

EDITORIAL Omicron infections in children: Do we need to worry?

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e-ISSN: 2636-9478 © The Author(s). 2021 Content licensing: <u>CC BY 4.0</u> The SARS-CoV-2 virus is still mutating since the pandemic and producing Variant of Concern (VOCs). Genome sequencing revealed the recent strain B.1.1.529 (Omicron) in Botswana, South Africa. WHO's Technical Advisory Group on Virus Evolution (TAG-VE) declared Omicron a VOC on November 26, 2021. [1, 2] As we have learned from the earlier variants that vaccination reduces the disease severity, we are more concerned about the children, as they are not vaccinated. 79,592 children in the U.S. below five years had a first infection, including 7,201 in late December 2021 and early January 2022 when Omicron emerged and was responsible for 90% of cases.

A recent report shows that affected children in the Omicron surge had a 29% reduced risk of visiting the emergency, 67% drop in hospital admission, 68% lower risk of needing intensive care, and a 71% less risk for mechanical breathing. Black and Hispanic children are susceptible for both Omicron and Delta below five years age group had higher infection rates. [3]

A dramatic increase in infections by the contagious Omicron variant in the community was reported from the middle of November 2021 in South Africa. Tshwane District first observed a sharp rise in paediatric COVID-19-associated hospitalisations. Data from October 31 to December 11, 2021, showed that amongst 6.287 (<19) years) paediatric COVID-19 cases reported from Tshwane District, 7.2% of them were hospitalized. The number of paediatric patients is raised compared to the earlier three waves of COVID-19. A vast majority of the hospitalization cases (76%) were ≤ 13 years, where 0-4 years was 62%. Fever (47%), cough (40%), vomiting (24%), difficulty breathing (23%), diarrhoea (20%) and, convulsions (20%) were major symptoms, with a short hospital stay (mean 3.2 days). Only one-fourth received oxygen therapy; four died due to underlying co-morbidities. Interestingly, most of the infected children and their parents were unvaccinated. [4]

Now the million-dollar question is how to protect the children from the Omicron variant?

1. Parents should vaccinate themselves along with the child if they're in eligible age group

If children are not eligible for vaccination because of lower age, vaccination of the parents will protect the child. Pfizer-BioNTech is currently experimenting on a new version of the COVID-19 vaccine for the Omicron variant, expected to be ready in March 2022.

2. Wearing masks in public

children older than two years should wear masks (KF94,

N95, and KN95 masks) in residence around outsiders and public places. Clothed masks with layers may also be helpful.

3. Practice good hand hygiene

After visiting public places, the family should practice thorough handwashing with soap and water for at least 20 seconds or sanitizing hands.

4. Social distancing must be maintained strictly if the child is not eligible for vaccination.

5. COVID-19 tests are recommended before family and relatives get together

6. Avoid nonessential travel with the child. [5]

The Omicron variant is more contagious, spreading faster, but reduced hospitalization risk than the Delta variant is a relief for the parents. Vaccination to the child is strongly recommended [6] according to the rules and regulations of the Government. Profound research and constant monitoring may further unveil the Omicron variant's longterm impact on children.

Regards,

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