COVID-19-fatality Analysis 3 Months after Outbreak in Children

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1. SHORT COMMUNICATION

SARS-CoV-2 coronavirus infection outbreak has been reported in December 2019 in Wuhan, China [1-4]. Globally, the WHO classified the outbreak as pandemic situation with worldwide rapid spreading in March 2020. Globally, more than 634835 cases of COVID-19 infections have been reported by the WHO till 29 March 2020, including 29957 deaths. 3464 deaths worldwide were registrated by the WHO in the last 24 hours (28/03/2020) indicating the aggressive and devastating potential of the virus.

SARS-Cov-2 infections results in a loss of human life and economy [1,4].

In Spain, 34 of the 129 cases involving children aged 0-9 years resulted in hospitalization, a rate of 26 per cent; one child was transferred to intensive care (a rate of 0.8 per cent); and there were no deaths. Throughout Italy, South Korea and China, there have been no reported deaths in children under 10 years of age, according to public sources reported on Twitter by the much-respected anonymous biotech investor and former scientist Andy Biotech. In the United States, no intensive care admissions or deaths under the age of 20 were reported at the end of last week; only a small percentage (1.6 %) was hospitalized. So far the data confirms the idea that

children are not exclusively at risk from Covid-19, which is both surprising (as they are usually more susceptible to the flu) and a relief. But this age group apparently includes everyone, from toddlers to children approaching middle school. And we have evidence that the youngest of them can see more severe cases in primary school than their older brothers and sisters. A study of more than 2,100 children in China, published in Pediatrics magazine on March 16, found that children of all ages were susceptible to Covid-19, although the vast majority showed mild symptoms and some none at all. A caveat for this study is that only a third of the children in the sample were tested and confirmed to have the Covid-19 virus, SARS-CoV-2. The remainder was suspected cases of Covid-19, which means that there is a possibility that another pathogen could have caused the observed symptoms. Draftsman, who co-authored an article on the findings, noted that the worst effects in children were often observed in infants. The study showed that about 30 percent of the Covid-19 cases in children were found to be "severe" and more than half of the Covid-19 cases classified as "critical" occurred in children under one year of age. Although the total number was small - 7 children were seriously ill and 33 suffered from a serious illness - it was found that younger children were more likely to have more dangerous consequences. The other complication is that these younger people could still

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transmit the disease to the older generations, who are at higher risk of critical illness. Infants appear to be more vulnerable than infants and primary school children. Overall, however, only a small number of children under 10 years of age need to be hospitalized for Covid-19 and, as of 21 March, nobody in this age group has died. In Spain, 15 out of 221 cases of people between 10 and 19 years of age were hospitalized, a rate of 7 per cent, and none of them ended up in intensive care. Two teenagers died in this age group, one in France and one 12-years-old girl in Belgium. Italy and South Korea have not reported any deaths for this group; reports that 0.2 per cent of cases of these young people end in death. In the United States, as of the end of last week, no admissions

to intensive care or deaths in persons under 20 years of age were reported; only a small percentage (1.6 percent) were hospitalized. Among both the younger and older generations, basic medical conditions contribute to a person's vulnerability. But the absence of health problems does not mean that there is no risk: CNN reported on Sunday that a 12-years-old girl in Atlanta with Covid-19 does not have any known health problems and is still on a ventilator. Although older children and adolescents are in some respects more resilient than their younger peers (lower hospitalization and intensive care rates in Spain, the only country for which we have data on the separation of cohorts 0-9 and 10-19), there is still a low risk of serious complications or death.

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