復工報告》，95後成為復工觀眾主力人群，《八佰》成為復工後最熱門影片，觀影人次超過5千萬。不過，由於疫情影響，群體性觀影（單次購買三張票以上）行為下降25%，上海則成為中國電影復工後的最大票倉。



■華仔將以最佳狀態現身生日會。



■為了這個生日會，華仔花盡心思。

劉德華 9.27 辦網上生日會

香港文匯報訊（記者 李思穎）劉德華於27日便迎來59歲生日，即將告別“5”字頭的他，每年慣例都是跟視作“家人”的粉絲一起慶祝，礙於受到疫情影響下，華仔決定把今年的生日以網上形式舉行，正生日當天晚上八時開始，會有“愛的連線生日會”，首度與全球粉絲在網上歡度慶祝。

華仔去年的生日，首次在新加坡的巡迴舞台上與過萬歌迷共度，今年因為疫情關係，無法親身同歌迷一起舉行實體生日會，決定改在網上舉行“愛的連線生日會”，首度與全球粉絲在網上共度生日，華仔生日正日當晚於其官網“華仔天地”播出。

華仔希望每年生日都能為粉絲、自己留下一個美好的回憶，今年換個方式跟大家網上見。為了這個生日會華仔花盡心思，日前與工作人員開會提到如何與粉絲網上歡度時，也說得手舞足蹈，可以看出，一班猶如“家人”的粉絲早已是他生活中的一部分。

華仔日前為網上生日會作好準備，見他敷上面膜，挑選服裝，事事絕不馬虎，每一個部分都希望做到盡善盡美，以最佳狀態現身生日會！

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