

Factors ID'd for severe GI effects of SARS-CoV-2 in children

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(HealthDay)—Overall, 9.5 percent of children with severe acute



respiratory syndrome coronavirus 2 (SARS-CoV-2) or multisystem inflammatory syndrome in children (MIS-C) have severe gastrointestinal (GI) manifestations, according to a study published online Dec. 20 in *JAMA Network Open*.

Andrea Lo Vecchio, M.D., Ph.D., from the University of Naples Federico II in Italy, and colleagues describe the clinical, radiological, and histopathological characteristics of children with COVID-19 presenting with severe GI manifestations in a multicenter retrospective cohort study (Feb. 25, 2020, to Jan. 20, 2021). Children with acute SARS-CoV-2 or fulfilling the criteria for MIS-C were enrolled; data were included for 685 children.

The researchers found that 91.7 and 8.3 percent of the children were diagnosed with acute SARS-CoV-2 and MIS-C, respectively. The presence of GI symptoms was associated with an increased likelihood of hospitalization and intensive care unit admission (odds ratios, 2.64 and 3.90, respectively). Severe GI involvement was seen in 65 children (9.5 percent), including disseminated adenomesenteritis, appendicitis, abdominal fluid collection, pancreatitis, or intussusception (39.6, 33.5, 21.3, 6.9, and 4.6 percent, respectively). Of these 65 children, 41.5 percent underwent surgery. Severe GI manifestations were associated with the child's age (5 to 10 years: odds ratio, 8.33; older than 10 years: odds ratio, 6.37, compared with preschool) and with abdominal pain, lymphopenia, and MIS-C (adjusted odds ratios, 34.5, 8.93, and 6.28, respectively).

"Awareness about the factors associated with severe GI manifestations may help practitioners working either in <u>emergency department</u> or primary care settings to identify children with these diagnoses and manage <u>children</u> at risk for severe outcomes," the authors write.

Two authors disclosed financial ties to the pharmaceutical industry.



More information: Abstract/Full Text

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