

CV prognosis good at six months after hospitalization for MIS-C

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(HealthDay)—Children with multisystem inflammatory syndrome in

children (MIS-C) treated with immunomodulators have favorable outcomes at six months, with normalization of left ventricular (LV) systolic function and resolution of coronary abnormalities, according to a study published online July 29 in *Pediatrics*.

Christine A. Capone, M.D., M.P.H., from the Cohen Children's Medical Center at Northwell Health in New Hyde Park, New York, and colleagues examined early and midterm outcomes of MIS-C in a [longitudinal study](#) involving all 50 children admitted and treated for MIS-C from April 17 to June 20, 2020. Patients were followed up at about two weeks, eight weeks, and six months after admission.

The researchers found that 31 of the patients (62 percent) required [intensive care](#) with vasoactive support in the acute phase, while 52, 32, 16, and 8 percent had LV systolic dysfunction, LV diastolic dysfunction, coronary aneurysms, and coronary dilation, respectively. Forty-eight patients (96 percent) received immunomodulatory treatment. Persistent mild LV systolic dysfunction, coronary aneurysms, and dilated [coronary artery](#) were observed in one patient, two patients, and one patient, respectively, at two weeks. All patients returned to functional baseline with normal LV systolic function and resolution of coronary abnormalities by eight weeks through six months. At two weeks, eight weeks, and six months, five patients, four patients, and one patient, respectively, demonstrated persistent diastolic dysfunction.

This study "suggests an uncomplicated course of myocarditis in MIS-C with favorable outlook on long-term prognosis," the authors write. "However there was persistence of echocardiographic [diastolic dysfunction](#) in a few [patients](#) of uncertain significance."

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