

Covid-19 In Children In India- An Experience From The City With Highest COVID -19 Burden In Western India During The First Wave Of Pandemic.

COVID -19 pandemic has engulfed the Whole world in an unimaginable health crisis leading to significant loss of human lives and chaotic overburdened healthcare systems all over globe. There had been enough literature published with adult disease presentation and management mainly from China and western world. At the end of the second wave of pandemic, WHO COVID-19 dashboard shows India as second most affected country in the world behind the USA. In India, State of Maharashtra had been the worst affected state and Pune remains the city with highest case load as per COVID -19 Dashboard of Government of Maharashtra. Despite this there are limited studies available on the pattern of paediatric COVID-19 infections from India.

Therefore, we aimed to collate the data for clinical profile of paediatric patients from our tertiary centre institute in Pune which encountered a high case load of patients with COVID-19 infection during first wave of pandemic. We conducted a retrospective observational cohort study over 6 months from 1st April 2020 to 30th September 2020. 148 children hospitalised with confirmed SARS CoV-2 infection were included in the study. Of these 57 (38.5%) were asymptomatic and 91(61.5%) were symptomatic. Fever was the commonest presenting feature in 65(43.9%), followed by cough 34(23%) and runny nose in 25(16.9%). PICU admission was needed in 9 (6.1%) patients and there was one neonatal death. This study confirmed that the pattern of disease is mild in children with a high number of asymptomatic patients and rare mortality due to COVID-19 infection.

Biography

Dr. Sumant Patil holds MD in Paediatrics from Rajiv Gandhi University of Health Sciences Bangalore. He was selected by Royal College of Paediatric and Child Health, London in 2003. There he acquired DCH and MRCPCH. Underwent specialist fellowship training in Paediatric Intensive care and Neonatology at Nottingham University hospitals NHS trust, UK. Returned to India in 2014 working as Paediatric Intensivist at Deenanath Mangeshkar Hospital and Research Centre, Pune. Total 21 years of experience in Paediatrics. Publications in national and international medical journals. A faculty of Indian Academy of Paediatrics (IAP) -Intensive care chapter and director for IAP-PICU fellowship programme.

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Neuroleptic Malignant Syndrome In A COVID-19 Pediatric Patient

Background

Neuroleptic malignant syndrome (NMS) is a clinical condition associated with the use of antipsychotics and drugs that affect the dopaminergic system, characterized by extrapyramidal symptoms, autonomic dysfunction. NMS during COVID-19 infection has not been previously described among children. In this report, we reported a paediatric patient who was followed up because of NMS developed during the COVID-19 infection course.

Case Report

A 12-year-old boy with cerebral palsy with COVID-19 was admitted to the paediatric intensive care unit (PICU) owing to diaphoresis, worsening respiratory status, excessive restlessness and increase in tonus. The patient was taking risperidone 3 mg/day for 5 days before admission at our centre. On follow-up, his body temperature increased to 41°C within 12 hours. Laboratory tests revealed high levels of creatinine kinase (CK; 50000 U/L). Given the clinical and laboratory results, we hypothesized that the patient developed NMS because of regular risperidone use and SARS-CoV-2 infection. We stopped risperidone, started intravenous hydration, hypothermia application and antipyretic. After this treatment modification, his body temperature started to decrease, laboratory test results were found to normalize.

Discussion

To the best of our knowledge, this is the first reported paediatric case of NMS in COVID-19. The risk factors for our patient included regular neuroleptic use and SARS-CoV-2 infection, which may have predisposed him to NMS.

Conclusion

In conclusion, NMS should be considered in paediatric patients with risk factors. Its association with COVID-19 and medications used to treat COVID-19 requires further study.

Biography

Dicle Sener Okur was born at 1980 in Ankara, Turkey. She has graduated from Ege University Faculty of Medicine at 2004, between 2004-2010 worked in Istanbul University, Istanbul Faculty of Medicine, Department of Pediatrics. In 2014, she has graduated from Istanbul University, Cerrahpasa Faculty of Medicine, Department of Pediatrics as Pediatric Infectious Diseases specialist.

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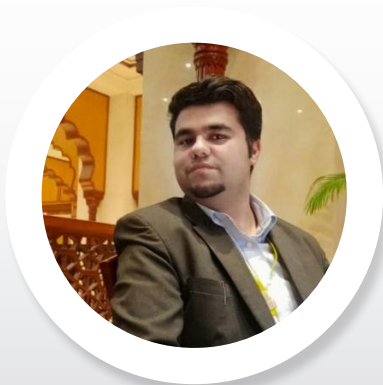
Comparison Of School Going Children Dietary Practices With My Pyramid Guidelines

In Pakistan a total of 1.4 million children suffering from malnutrition, whereas 31% are underweight, 42% are stunted and 17.7% are suffering from severe wasting. The nutritional status of the population is not satisfactory and improper diet is affecting people of all ages especially children. This study will help to assess the nutritional status of school-going children with respect to their eating habits. The population of this study involved school-going children aged 8 - 14 years. The study was conducted in various private and public sector schools of Lahore city. Questionnaire involved questions about demographic features, anthropometric measurements, games usually played by students, 24-hour dietary recall and food frequency table including of food items from all food groups and their consumption by students about 40 food items were added in food frequency table. Results showed that average total estimated caloric intake showed that only 29% children were consuming 2000 calories, 39% were consuming 1500 calories and 32% of children were consuming less than 1000 calories per day. It is concluded that the dietary practices of school-going children of age 8 - 14 years are variable and unhealthy eating pattern is very common. A large number of students don't consume any vegetables and fruits according to the recommendations leading to micronutrient deficiencies and many other nutritional consequences. It has been found that some children in our study skip their lunch. The study showed that a large number of them are not eaten vegetables and fruits according to the recommendations which lead to hidden hunger and many other nutritional consequences.

Biography

Faran Khan has completed his M.Phil in Food & Nutrition research priority public health nutrition at the age of 25 years from University of Veterinary and Animal Sciences. He worked in Integrated Reproductive Maternal Neonatal Child Health & Nutrition Program as researcher. He has published 4 research articles and has been serving as an editorial board member in Acta Nutritional Sciences Journal. He has been awarded Young Investigator Award from European Society for Paediatric Gastroenterology Hepatology and Nutrition (ESPGHAN).

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Evaluation and Treatment of Feeding Difficulties in High Risk Infants

Feeding is the most complex task of infancy, even in term babies with no complications. There are many diagnoses, conditions, syndromes, and co-morbidities that can impact feeding in neonates and infants. This talk will briefly highlight many of those, but we will focus on three specific populations of interest –Neonatal Abstinence Syndrome, Infants of Diabetic Mothers, and Downs Syndrome. This paper will discuss the specific implications these conditions can have on feeding, why these infants may have difficulty, and the classic symptoms one could expect to see. The differences between delayed and disordered feeding will also be addressed. Strategies and adaptations for both breast and bottle feeding will be discussed. Positioning, nipple flow rate, and external strategies will be explained.

The Speech-Language Pathologist is often seen in settings as the expert for infants with feeding difficulties, predominantly for bottle feeding or feeding aversions. In today's society, with breast feeding becoming more and more "the norm," the Speech-Language Pathologist has become more involved in the area of feeding assessment with not only bottle fed infants but infants who are attempting breast feeding as well. The Speech Language Pathologist brings an interesting background to the area of breast feeding with a knowledge of the oral mechanism, infant respiratory system, and swallowing mechanisms. In many Neonatal Intensive Care Unit (NICU) and pediatric facilities, the Speech Language Pathologist is now providing pre-feeding readiness assessments on infants, and by doing these, allowing many infants to get in on the ground floor with breast feeding. These infants in the NICU and early pediatric setting can be provided with more opportunities to become successful breast feeders, especially those infants who were previously thought to be unable to complete this task. This paper will discuss the role of the Speech Language Pathologist in lactation clinically, strategies for infants with feeding difficulties whether at breast or bottle, as well as how we can work together between disciplines to improve breastfeeding success.

Biography

Amber Valentine Forston is a Speech-Language Pathologist who graduated from the University of Kentucky with her MS in Communication Disorders. She is a Board Certified Specialist in Swallowing and Swallowing Disorders and an International Board Certified Lactation Consultant. She finished her credentials as a Certified Neonatal Therapist in 2017. She worked for Baptist Health Systems, Inc for 8 years before moving to Florida where she worked for Wolfson's Children's Hospital and Mayo Florida. She is now back in Kentucky working for Baptist Health Lexington. She has experience in adults and pediatrics with feeding and swallowing difficulties including: bedside swallow evaluations, Modified Barium Swallow studies, FEES, and pediatric feeding evaluations including NICU. She has provided guest lectures for the University of Kentucky, Eastern Kentucky University, and the University of Louisville on feeding and swallowing topics. She has presented at the hospital level, local, state, national, and international levels on pediatric feeding/swallowing and breastfeeding.

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Child Caregiver's Healthcare Seeking Behavior and its Determinants for Common Childhood Illnesses in Addis Ababa, Ethiopia. A Community-Based Study

Background: Appropriate healthcare-seeking behavior and access to the health care facility is key to improving health service utilization. Although the accessibility of comprehensive childhood disease intervention services in Ethiopia has been modified at the community level, the use of such health care services has remained limited. Therefore, this study aimed to assess the healthcare-seeking behavior of common childhood illness and its determinants.

Methods: A

Community-based cross-sectional study design was used. A multi-stage sampling method was used to recruit eight hundred and thirty-four study participants. A pre-tested and standardized questionnaire was used to collect data. The collected data were visually checked for incompleteness and entered into the statistical software Epi-info version 7 and exported to SPSS version 20 software for descriptive and bi-variable analysis. To identify variables associated with the healthcare-seeking behavior. Logistic regression analysis was performed. Adjusted odds ratios with a 95% confidence interval were used to see the strength of association, and variables with P-values of <0.05 were considered statistically significant.

Results: The proportion of health care seeking behavior of care-givers for childhood illness was 69.5% (95% CI: 66.4%, 72.4%). The education level of caregiver (AOR: 1.61, 95% CI: 1.01-2.60), knowledge of childhood illness (AOR: 2.02, 95% CI: 1.46-2.79), cough (AOR: 1.94, 95% CI: 1.39-2.71) and diarrhea (AOR: 2.09, 95% CI: 1.46-2.99) as main symptoms of illness and perceived severity of illness (AOR: 3.12, 95% CI: 2.22-4.40) were significantly associated with healthcare-seeking behaviors of caregivers.

Conclusion: Low healthcare-seeking behavior was observed for childhood illnesses. Educational level, knowledge of childhood illness, cough, and diarrhea as primary symptoms of illness, and perceived severity of caregiver illness were significant associated with healthcare-seeking behavior. Therefore, interventions that strengthen the caregiver's awareness of childhood illness and danger signs need to be considered. Besides, addressing the identified associated variables to healthcare-seeking behavior is critically important to curb the problem.

Biography

Moges Boke has completed his Master of Public Health in Reproductive at the age of 27 years from Arba Minch University, Ethiopia and BSC. Public health from University of Gondar college of medicine and health science. He is the lecturer, at Gondar University Ethiopia. He has published more than eight papers in reputed journals and has been serving as reviewer board member of reputed.

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Prevalence, Severity And Determinants Of Pain In Thalassemia

Background: As the life expectancy in thalassemia is improving, pain is being recognized as an emerging problem. There is a need for a prospective observational study of pain in these high-risk patients.

Objectives: Assess the pain prevalence, severity, and impact of co-morbidities in thalassemia.

Methods: All patients >10 years of age (n=165) attending Thalassemia Day Care Center of a tertiary care hospital were assessed for pain prevalence, severity, and its effect on various life activities using Brief Pain Inventory. Their medical records were reviewed for the presence of various comorbidities.

Results: The pain was reported by 62.4% of participants with 35.2% and 59.4% participants, reporting pain in the past 1 week and 4 weeks respectively. A significantly higher pain prevalence was reported in females (p=0.03), patients residing in urban areas (p=0.03), and employed participants (p=0.03).

The commonest sites of pain were the lower back and calves. General activity (p=0.02) and enjoyment of life (p= 0.02) were significantly affected due to pain in patients between 21 to 30 years of age. Female participants reported interference of pain with mood (p=0.03). A significant relation of pain prevalence was found with higher average serum ferritin (p = 0.015), moderate to severe liver iron concentration (p= 0.04), and lower levels of 25 hydroxyvitamin D levels (p=0.03).

Conclusion: Pain is an emerging cause of morbidity in thalassemia. The study found a significant association of pain with modifiable factors such as serum ferritin, LIC, 25 hydroxyvitamin D levels.

Biography

Dr. Amanat Grewal has completed her MBBS at Dayanand Medical College and Hospital, Ludhiana, India. She has scored high throughout her medical professional years. She is the presenting author. She has completed a research paper on chronic pain in thalassemia and is now engaged in writing another on depression in chronic diseases among rural population. She has participated in many volunteer activities. She participated in poster presentation on correlation of levels of HbA1c with wound healing. In the year 2020, she presented a paper on chronic pain in adolescents with thalassemia and bagged third position.

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