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The Dilemma of Pediatric Intensive Care Admissions During Coronavirus Disease 2019 Outbreak

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With the coronavirus disease 2019 (COVID-19) pandemic in our country, the priority order of service provision in the health system has changed periodically.[1] The incidence of some diseases has decreased, and non-emergency operations and interventions have been postponed. The incidence of infectious diseases, except COVID-19, transmitted by droplets has decreased because of the use of masks applied to reduce the transmission of the virus and compliance with the rules.

In the study, which included 15 pediatric intensive care units (PICUs) organized by Araujo et al.[2] they showed that during the pandemic period in Brazil like Malta too, the number of pediatric intensive care admissions and the length of stay were significantly reduced, thanks to the closure of schools and the implementation of social distance between people.[3] We think that the decrease in the incidence of community-acquired pneumonia, bronchiolitis, and asthma mentioned is closely related to mask use, apart from school closure and social distance limitation. It is no surprise that viral infection, bacterial infection, and similar diseases transmitted through the respiratory tract have decreased, thanks to the measures taken in this period when fighting COVID-19. In addition to the similarity of the social dynamics, closed schools in Brazil on 16 March in Turkey are continuing distance education ever since. In a study by Sperotto et al[4] in which they compared the pandemic period and before, in PICUs in Italy, they showed unplanned hospitalizations were greatly reduced, but the number of hospitalizations for important surgical procedures and interventions did not change.

Our PICU is a reference center where heart and liver transplants can be performed, all kinds of extracorporeal life support equipment are used, and all sorts of patients are followed. In comparison to the same time periods of the last 4 years, we see a 30% decrease in admission betweenMarch and May 2020 in our center. When we look at the patients' number and profile at the end of the year, we notice that 5.5% (from 675 to 643) fewer patients were followed up than in the previous years in our clinic. One of the major reasons for the decrease in intensive care hospitalizations is the postponement of elective and surgical operations. We think PICU hospitalizations due to poisoning and trauma are also reduced because of the children staying at home and mostly under parental supervision. When the 1-year processes before and after March 2020, when the pandemic started, are examined, in the 2019-2020 March period, positive viral agents were detected by respiratory polymerase chain reaction (PCR) in 2340 patients in our hospital and 85 patients in the PICU (during 2019-2020 March, 2096 respiratory PCRs were detected negative in hospital, and 12 respiratory PCRs were detected negative in PICU). Between the months of 2020-2021 March, a positive viral agent was detected by respiratory PCR in 228 patients in our hospital and 16 patients in our PICU, except for COVID-19 (during 2020-2021 March, 1254 respiratory PCRs were detected negative in hospital, and 15 respiratory PCRs were detected negative in PICU). The pandemic process has shown that with hygiene measures and masks, respiratory diseases can be prevented greatly during the pandemic period; many respiratory viruses and bacteria important in children were hidden and will continue to be hidden for a while thanks to the king of the forest COVID-19.

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