## **CORRESPONDENCE**



## The Effects of the COVID-19 Pandemic on Pediatric Cystic Fibrosis Patients

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To the Editor: The clinical manifestations of COVID-19 are related to the respiratory system [1]. Cystic fibrosis (CF) is a multisystemic disease, and the primary causes of morbidity are respiratory complications [2]. These problems can cause a range of psychological symptoms in pediatric CF patients and their caregivers [3, 4].

The present study aimed to determine the level of anxiety in the patients and their caregivers during the pandemic, and to determine the COVID-19 transmission status among patients.

This study was conducted at Cerrahpasa Medicine Faculty Hospital, Istanbul, Turkey and included 144 pediatric CF patients along with their caregivers, and their controls. The hospital's CF team supported the patients via remote contact between 11 March 2020 and 01 December 2020.

The Hospital Anxiety and Depression Scale (HADS) was administered to the caregivers of CF patients, while the State-Trait Anxiety Inventory (STAI) was applied to the CF patients and controls via telehealth services.

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In total, 42 (29.2%) CF patients were tested for COVID-19; of which, 4 were positive. One of the patients was treated at the hospital while the other 3 were quarantined at home.

In the present study, STAI-S and STAI-T scores in the CF patient group were significantly lower than in the control group (p < 0.001 and p < 0.001, respectively). STAI-S scores in males were significantly higher than in the controls and female CF patients. Adolescents with CF had a significantly higher STAI-S score than their healthy peers. The mean HAD scores in the patients' caregivers were significantly higher than the controls' caregivers (p = 0.005 and p < 0.001, respectively).

Telehealth is an innovative method for providing healthcare services while avoiding the risk of exposure to COVID-19, and is helpful in decreasing the anxiety levels among both patients with CF and their caregivers.

## **Declarations**

Conflict of Interest None

## References

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