

Health Alert Network Message 20-33: CORRECTION: Pediatric Multi-System Inflammatory Syndrome Potentially Associated with COVID-19

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CORRECTION: Pediatric Multi-System Inflammatory Syndrome Potentially Associated with COVID-19

- Numerous cases compatible with multi-system inflammatory syndrome have been identified in children in Europe and the United States, including Louisiana.
- Characterized by persistent fever and features of Kawasaki disease and/or toxic shock syndrome; gastrointestinal symptoms are also common.
- Cases may require intensive care unit admission for cardiac and/or respiratory support.
- Testing for SARS-CoV-2 may be positive or negative.
- Early recognition and specialist referral are essential, including to critical care if warranted.
- Healthcare providers who diagnose pediatric multi-system inflammatory syndrome potentially associated with COVID-19 should immediately report them to the Louisiana Office of Public Health Infectious Disease Epidemiology Section using the secure online portal: https://laredcap.oph.dhh.la.gov/surveys/?s=NYW8TYETNF

Description:

A pediatric multi-system inflammatory syndrome, recently reported by authorities in the United Kingdom(*1), is also being observed among 64 children and young adults in New York City(*2). Similar presentations have been reported from facilities in Louisiana, and the Louisiana Department of Health is working to gather additional information on these cases. Clinical features vary, depending on the affected organ system, but have been noted to include features of Kawasaki disease or features of shock; however, the full spectrum of disease is not yet known. Inflammatory markers may be elevated, and fever and abdominal symptoms may be prominent. Rash also may be present. Myocarditis and other cardiovascular changes may be seen. Additionally, some patients have developed cardiogenic or vasogenic shock and required intensive care. This inflammatory syndrome may occur days to weeks after acute COVID-19 illness.

The syndrome may include:

• A child presenting with persistent fever, inflammation (e.g. neutrophilia, elevated C- reactive protein and lymphopenia) and evidence of single or multi-organ dysfunction (shock, cardiac, respiratory, renal,

gastrointestinal or neurological disorder). This may include children meeting full or partial criteria for Kawasaki disease.

 Exclusion of any other microbial cause, including bacterial sepsis, staphylococcal or streptococcal shock syndromes, and infections associated with myocarditis such as enterovirus. Clinicians should not delay seeking expert advice while waiting for results of these investigations.

Early recognition by pediatricians and prompt referral to an in-patient specialist, including to critical care is essential. This syndrome should be considered by pediatricians and specialists, particularly when other microbial etiologies have not been identified.

Diagnostic and serological testing to detect the presence of SARS-COV2, the virus that causes COVID-19, or corresponding antibodies should be performed in patients who are under 21 years of age and present with symptoms compatible with pediatric multi-system inflammatory syndrome potentially associated with COVID-19.

Healthcare providers who diagnose pediatric multi-system inflammatory syndrome potentially associated with COVID-19 should immediately report them to the Louisiana Office of Public Health Infectious Disease Epidemiology Section using the secure online portal: <u>https://laredcap.oph.dhh.la.gov/surveys/?s=NYW8TYETNF</u>

(*1) Pediatric Intensive Care Society. PICS Statement: Increased number of reported cases of novel presentation of multisystem inflammatory disease. April 27, 2020. Available at <u>https://picsociety.uk/wp-</u> <u>content/uploads/2020/04/PICS-statement-</u> <u>re-novel-KD-C19-presentation-v2-27042020.pdf.</u>

(*2) <u>https://health.ny.gov/press/releases/2020/docs/2020-05-06 covid19 pediatric inflammatory syndrome.pdf</u>