

COVID-19-linked hospitalization up for children during omicron

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During the period of omicron predominance, COVID-19-associated



hospitalization among children aged 5 to 11 years, including among those with no underlying health conditions, was increased, according to research published in the April 22 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Dallas S. Shi, M.D., Ph.D., from the CDC COVID-19 Emergency Response Team, and colleagues analyzed data from the COVID-19-Associated Hospitalization Surveillance Network to describe the characteristics of COVID-19-associated hospitalizations among 1,475 U.S. children aged 5 to 11 years throughout the pandemic, focusing on Dec. 19, 2021, to Feb. 28, 2022, which was the period of early omicron predominance.

The researchers found that 87 percent of the 397 children hospitalized during the period of omicron predominance were unvaccinated; 30 percent had no underlying medical conditions and 19 percent were admitted to an <u>intensive care unit</u>. During the omicron-predominant period, the cumulative hospitalization rate was 2.1 times as high among unvaccinated versus vaccinated children (19.1 versus 9.2 per 100,000 population). The largest proportion of unvaccinated children (34 percent) were non-Hispanic Black children, and they accounted for about one-third of COVID-19-associated hospitalizations in this age group. The likelihood of experiencing severe COVID-19 was increased for children with diabetes and obesity.

"Increasing COVID-19 vaccination coverage among <u>children</u> aged 5 to 11 years, with particular attention to racial and ethnic minority groups disproportionately affected by COVID-19, is critical to reducing COVID-19-associated morbidity," the authors write.

One author disclosed financial ties to the pharmaceutical industry.

More information: Dallas S. Shi et al, Hospitalizations of Children



Aged 5–11 Years with Laboratory-Confirmed COVID-19—COVID-NET, 14 States, March 2020–February 2022, *MMWR*. *Morbidity and Mortality Weekly Report* (2022). DOI: 10.15585/mmwr.mm7116e1

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