



Impact of COVID-19 on Acute Viral Bronchiolitis Hospitalization Among Infants in North India: Authors' Reply

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To the Editor: We are happy to respond to the comments by Sookaromdee and Wiwanitkit [1] in response to our article "Impact of COVID-19 on Acute Viral Bronchiolitis Hospitalization Among Infants in North India" [2].

The possible reasons for change in the incidence, hospitalization, and severity of acute viral bronchiolitis (AVB) during the coronavirus disease 2019 (COVID-19) pandemic are infection prevention and control measures like widespread use of face masks, hand hygiene, and social isolation and distancing; closure of schools and daycare centers; restricted transport facilities; and limited accessibility to hospitals. Similar reasons have been proposed by authors from other parts of the world [3, 4].

We commonly see the cases of AVB during the months of October to February (postmonsoon and winter season) (seasonal variation) [2, 5]. The pattern of AVB epidemiology might change on a yearly basis. However, the change in the number of admissions due to AVB in Pediatric emergency during the prepandemic and pandemic period was drastic [173 out of 3770 admissions (4.6%) vs. 8 of 1589 (0.5%) admissions, respectively, $p = 0.001$].

Grimaud et al. [6] reported 2 infants (< 3 mo old) who presented with fever and neurological symptoms with history of contact with COVID-19 case in family. These infants developed features suggestive of AVB after a delay of 2–8 d. Their nasopharyngeal swab for SARS-CoV-2 RT-PCR was positive but negative for RSV and influenza virus. This report highlighted the fact that the SARS-CoV-2 infection may cause AVB [6].

There is need to monitor the epidemiology of respiratory diseases after COVID-19 pandemic. The impact of

COVID-19 on occurrence and pattern of AVB; long-term effects of COVID-19 on the lungs (structure and function) of children; and impact of SARS-CoV-2 infection (a/symptomatic) on predisposition to recurrent wheezing or asthma need to be determined [6].

Declarations

Conflict of Interest None.

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