



Defense Health Agency (DHA) Clinical Communities Speaker Series

CCSS Jun 2021: Exploring Evidence-Based Practice in Modern Medicine Primary Care

S05: Cardiac Implications of COVID-19 and Return to Play Recommendations for Pediatric Populations

Resource List

The American College of Radiology published an expert analysis article, [Returning to Play After Coronavirus Infection: Pediatric Cardiologists' Perspective](#) (2020), that details information on returning to sports after a COVID-19 infection from a pediatric perspective. The approach to sports participation clearance in pediatric patients should differ from the approach in adult patients. Most pediatric patients will be able to be easily cleared for participation without extensive cardiac testing. The article notes that even with extensive cardiac testing, clinicians will never be able to completely rule out all cases of myocyte damage or predict with absolute certainty which patients with acute infections are at risk for cardiac involvement.

The Institute for Advanced Clinical Trials (I-ACT) for Children held a virtual webinar titled, [Developing Pediatric Treatments for COVID-19](#) (2020) with regulators, biopharma developers and experts on the front lines of treating children with COVID-19. Speakers shared the latest on the clinical presentation of COVID-19 in children, the state of COVID-19 therapeutic research and innovative approaches to collecting the data required to advance safe and effective COVID-19 therapies for children. The webinar slides and recording are available on the I-ACT for Children website.

Fatigue is a common acute symptom following SARS-CoV-2 infection (COVID-19). The article, [Adolescent and Young Adult ME/CFS After Confirmed or Probable COVID-19](#) (2021) discusses a study on three adolescent and young adult patients who were referred for evaluation to the Chronic Fatigue Clinic at the Johns Hospital Children's Center. All patients in the study had confirmed or probable COVID-19 and reported orthostatic intolerance symptoms within the first two weeks of illness. All three patients met the criteria for myalgic encephalomyelitis/chronic fatigue syndrome ME/CFS. This study concluded that ME/CFS can be triggered by COVID-19 in adolescents and young adults and states that larger studies are needed to determine the optimal methods for treating these patients.

The National Institutes of Health (NIH) has published a website on [COVID-19 Treatment Guidelines: Special Considerations in Children](#) (2021). This site provides a summary of recommendations for specific treatment for children with COVID-19. Multisystem Inflammatory Syndrome in Children (MIS-C) is detailed with recommendations for supportive care as the mainstay of therapy. It is noted that there is currently insufficient data to recommend either for or against any specific therapeutic strategy for the management of MIS-C. MIS-C management decisions should involve a multidisciplinary team of pediatric specialists including intensive care, infectious disease, cardiology, hematology, and rheumatology.



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References

Dean, P. N., Burns Jackson, L., Paridon, S. M. (2020). Returning to Play After Coronavirus Infection:

Pediatric Cardiologists' Perspective. *American College of Cardiology*. <https://www.acc.org/latest-in-cardiology/articles/2020/07/13/13/37/returning-to-play-after-coronavirus-infection>

Institute for Advanced Clinical Trials for Children. (2020). Virtual Workshop: Developing Pediatric

Treatments for COVID-19: I-ACT for Children. <https://www.iactc.org/virtual-workshop-developing-pediatric-treatments-for-covid-19/>

National Institutes of Health. (2021). *COVID-19 Treatment Guidelines: Special Considerations in Children*.

<https://www.covid19treatmentguidelines.nih.gov/special-populations/children/>

Petracek, L. S., Suskauer, S. J., Vickers, R. F., Patel, N. R., Violand, R. L., Swope, R. L., & Rowe, P. C. (2021).

Adolescent and Young Adult ME/CFS After Confirmed or Probable COVID-19. *Frontiers in*

Medicine, 8, 668944. <https://doi.org/10.3389/fmed.2021.668944>