## SCIENTIFIC LETTER



## Long COVID in Children up to 12 y of Age - A Retrospective Telephonic Survey

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To the Editor: Long-COVID is a well described entity in adults, however, information is scarce in children; particularly from low-middle income countries [1]. We planned this retrospective telephonic survey to determine outcome of children hospitalized in a tertiary care hospital of North India with COVID-19 infection, in terms of persisting symptoms. From April 2020 -May 2021, 262 children ( $\leq$ 12 y-of-age) were diagnosed with acute COVID-19 infection in our hospital. Two-thirds (163) responded to telephonic calls made by us between July - October 2021. Three parents refused consent, hence 160 responses were recorded. A predesigned questionnaire suggested by Ministry of Health and Family Welfare, Government of India, was used for recording persisting symptoms [2].

The median age of children was 24 mo (IQR: 2, 84), and 102 (64%) were males. Three-fourths (120/160) had required hospitalization, and 37 (23%) died, mostly (89%) due to underlying disease. Three children (2.4%) had persistent symptoms following discharge. One child (10-mo-old) had fever for 3 mo which settled spontaneously. Another 8-mo-old boy was diagnosed with multisystem inflammatory syndrome in children (MIS-C), 1 mo after testing positive for COVID-19 infection and recovered without any complications. Lastly a 10-y-old girl diagnosed with MIS-C and acute COVID-19 infection had prolonged fatigue of 11 mo but without restriction of daily activities.

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In summary, incidence of long-COVID in this telephonic survey was low compared to other studies [1, 3, 4]. Small sample size, exclusion of adolescents from study population, variation in follow-up period, cultural differences in study populations could be possible contributors to the low incidence and prevalence.

Population-based studies on long-COVID can give a better idea on prevalence. This information could help design appropriate provisions to protect children and young people. Data on long-COVID can influence vaccine policy for children. It can change the perspective of COVID-19 in children as being mild disease to one with potential to cause long-term chronic debilitating health issues.

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## Declarations

Conflict of Interest None.

## References

- Lopez-Leon S, Wegman-Ostrosky T, Del Ayuzo NC, et al. Long-COVID in children and adolescents: a systematic review and metaanalyses. Sci Rep. 2022;12:9950.
- GOI MOHFW. Questionnaire for symptoms of long COVID suggested by MOHFW, GOI. Available at: https://www.mohfw.gov.in/ pdf/NationalComprehensiveGuidelinesforManagementofPostCovidSequelae.pdf (mohfw.gov.in). Accessed on 8th Dec 2022.
- Say D, Crawford N, McNab S, Wurzel D, Steer A, Tosif S. Postacute COVID-19 outcomes in children with mild and asymptomatic disease. Lancet Child Adolesc Health. 2021;5:e22–3.
- Sterky E, Olsson-Åkefeldt S, Hertting O, et al. Persistent symptoms in swedish children after hospitalisation due to COVID-19. Acta Paediatr. 2021;110:2578–80.

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