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RESEARCH ARTICLE

THE EFFECT OF COVID 19 PANDEMIC ON PAEDIATRIC PRACTICE IN A TIER 2 CITY IN THE STATE OF CHHATTISGARH, INDIA

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ABSTRACT

COVID 19 Pandemic has affected all the sectors in INDIA, Healthcare sector has been affected the most. We present a commentary on the effects of Pandemic on Child health in a tier 2 state of a developing country. Subject Area: COVID 19.

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INTRODUCTION

Coronavirus also known as COVID-19 belongs to group of pathogens that target the pulmonary system in humans. They belong to coronaviridae family which are seen in mammals mainly. They are primarily non-segmented positive sense RNA viruses, (Huang, 2020) Previous outbreaks of coronaviruses (CoVs) include the severe acute respiratory syndrome (SARS)-CoV and the Middle East respiratory syndrome (MERS)-CoV they have also caused major health issues around the world in the last decade (Rothan, 2020) The first patients infected by the novel corona virus in Wuhan, china showed symptoms of respiratory distress, pneumonia and flu like symptoms. This virus later spread to different parts of the world including India. The world health organization declared the novel Corona virus as a pandemic on the 11th of March 2020. On the 24th of March 2020 the government of India declared a nationwide lockdown rendering 1.3 billion people into their houses for initially three weeks which increased over time (Gettleman, 2020; COVID). This meant that movement was restricted for only essential needs and services.

This pandemic caused havoc to the economy by affecting various sectors of the society. The Indian healthcare was also affected tremendously due to an exponential increase in the rate of infected COVID 19 cases and infection to the health care providers. It has even affected the outpatient care services delivered in both urban and rural parts of the country. Early reports suggested that majority of the outpatient service providers in India were testing positive for the novel corona virus. Hence there was a dramatic reduction in the number of patients seen in outpatient clinics. This was done in order to decrease the risk of transmitting the virus to either the health care workers or the patients. A new trend of teleconsultation and telemedicine had been encouraged for outpatient visits. For this the government of India had provided new guidelines for telemedicine. When possible, they are also converting in-person visits to telemedicine visits. For their part, many patients are also avoiding visits because they do not want to leave their homes as there were no public transports available and fear of the risk exposure was also high. Also influencing both provider and patient behavior are the evolving local and state recommendations restricting travel and nonessential services. During the month of March, April and May there was a sharp reduction in the number of patients consulted in various clinics. In the beginning of June various state governments began to lift the lockdown in stages as per the number of active cases and hot spots.

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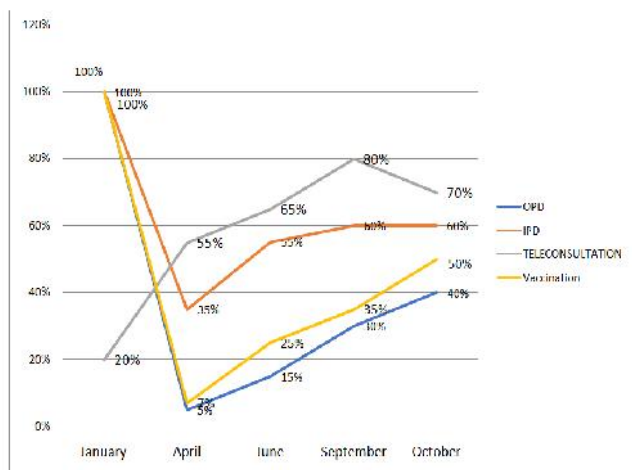


Figure 1. Trend of IPD, OPD and Tele consultations from the month of January to September

This led to spurge in the number of outpatients visits in various cities in India. But again the risk of community spread and cross infections remain a strong point for consideration. Incidence of COVID 19 is nearly approximately 7-8% in the pediatric age group (Census Bureau) According to the reports it is suggested that children are less susceptible to the novel corona virus but the number and rate of cases have been increasing since March till date. There is no actual literature providing the incidence of novel COVID 19 in children due to lack of testing in India due to more testing of the adult population (Kim, 2020) Another problem faced during the pandemic is that of decreased vaccination in children as the outpatient clinics are shut or working with minimal power and the fear of exposure to the virus. This will expose children to various vaccine preventable diseases which can be serious and lead to various morbidities and mortalities in children population. In India, on an average the percentage of Inpatient and Outpatient patients has seen a drastic change in the past few months since the beginning of the pandemic. Tele consultations have increased post the change in telemedicine guidelines at the beginning of the pandemic.

The number of Outpatient count had reduced significantly in the month of March and April to merely 5% of total patients seen in February, slowly once the precautions and SOPs were in place, the Outpatient counts has been steadily increasing to from 15% in June- July to 40% in the month of October. The Number of inpatient admissions had also reduced to the 35% in the month of March and April, due to the fear among the patients parents and also majority of the beds were converted to infectious beds due to the rise in patients with the novel coronavirus, the Inpatient admissions have improved to 60% of Pre COVID times. There has also been a significant reduction in the number of vaccinations also among the pediatric age group, mainly due to fear and lack of mobility due to the lockdown in place. Due to the fear of COVID-19 Pandemic in India, it has been reported that hundreds of children missed their dose of vaccination due to numerous reasons. World health organization had reported that when immunisation services are disrupted, even for brief periods during emergencies, the risk of vaccine-preventable disease outbreaks, such as measles and polio, increases (WHO News release Geneva, 2020)

In the rural districts of India, the vaccination was done by ASHA workers or Community health workers who have been deployed at the frontline to fight the pandemic, there by immunization against measles, HPV and polio is at a standstill in various parts of the country this will increase the incidence of vaccine preventable diseases in the coming years. In the past month, there is an emergence of a multi system inflammatory response to the novel virus in children and young adults.

The symptoms seen are of Kawasaki disease or toxic shock syndrome. The treating physician should consider them as suspected COVID 19 pneumonia patients and should handle them with proper protective equipments. Pediatric outcomes are usually excellent due to the mild forms of disease often present in children, although deaths have also been registered among children.

Asymptomatic carriers among the pediatric population have been described, raising concerns, because infected children might be asymptomatic spreaders of the disease. Infection prophylaxis through isolation of infected children is essential, involving proper monitoring, early detection of disease complications, and the opportunity for on-time treatment and limiting secondary spread. Being caught up in a pandemic involving the "sword of Damocles" and a "crown" of SARS-CoV-2 proteins, children might be a key element in the battle.

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