

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
<i>This represents the final version, as of 30 April, 2021</i>							
Paediatric inflammatory multisystem syndrome; South Africa; Children; COVID-19; Acute respiratory distress syndrome; ARDS	31-Aug-20	Paediatric inflammatory multisystem syndrome: What should we look out for in South Africa?	The South African Medical Journal	Editorial	This article discusses COVID-19-associated pediatric multi-system inflammatory syndrome (PMIS) and how to identify this syndrome in South African pediatric patients. After the acute phase of SARS-CoV-2 infection, PMIS presents in children as persistent high-grade fever, shock, single- or multi-organ failure, skin or mucosal manifestation, and partial or complete fulfillment of Kawasaki disease criteria. Compared to Kawasaki disease, PMIS occurs in older children; has higher rates of progression to shock, myocardial dysfunction, more severe lymphopenia and thrombocytopenia; and higher levels of inflammatory markers such as IL-6, serum ferritin, and C-reactive protein. Inotropic support and extra-corporeal membrane oxygen (ECMO) is often required to manage PMIS. First-line treatment in most reports includes IV immunoglobulins and/or steroids. There is a predominance of PMIS in patients of African ancestry, although it is unknown whether this is due to genetic predisposition or socio-economic risk factors. The authors urge South African physicians to proceed with a high index of suspicion for PMIS, and argue that patients with suspected PMIS should be referred for specialist care in a facility equipped with ICUs.	The authors summarize what is known about COVID-19-associated pediatric multi-system inflammatory syndrome (PMIS), including clinical presentation and treatments. They urge South African physicians to be on high alert for patients who may present with PMIS, and be prepared to refer them to a center equipped with ICUs.	Hendricks CL, Mustafa F, Green RJ, et al. Paediatric inflammatory multisystem syndrome: What should we look out for in South Africa? S Afr Med J. 2020 Aug 31;110(9):832-834. doi: 10.7196/SAMJ.2020.v110i9.1506 2. PMID: 32880261.
Newborn, vertical transmission	31-Aug-20	Coronavirus Disease 2019 in Neonates - What Is Known and What Needs to Be Known	Cureus	Review article	The authors discuss the clinical features, diagnosis, management, and preventive strategies for neonates that test positive or are at risk for COVID-19. While SARS-CoV-2-specific immunoglobulin (IgM) and IgG have been detected in a few newborns of infected women, further studies are needed to confirm in-utero transmission, given the possibility of false-positive IgM. Few neonates have tested positive for COVID-19, and their symptoms have ranged from none to moderate. While vertical transmission is unlikely based on current data, horizontal transmission risk is present. The impact of maternal COVID-19 on the fetus is not well known; however, since viral pneumonia in pregnant women is associated with adverse neonatal outcomes, the authors suggest that pregnant women suspected of COVID-19 should have fetal growth monitored every 2-4 weeks. Considering the high risk of viral transmission from symptomatic COVID-19 infected mothers, the authors suggest separating asymptomatic neonates from symptomatic mothers immediately after birth. They state that the neonate should be fed with expressed breast milk, pasteurized donor human milk, or formula feeding. The authors also recommend admitting all symptomatic neonates to a separate neonatal intensive care unit, and monitoring them closely. Anti-virals and other medications, including hydroxychloroquine and azithromycin, are not recommended for symptomatic or asymptomatic neonates. All pregnant women	Very few COVID-19 cases have been reported in neonates, and these patients have recovered well with early detection and supportive treatment. Although vertical transmission is unlikely, the authors state that all pregnant women should be screened and practice infection control measures to prevent horizontal transmission, including separation of asymptomatic neonates from symptomatic mothers immediately after birth.	Nayak M, Panda S, Pradhan JB, Mohakud NK. Coronavirus Disease 2019 in Neonates - What Is Known and What Needs to Be Known. Cureus. 2020 Aug 31;12(8):e10171. doi: 10.7759/cureus.10171. PMID: 33029451; PMCID: PMC7529492.

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					need to be screened and practice infection control measures such as mask-wearing and handwashing.		
Antenatal care, maternal health services, prenatal care, Pakistan	31-Aug-20	Impact of the COVID-19 pandemic on maternal health services in Pakistan	International Journal of Health Planning and Management	Original Article	This article hypothesizes that the COVID-19 pandemic could increase maternal and neonatal mortality, due to the interruption of routine maternal health services. During the outbreak, staffing and materials have shifted to COVID-19 needs, thereby depleting resources for routine obstetric and pediatric care. This is especially worrisome in Pakistan, which had a high maternal mortality rate prior to COVID-19. Maternal mortality is more common in rural areas of Pakistan due to lack of access to care; this access has worsened during the pandemic. Vital medicines and supplements are in short supply, and limited PPE has caused interruptions in care. Lack of access to medical facilities and staff may result in home births without skilled attendants, which can increase morbidity and mortality risk. Postpartum mental health problems, even more likely during the COVID-19 pandemic, could go undiagnosed without routine medical follow-up. The authors highlight health care organizations in the United Kingdom and USA, which have adapted maternity care through telemedicine and other innovations. They urge Pakistan's government to follow those examples. In summary, the authors encourage the Pakistan government to allocate funds to provide health facilities in remote areas, and continue the supply of maternal medications.	This article hypothesizes that the COVID-19 pandemic could increase maternal and neonatal mortality, due to the interruption of routine maternal health services, particularly in rural Pakistan. The authors urge governments and NGOs to make necessary arrangements to support people with prenatal and postnatal care.	Sarwer A, Javed B, Soto EB, Mashwani ZU. Impact of the COVID-19 pandemic on maternal health services in Pakistan [published online ahead of print, 2020 Aug 31]. Int J Health Plann Manage. 2020;10.1002/hpm.3048. doi:10.1002/hpm.3048
Children, special needs, autism spectrum disorder, social distancing, school closures	31-Aug-20	Considerations for Young Children and Those With Special Needs as COVID-19 Continues	The Journal of the American Medical Association (JAMA) Pediatrics	Article	Social distancing continues to be one of the primary methods used to slow the spread of SARS-CoV-2, but these measures have an immense effect on young children and children with special needs. Disrupted routines, communication difficulties, confusion, anxiety, and changed environments can result in lost gains in social-emotional learning. The authors encourage direct and concrete language be used to explain the COVID-19 pandemic and the precautionary measures that have resulted. Structured home routines that are predictable (using visible schedules) can minimize anxiety for children with special needs and visual timers can help with transitions between activities. Opportunities for expressing emotions in non-verbal ways (eg. art or music) can reduce anxiety and behavioral difficulties. The authors also recommend that regular check-ins continue between the child and their social and therapeutic support system.	This article summarizes the negative impacts of social distancing on young children and children with special needs. The authors provide recommendations for parents to implement in the home to minimize anxiety and support social-emotional learning.	Kong M, Thompson LA. Considerations for Young Children and Those With Special Needs as COVID-19 Continues [published online, 2020 Aug 31]. JAMA Pediatr. 2020. doi:10.1001/jamapediatrics.2020.2478

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Pregnancy, pathogenesis, placental pathology, transmission	31-Aug-20	Pregnancy and COVID-19: management and challenges	Revista do Instituto de Medicina Tropical de São Paulo	Review Article	This review introduces the pathogenesis, pathology (especially lung and placenta), and clinical features of COVID-19 with a focus on pregnancy-related outcomes for pregnant women infected with SARS-CoV-2 in comparison with SARS-CoV and MERS-CoV. Major conclusions include the following: Pregnant women with COVID-19 pneumonia show similar clinical characteristics compared with non-pregnant counterparts. Pregnancy complications that have occurred in pregnant women with COVID-19 include fetal distress, premature rupture of membranes, preterm deliveries and stillbirths. Pregnancy complications appear to be related to the cytokine storm, lung injury, and placental ischemia/ hypoxia caused by SARS-CoV-2 infections. There is currently no evidence to support intra-uterine vertical transmission of SARS, MERS, and COVID-19. Additionally, breast milk samples have not been positive for SARS-CoV-2 and since breastfeeding has a strong protective effect on the newborn, precautions should be taken to enable infected mothers to breastfeed.	The authors provide a review on maternal infection with SARS-CoV-2, SARS, and MERS during pregnancy, including viral pathogenesis, clinical manifestations and pregnancy-related outcomes.	Wenling Y, Junchao Q, Xiao Z, Ouyang S. Pregnancy and COVID-19: management and challenges. Rev Inst Med Trop Sao Paulo. 2020;62:e62. doi:10.1590/s1678-9946202062062
Children, school, medical services, transmission, intrauterine spread, Kawasaki disease, global	31-Aug-20	COVID-19 in children: Should we be worried?	South African Medical Journal	Review	A lack of knowledge surrounding COVID-19 transmission and presentation in children has played a significant role in the decisions regarding education and medical services for children. The authors highlight and discuss important topics regarding this decision including the risk of severe disease in children, transmission of SARS-CoV-2 in children, intra-uterine spread, and the economic impact of COVID-19 in children. Of note, previous findings suggest qualitative differences in immune response as evidence for reduced disease severity in children compared to adults. Primary concerns for severity in children focus on a multisystem inflammatory disorder with features resembling Kawasaki disease. Additionally, SARS-CoV-2 transmission by children has been seen via respiratory secretions and fecal-oral spread. Further, there has been no definitive evidence for intra-uterine transmission. The authors conclude by suggesting that given the evidence on COVID-19 transmission among children, services such as routine access to emergency medical services and schools should be sustained to protect the economic and physiologic wellbeing of children.	This review suggests that disruptions in education and medical services for children due to COVID-19 may pose a greater threat to the economic and physiologic wellbeing of children; reduced disease presentation and transmission risk in children may not support decisions such as school shutdowns.	Hendricks CL, Green RJ. COVID-19 in children: Should we be worried?. S Afr Med J. 2020;110(9):864-868. Published 2020 Aug 31. doi:10.7196/SAMJ.2020.v110i9.15023
Kawasaki disease, inflammation, vasculitis, pediatric, USA, India, Italy, France, England	31-Aug-20	Clinical-Epidemiological Relation Between SARS-CoV-2 and Kawasaki Disease: An	Revista Paulista de Pediatria	Review Article	The authors conducted an integrative literature review to document the main findings that correlate Kawasaki disease (KD) to COVID-19. In June 2020, the authors searched Biblioteca Virtual em Saúde (BVS), periódico da CAPES, and U.S National Library of Medicine (PubMed) using the terms “COVID-19” or “SARS-CoV-2” and “Kawasaki disease”. They included studies published from January 2019-June 2020, available online in-full, and without restrictions for language or location. While 97	In this integrative literature review, the authors detail the clinical epidemiology of pediatric COVID-19 and its potential association with severe Kawasaki disease (KD). However, children with	Santos BSD, Santos FSD, Ribeiro ER. Clinical-Epidemiological Relation Between SARS-CoV-2 and Kawasaki Disease: An Integrative Literature. Rev Paul Pediatr. 2021;39:e2020217. doi:10.1590/1984-0462/2021/39/2020217

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		Integrative Literature			publications were initially identified, 7 were used for the review. The selected articles encompass findings from the USA, India, Italy, France, and England. Compared to KD, COVID-19 appears to trigger a severe clinical condition of vasculitis. Furthermore, patients with COVID-19 induced inflammatory syndrome were older (7.7 years vs 3 years) and the prevalence was higher in children from African or Caribbean ancestry compared to KD. Abdominal complaints and elevated inflammatory markers were also more frequently observed. Additionally, there are reports of rare complications and resistance to the recommended treatment for KD in these cases.	COVID-19 who have similar clinical characteristics to those of known inflammatory syndromes, such as KD, are epidemiologically different, clinically more severe, and more resistant to treatment.	
Adolescent health, ethics, society, UK	31-Aug-20	Young people's views on their role in the COVID-19 pandemic and society's recovery from it	Archives of Disease in Childhood	Original Research	This study aimed to explore how young people see their role in the COVID-19 pandemic. Focus-group discussion was conducted with 15 adolescents (11–18 years) in the UK. Four major themes were identified: (1) Awareness of pandemic's impact on others: participants showed mature awareness of the effects on broader society, especially the elderly, socially disadvantaged and parents; (2) Perceived impact on their own lives: principal concerns were the educational and practical repercussions of school closures and social isolation, including effects on educational prospects; (3) Views about school re-opening: young people understood the broader rationale for school re-opening and were generally positive about it, but expressed concern about their safety and that of others; (4) Communication issues: a need for clear, concise, understandable information readily accessible for young people was expressed. They felt passive recipients rather than participants. Young people were concerned about their future, their family and broader society, consistent with a high level of moral development.	This study aimed to explore how young people (11-18 years) in the UK see their role in the COVID-19 pandemic. Major themes included the pandemic's impact on their own lives, awareness of its impact on the lives of others, views on school re-opening, and communication issues.	Larcher V, Dittborn M, Linthicum J, et al. Young people's views on their role in the COVID-19 pandemic and society's recovery from it [published online, 2020 Aug 31]. Arch Dis Child. 2020;archdischild. doi:10.1136/archdischild-2020-320040
Health system resources, obstetrics, pregnancy, USA	31-Aug-20	COVID-19 in obstetrics 2020: the experience at a New York City medical center [Free Access to Abstract Only]	Journal of Perinatal Medicine	Article	Adapting to the COVID-19 pandemic in an obstetrics setting requires workforce flexibility, frequent communication of operational and protocol changes, and application of innovative ideas to meet demand. This article presents an overview of the response of a medical center in New York City (USA) to the COVID-19 pandemic with an emphasis on the obstetric experience. Included are tables and figures illustrating adaptations to manage overflow volume and improve patient outcomes, changes to inpatient obstetric protocol and patient flow management, obstetric COVID-19 management, admission criteria, and recommendations for outpatient care. The authors noted a high rate of asymptomatic cases among pregnant patients, which combined with an increasing positivity rate for SARS-CoV-2 in their region, ultimately led to a decision of universal SARS-CoV-2 testing for all admitted pregnant patients and universal mask-wearing for all clinical interactions.	This article presents an overview of the response of a medical center in New York City (USA) to the COVID-19 pandemic—how the disease presented and how resources were adapted—with an emphasis on the obstetric experience. The authors include tables, figures, and detailed recommendations as a guide for other obstetric settings to adequately prepare for	Dayal AK, Razavi AS, Jaffer AK, et al. COVID-19 in obstetrics 2020: the experience at a New York City medical center [published online, 2020 Aug 31]. J Perinat Med. 2020;/j/jpme.ahead-of-print/jpm-2020-0365/jpm-2020-0365.xml. doi:10.1515/jpm-2020-0365

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						COVID-19 surges in their area.	
E-health, E-learning, Remote work system, Teleconsultations, Telemedicine, Virtual meeting, China, France, Italy	31-Aug-20	An accelerated shift in the use of remote systems in epilepsy due to the COVID-19 pandemic	Epilepsy & Behavior	Original Research	This study assessed the impact of the COVID-19 pandemic on the use of remote systems in clinics, education, and scientific meetings. The authors conducted a 60-item cross-sectional electronic survey of health care providers in the epilepsy field, including pediatric neurologists, in April and May 2020. 172 individuals from 35 countries responded, including 111 who specifically cared for children (64.5%). In addition to presenting all findings, the authors compared results among the countries with the highest numbers of respondents (France, China, and Italy). Prior to COVID-19, 109 respondents (63.4%) had used a remote system for some clinical care, and professionals in China had more experience with remote systems than those in France and Italy. During the pandemic, use of remote systems increased, and differences in use between countries decreased. 84.6% (99/117) of respondents involved in academic activities changed to online teaching. Respondents opined that meetings and conferences are less conducive to remote system use. 61% of respondents were satisfied by their remote clinics (99/162), 56.7% by their online teaching (55/99), and 45.2% by remote meetings (57/126). This study showed that the COVID-19 pandemic has increased the shift from classical to remote communication for epilepsy practitioners in all the fields of their activity, namely clinical activity, teaching, and scientific meetings.	This study showed that the COVID-19 pandemic has increased the shift from classical to remote communication for epilepsy practitioners in all the fields of their activity, namely clinical activity, teaching, and scientific meetings. This includes use by providers who care for children with epilepsy. The satisfaction was acceptable, and almost all responders agreed on a possible future use of remote systems.	Kuchenbuch M, d'Onofrio G, Wirrell E, et al. An accelerated shift in the use of remote systems in epilepsy due to the COVID-19 pandemic [published online ahead of print, 2020 Aug 31]. <i>Epilepsy Behav.</i> 2020;112:107376. doi:10.1016/j.yebeh.2020.107376
Children, cytokine storm, viral shedding, pediatrics, China	31-Aug-20	Viral shedding and immunological features of children COVID-19 patients	medRxiv	Preprint (not peer-reviewed)	Elucidation of the COVID-19 viral shedding and cytokine profiles is crucial for the laboratory diagnosis, treatment, and control of COVID-19. This study analyzes the viral shedding and immunological features of SARS-CoV-2-infected pediatric patients who were treated at a hospital in China (n=35, age range: 1.5-17 years, median age 7.5 years). 93.55% of patients had at least 1 infected family member. 40% of patients were asymptomatic. Viral RNA was detected in 48.57% of fecal samples despite only 1 case of gastro-intestinal symptoms. Viral RNA could be detected in respiratory and fecal samples up to 33 and 41 days after illness onset, respectively, and viral RNA levels peaked early in disease. Plasma was collected from pediatric SARS-CoV-2-infected patients (n=11) and showed that cytokines highly correlated with disease severity and were significantly lower (p<0.05) in pediatric patients than in adults infected with SARS-Cov-2 (n=50). Immune responses were relatively normal when compared to healthy pediatric controls (n=8), but elevated concentrations of both pro- and anti-inflammatory cytokines in infected pediatric patients were observed.	This study analyzes viral shedding and cytokine profiles of pediatric SARS-CoV-2-infected patients. Viral shedding was present in infected pediatric respiratory and fecal samples. Cytokines associated with disease severity and were significantly lower in infected pediatric patients than in infected adults.	Yang Y, Zheng H, Peng L, et al. Viral shedding and immunological features of children COVID-19 patients. medRxiv. 2020. doi:10.1101/2020.08.25.20181446

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Asthma, pediatric, corticosteroids, allergy, adolescent, Italy	31-Aug-20	Children and adolescents with allergy and/or asthma seem to be protected from coronavirus disease 2019	Annals of Allergy, Asthma & Immunology	Letter to the Editor	This letter responds to an article by Akenroye et al, which reflected uncertainty about the use of cortico-steroids and biologics in asthma during the COVID-19 pandemic. The authors report that COVID-19 infections are rare in people with asthma. They state that eosinophils, which are often abundant in patients with allergy/asthma, help to combat COVID-19 infection. However, anti-interleukin-5 biologics such as mepolizumab deplete eosinophils, and so could theoretically increase risk of COVID-19 infection. The authors then review data from two hospitals in Italy, in which patients with allergy had higher eosinophil counts than those with COVID-19 (median values 423 and 112 cells/ μ L, respectively). (Note: The authors did not report the size or characteristics of their study population for this statistic.) Five of the hospitalized allergy patients had been receiving mepolizumab, and had a median eosinophil count of 319 cells/ μ L. Of the 52 children and adolescents hospitalized with COVID-19 (mean age 6.2 years, no range given), only two patients (4%) were allergic, and one (2%) had asthma. This differs significantly from the prevalence of allergy and asthma in the geographic area, which are 32% and 11%, respectively. The authors hypothesize that allergy/asthma could be protective against COVID-19. Additionally, since eosinophil counts were not completely depleted after mepolizumab treatment, the authors conclude that cortico-steroids and biologics could be safely continued. Akenroye et al then respond to the letter, acknowledging that there are some physiologic mechanisms that could protect people with allergy and asthma from COVID-19. However, although adults with COVID-19 rarely have asthma, the US CDC reports asthma as a common comorbidity in children with COVID-19. Akenroye et al go on to question whether eosinopenia is a cause or a consequence of severe COVID-19 infection. Finally, they agree that steroid and biologic treatment should continue in people who develop COVID-19.	The authors respond to an article by Akenroye et al, by hypothesizing that allergy/asthma could be protective against COVID-19 that cortico-steroids and biologics could be safely continued with COVID-19. Akenroye et al then respond by agreeing with the recommendation to use cortico-steroids and biologics during the COVID-19 pandemic, but they question the assertion that pediatric allergy/asthma is protective against COVID-19 infection.	Ciprandi G, Licari A, Filippelli G, Tosca MA, Marseglia GL. Children and adolescents with allergy and/or asthma seem to be protected from coronavirus disease 2019. Ann Allergy Asthma Immunol. 2020;125(3):361-362. doi:10.1016/j.anai.2020.06.001
Pediatrics, neurology	31-Aug-20	COVID-19 and Child Neurology Care	Neurology India	Letter to the Editor	In this letter, the author discusses the various challenges that the COVID-19 pandemic has posed for pediatric neurologists. These range from managing children with COVID-19 presenting with neurological involvement to diagnosing COVID-19 in children presenting with isolated neurological manifestations and providing a continuum of care to children with pre-existing or newly diagnosed neurological disorders. Children with disabilities and pre-existing or newly diagnosed neurological disorders often have difficulty adapting easily, and therefore may need additional support. The author discusses the need for multidisciplinary cooperation to initiate rehabilitation guidance using	The author encourages the use of teleconsultation and emphasizes the need for collaboration among various medical professionals in order to provide the most effective care for pediatric neurology patients during the COVID-19 pandemic.	Gulati S, Gupta J, Madaan P. COVID-19 and Child Neurology Care. Neurol India. 2020;68(4):952-954. doi:10.4103/0028-3886.293484

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					teleconsultation by clinicians, physiotherapists, occupational therapists, and child psychologists.		
Pregnancy, disease severity, outcomes, transmission, immunology	31-Aug-20	Severity of COVID-19 In Pregnancy: A Review of Current Evidence [Free Access to Abstract Only]	American Journal of Reproductive Immunology	Review Article	This review provides a summary of the clinical course of COVID-19 in pregnancy, drawing on 1) experience with SARS and MERS, 2) knowledge of immunologic and physiologic changes in pregnancy and 3) the current literature reporting outcomes in pregnant women with SARS-CoV-2. Their major findings are as follows: Compared to SARS and MERS, infection with SARS-CoV-2 appears less likely to result in severe disease. Pregnant women appear to experience more severe disease from SARS-CoV-2 compared to their non-pregnant counterparts. Although some studies show equivalent rates of severe and critical infection to that observed in the general population, these rates are likely higher than what might be observed in reproductive aged women given that younger patients and women experience milder disease. Severe disease requiring hospitalization appears to develop, on average, 7 days after symptom onset. The fetal and neonatal impact of SARS-CoV-2 infection during pregnancy are poorly characterized. Current data suggest that, although rare, trans-placental transmission can occur. There is some evidence of placenta damage among women infected with SARS-CoV-2 during pregnancy; the clinical significance of this is unknown. Pre-term delivery for maternal respiratory distress should be considered in critical cases, weighing the potential maternal benefits with fetal risks.	This review provides an overview of the clinical course of COVID-19 in pregnancy and reviews the current literature reporting outcomes in pregnant women with SARS-CoV-2. The authors also provide considerations in management of severe COVID-19 in pregnancy.	Kucirka LM, Norton A, Sheffield J. Severity of COVID-19 In Pregnancy: A Review of Current Evidence [published online 2020 Aug 31]. Am J Reprod Immunol. 2020; doi:10.1111/aji.13332
Italy, lockdown, mothers, children, sleep	31-Aug-20	The interplay between mothers' and children behavioral and psychological factors during COVID-19: an Italian study	European Child and Adolescent Psychiatry	Original Research	The authors investigated how COVID-19 lockdown measures in Italy impacted mothers and their pre-school children's behavioral habits and psychological wellbeing. An online survey assessing habits, behaviors, and emotions both before and during the lockdown was administered from April 1-9, 2020, to 245 mothers in Italy with pre-school aged children from 2-5 years of age. The authors found that there was a general worsening of sleep quality and a distortion of time experience in both mothers and children. Additionally, children tended to express increasing emotional symptoms and self-regulation difficulties. Sleep quality was found to mostly impact both mothers' and children's psychological wellbeing. Overall, these data indicate that the Italian lockdown was particularly challenging for mothers and their children. The authors suggest that these results may be important for developing policies in other countries.	The psychological wellbeing of mothers and their children was assessed in order to determine the effects of the lockdown in Italy. The authors found a general worsening of critical sleep quality in both mothers and children, suggesting that this is a driving force behind the effects of the COVID-19 outbreak on psychological wellbeing.	Di Giorgio E, Di Riso D, Mioni G, et al. The interplay between mothers' and children behavioral and psychological factors during COVID-19: an Italian study. Eur Child Adolesc Psychiatry. 2020; doi:10.1007/s00787-020-01631-3

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Bacillus Calmette-Guerin (BCG), pneumococcus, vaccine coverage, lactoferrin, breast milk, global	31-Aug-20	Age and Location in Severity of COVID-19 Pathology: Do Lactoferrin and Pneumococcal Vaccination Explain Low Infant Mortality and Regional Differences?	BioEssays	Report	Two main conundrums remain unsolved by COVID-19 investigators including observations of rare morbidity and mortality among infants and young children as well as rates of morbidity and mortality exhibiting great variances across nations, locales, and cities. The authors suggest that areas with higher rates of infant pneumococcal vaccination have observed lower rates of COVID-19 morbidity and mortality. Hemophilus influenzae type B (Hib) and pneumococcal vaccinations have shown to have direct and indirect impacts on lowering COVID-19 morbidity and mortality and is hypothesized to help curb the pandemic through global mass immunization programs. Further, maternal antibodies, including antibodies against pneumococci, can passively protect newborns through breast milk. Additionally, maternal, cow, goat, and sheep milk contain lactoferrin that contains significant antiviral properties that can help protect against COVID-19 infection in infants. The authors suggest oral supplementation with lactoferrin to the daily intake of infants may be prophylactic or reduce symptoms of COVID-19. The authors conclude by suggesting Hib and pneumococcal global immunization programs and/or lactoferrin intake may aid in the reduction of infant morbidity and mortality due to COVID-19.	The authors suggest reduced COVID-19 infant morbidity and mortality may be due to higher rates of Hib and pneumococcal vaccination. Further, maternal antibodies and lactoferrin found in milk have antiviral properties; both vaccination and maternal milk may reduce infant morbidity and mortality of COVID-19.	Root-Bernstein R. Age and Location in Severity of COVID-19 Pathology: Do Lactoferrin and Pneumococcal Vaccination Explain Low Infant Mortality and Regional Differences? [published online ahead of print, 2020 Aug 31]. Bioessays. 2020;e2000076. doi:10.1002/bies.202000076
Anxiety; COVID-19; Depression; Pandemic; Pregnancy; Psychological impact	30-Aug-20	COVID-19 and mental health during pregnancy: The importance of cognitive appraisal and social support	Journal of Affective Disorders	Original Research	This study aims to understand the impact of COVID-19 on mental health and identify risk and protective factors during pregnancy. The authors conducted a study of 303 pregnant women (mean 32.13 years, range 19-44 years; mean gestational age 21.47 weeks, range 4-36 weeks) from June 3-July 31, 2020 in Ontario, Canada. COVID-19-related experiences were assessed relating to mental health, which was assessed using the Cambridge Worry Scale (CWS), Centre for Epidemiologic Studies Depression Scale (CES-D), and Insomnia Severity Index (ISI). Social support and cognitive appraisal of the pandemic were examined as protective factors. Participants reported increased worry (CWS mean score = 1.94, with higher score indicating higher worry) compared to pre-COVID-19 times (CWS mean score = 1.16, p<0.0001). 57.1% reported clinically significant levels of depression (CES-D≥10), 41.2% reported subthreshold insomnia (ISI score 8-14), and 19.2% reported clinical insomnia (ISI score ≥15), but the average ISI score was not significantly different (p=0.99) from a non-COVID-19 sample of pregnant individuals. Social support (range -.24 to -.38, p<0.01) was associated with lower mental health problems, and negative cognitive appraisal (range .20 to .33, p<0.01) was linked to more mental health problems. Risk of SARS-CoV-2 infection (p<0.05), social isolation (p<0.05), and relationship difficulties (p<0.01) were associated with depression. Risk of SARS-CoV-2 infection (p<0.01), social isolation (p<0.05),	This study aims to understand the impact of COVID-19 on mental health and identify risk and protective factors during pregnancy in Ontario, Canada. Findings underscore the need to address the high rates of mental health during pregnancy and outline potential targets (cognitive appraisal and social support) to protect pregnant people from experiencing mental health problems during the COVID-19 pandemic.	Khoury J, Atkinson L, Bennett T, et al. COVID-19 and mental health during pregnancy: The importance of cognitive appraisal and social support. J Affect Disorders. 2021; 282(1):1161-1169. doi: https://doi.org/10.1016/j.jad.2021.01.027

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					financial difficulties ($p < 0.01$), and relationship difficulties ($p < 0.01$) were associated with anxiety. Risk of SARS-CoV-2 infection ($p < 0.01$), financial difficulties ($p < 0.01$), and relationship difficulties ($p < 0.01$) were associated with insomnia. Findings underscore the need to address the high rates of mental health problems during pregnancy and outline potential targets to protect pregnant people from mental health problems during the COVID-19 pandemic.		
Adolescents, determinants, food choice, food choice questionnaire (FCQ), national population-based study, Poland	30-Aug-20	Population-Based Study of the Changes in the Food Choice Determinants of Secondary School Students: Polish Adolescents' COVID-19 Experience (PLACE-19) Study	Nutrients	Original Research	The study aimed to analyze changes in the food choice determinants of secondary school students in a national sample of Polish adolescents. The study was conducted in May 2020, based on the random quota sampling of schools and 2448 students from all the regions of Poland participated. The Food Choice Questionnaire (36 items) was applied twice to analyze current choices (during the pandemic) and general choices (no pandemic). For both the period before and during the COVID-19 pandemic, sensory appeal and price were indicated as the most important factors. However, differences were observed between the scores of specific factors, while health ($p < 0.0001$) and weight control ($p < 0.0001$) were declared as more important during the pandemic, compared with the period before. The role of mood enhancement (e.g. eating to cope with stress) and sensory appeal (e.g. looking or tasting good) were less important than before the COVID-19 pandemic ($p < 0.0001$). The authors interpret these findings as positive changes promoting the uptake of a better diet among adolescents.	This study analyzed the changes in the food choice determinants of Polish secondary school students. Results suggest that the pandemic increased the importance of health and weight control but reduced the role of mood enhancement and sensory appeal in food choice.	Głąbska D, Skolmowska D, Guzek D. Population-Based Study of the Changes in the Food Choice Determinants of Secondary School Students: Polish Adolescents' COVID-19 Experience (PLACE-19) Study. <i>Nutrients</i> . 2020;12(9):E2640. Published 2020 Aug 30. doi:10.3390/nu12092640
Intussusception, pediatric, gastrointestinal, Pakistan	30-Aug-20	Intussusception in an Infant as a Manifestation of COVID-19	Journal of Pediatric Surgery Case Reports	Case Report	The authors describe the unusual case of a patient with intussusception, who was SARS-CoV-2 positive. A 4 months old boy presented to the emergency room at Aga Khan University Hospital (AKUH), Karachi, Pakistan, with a two-day history of acute onset, intermittent, severe abdominal pain, and two episodes of currant jelly stool in the preceding 24 hours. The child was otherwise healthy, vaccinated, and had no significant past surgical history. However, he had recovered from a fever and upper respiratory tract infection one week before admission. Physical exam was notable for a sausage-shaped lump palpable in the right upper abdomen, and ultrasound confirmed intussusception. He was subsequently treated with broad-spectrum intravenous antibiotics and underwent pneumatic reduction of intussuscepted bowel under fluoroscopic guidance in the radiology suite without complications. Of note, his nasal swab returned positive for SARS-CoV-2 by PCR. However, he did not receive any treatment for COVID-19 as he was asymptomatic. He was subsequently discharged in stable condition after a total hospital stay of 60 hours and instructed to follow isolation	This report is the first documented case of survival in a SARS-CoV-2 positive infant presenting with intussusception as the primary manifestation and no respiratory symptoms. Therefore, surgeons need to remain suspicious of possible gastro-intestinal manifestations of SARS-CoV-2.	Moazzam Z, Salim A, Ashraf A, Jehan F, Arshad M. Intussusception in an infant as a manifestation of COVID-19. <i>J Pediatr Surg Case Rep</i> . 2020;59:101533. doi:10.1016/j.epsc.2020.101533

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					protocols. He did not develop any respiratory symptoms or signs of sepsis throughout the hospital course and was in good health 1-week post-discharge.		
Pregnancy, vertical transmission, amniotic fluid, amniocentesis, Spain	30-Aug-20	Study of amniotic fluid in pregnant women infected with SARS-CoV-2 in first and second trimester. Is there evidence of vertical transmission? [Free Access to Abstract only]	The Journal of Maternal-Fetal & Neonatal Medicine	Short Report	The effects of SARS-CoV-2 infection on fetal development and its potential for vertical transmission remain unknown. The authors present two cases of pregnant women with COVID-19 during the first and second trimester of gestation in Spain. They conducted PCR for SARS-CoV-2 on samples of amniotic fluid from these two patients to determine the possibility of vertical transmission. In both cases, the PCR result was negative. This fact could support previous data from the literature on the lack of vertical transmission when maternal infection occurs during the first or second trimester. The authors note that they would rely upon more extensive studies to provide further evidence for this statement.	In this article, the authors describe two cases of COVID-19 in early pregnancy with negative PCR results for SARS-CoV-2 in the amniotic fluid. The authors conclude that these findings support the lack of vertical transmission in such patients.	Rubio Lorente AM, Pola Guillén M, López Jimenez N et al. Study of amniotic fluid in pregnant women infected with SARS-CoV-2 in first and second trimester. Is there evidence of vertical transmission? [published online, 2020 Aug 30]. <i>J Matern Fetal Neonatal Med.</i> 2020;1-3. doi:10.1080/14767058.2020.1811669
Meckel's diverticulum, Neonatal, dehiscence	29-Aug-20	Meckel's diverticulum perforation in a newborn positive to Sars-Cov-2	Journal of Pediatric Surgery Case Reports	Case Report	These authors share the case of a 3-day-old male presenting with feeding intolerance, biliary gastric stagnation, and abdominal distension. Laparotomy revealed a perforated Meckel diverticulum. The affected ileal loop was resected and anastomosis was performed. The patient demonstrated dehiscence of both the abdominal wound and the anastomosis on post-operative day 5, and underwent a second anastomosis. The patient's pediatrician subsequently became symptomatic and resulted positive for SARS-CoV-2. The patient then tested positive, so was isolated in the pediatric ICU. The patient was discharged at 2 months of life, and at 4 months follow-up was asymptomatic. The authors state that Meckel's diverticulum is common and can present with diverticulum perforation, but this is rare in neonates. It is unknown whether or not this patient's COVID-19 infection was related to his diverticulum perforation or wound dehiscence. The authors report little current data on a possible relationship between COVID-19 and surgical complications. They encourage continued case reports of pediatric COVID-19 cases, to inform the development of shared protocols that can improve the management of patients and limit risks for health personnel.	These authors share the case of a 3-day-old male with Meckel's diverticulum perforation. They urge further research on a possible relationship between COVID-19 and surgical complications, including in children.	Bindi E, Cruccetti A, Ilari M, et al. Meckel's diverticulum perforation in a newborn positive to Sars-Cov-2 [published online ahead of print, 2020 Aug 29]. <i>J Pediatr Surg Case Rep.</i> 2020;101641. doi:10.1016/j.epsc.2020.101641
COVID-19; pediatric; burn visits; United States	29-Aug-20	Burn visits to a pediatric burn center during the COVID-19 pandemic and 'Stay at home' period	Burns	Letter to the Editor	The authors assessed impact of the Stay at Home (SHO) executive order during the COVID-19 pandemic on burn visits to a pediatric burn center in Michigan, United States. Total number of overall emergency department (ED) visits and burn visits by children aged ≤21 years between 16 March-3 June 3 2020 when schools were closed (SHO) were analyzed and compared to the same period in 2019 (non-SHO). A 66.6% reduction in overall ED visits (SHO: n=7871 vs. non-SHO: n=23,521) and a 35% reduction in burn visits (SHO: n=74 vs. non-SHO: n=114) was found during SHO	The authors assessed impact of the Stay at Home (SHO) executive order during the COVID-19 pandemic on burn visits to a pediatric burn center in Michigan, United States. Burn visits contributed to a higher proportion of total	Sethuraman U, Stankovic C, Singer A, et al. Burn visits to a pediatric burn center during the COVID-19 pandemic and 'Stay at home' period. <i>Burns.</i> 2021;47(2):491-492. doi:10.1016/j.burns.2020.08.004.

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					<p>period. However, burn visits contributed to a higher proportion of total ED visits during SHO compared to non-SHO period (0.94% vs. 0.48%, 95% CI: 0.2 to 0.7). This increase might have been secondary to closure of most pediatric offices for direct in-person visits resulting in children presenting to the ED for even minor burns. No difference was found in the mean age between the 2 study periods (5.3 ± 4.8 years vs. 4.3 ± 4.2 years; difference: 1, 95% CI: 0.3 to -2.3). The proportion of house fires was significantly higher (16.2% vs. 3.5%, 95% CI: 2.9 to 19.9) during SHO compared to the non-SHO period. The severity of burns was higher during the lockdown as evidenced by an increase in burn alerts (14.8% vs. 2.6%, 95% CI: 0.74 to 17.33), total body surface area burned (2 ± 3.7% vs. 3.5 ± 5.5%, 95% CI: 0.13 to 2.86), proportion of children with >5% TBSA (4.3% vs. 13%, 95% CI: 1.09 to 19.11) and ICU admissions (9.4% vs. 0.9%, 95% CI: 2.38 to 17.44). Since the majority of pediatric burns occur in the home environment, it the authors recommend reviewing fire safety plans with families before any future lockdowns.</p>	<p>emergency department visits during SHO compared to non-SHO period. House fires proportion was significantly higher during SHO compared to the non-SHO period.</p>	
<p>Children, youth, movement, outdoor activity, neighborhood, Canada</p>	29-Aug-20	<p>Healthy movement behaviors in children and youth during the COVID-19 pandemic: Exploring the role of the neighborhood environment</p>	Health & Place	Original Article	<p>This paper explores patterns of physical activity, sedentary and sleep behaviors among Canadian children (5–11 years old) and youth (12–17 years old) during the COVID-19 pandemic, and examines how these changes are associated with the built environment near residential locations. The authors used secondary data from a recent survey designed and conducted in April 2020 (n=1472). A majority of children and youth surveyed (56%) demonstrated patterns of decreased outdoor activities and increased screen time and other sedentary activities during the COVID-19 pandemic. Cluster analysis identified two groups who were primarily distinguished by the changes in outdoor activities. Compliance with 24-hour movement guidelines was low among both groups. For children, living in houses (vs apartments) was correlated with increased outdoor activities; proximity to major roads was a barrier. For youth, low dwelling density, and access to parks in high-density neighborhoods, increased the odds of increased outdoor activities during the pandemic. These findings can inform future urban and health crisis planning practices by providing new insights into the desirable public health messaging and characteristics of healthy and resilient communities.</p>	<p>This secondary analysis of survey data showed the majority of Canadian children and youth demonstrated patterns of decreased outdoor activities during the COVID-19 pandemic, with increased screen time and other sedentary behaviors. The authors also examine the effect of 7 built environment variables.</p>	<p>Mitra R, Moore SA, Gillespie M, et al. Healthy movement behaviours in children and youth during the COVID-19 pandemic: Exploring the role of the neighbourhood environment [published online, 2020 Aug 29]. Health Place. 2020;65:102418. doi:10.1016/j.healthplace.2020.102418</p>
<p>Psychological impacts, parents, mental disabilities, children, lockdown</p>	29-Aug-20	<p>The urgency of mitigating the psychological impacts of COVID-19 lockdowns on parents of</p>	Asian Journal of Psychiatry	Letter to the Editor	<p>The difficulty of raising a child with a mental disability demands that aspects of caretaking be delegated to external agencies to reach an optimal compensation between personal well-being of the parents and nurturement of the child. Abrupt lockdown restrictions due to COVID-19 in many countries have caused local governing agencies to be ill-prepared in providing services for parents of mentally disabled children. The additional workload of</p>	<p>The authors describe the mental health impacts on parents of mentally disabled children from closures due to the COVID-19 pandemic. The authors provide recommendations</p>	<p>Ghafoor A, Hussain KA, Sawal I. The urgency of mitigating the psychological impacts of COVID-19 lockdowns on parents of mentally disabled children [published online 2020 Aug 29].</p>

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		mentally disabled children			raising children with mental disabilities has led to many parents complaining about feelings of loneliness and a sense of helplessness with their child's disease. The authors emphasize that immigrant, minority, and unemployment status can further impact the mental health of parents. The authors provide recommendations for local governments to prioritize mentally disabled children as lockdown restrictions begin to lift, particularly in settings such as schools and local services. The authors argue that it is imperative for policy-makers and healthcare providers to realize and address the struggles of this unique group of people and to mitigate some of the additional stressors caused by lockdowns as they were disproportionately affected.	for local governments to prioritize mentally disabled children since their parents were disproportionately affected by lockdown restrictions.	Asian J Psychiatr. 2020. doi:10.1016/j.ajp.2020.102402
Cesarean delivery, cross-contamination, isolation OR, personal protective equipment (PPE), China.	29-Aug-20	Patients With COVID-19 Undergoing Cesarean Deliveries: Adapting the OR Suite and Perioperative Care to Prevent Transmission	Association of Perioperative Registered Nurses Journal	Original Article	This article details how one hospital in Wuhan, China modified cesarean delivery practices for COVID-19 positive patients, to reduce transmission risk. This facility converted two existing operating rooms (ORs) into isolation ORs with distinct clean, semi-contaminated, and contaminated routes for personnel and waste. Each OR was kept fully stocked with supplies, to minimize opening doors while in use. The isolation ORs used independent electric suction devices that could be disinfected. Personnel were trained on PPE use and isolation techniques. All COVID-19 positive patients wore N95 respirators during transport and surgery, and were transported via designated routes. If intubation was required, a filter was attached to avoid ventilator contamination. This hospital separated infants from mothers for 14 days after delivery. After surgery, instruments, OR surfaces, and the outside of bags containing medical waste were disinfected with chlorine solution. The OR surfaces were then wiped off with water, and ultraviolet germicidal irradiation was used in the rooms between procedures. Finally, the article shares the cases of 6 COVID-19 positive patients who had cesarean deliveries in this unit from 30 January to 6 February 2020. Three of the patients were symptomatic. Following the above procedures, all staff and infants were asymptomatic and had negative COVID-19 testing after the deliveries.	This article details how one hospital in Wuhan, China modified cesarean delivery practices for COVID-19 positive patients, to reduce transmission risk. The authors include the cases of six patients with COVID-19 infection in this setting, who underwent cesarean deliveries with positive outcomes.	Zou K, Chen H, Liu Y. Patients With COVID-19 Undergoing Cesarean Deliveries: Adapting the OR Suite and Perioperative Care to Prevent Transmission. AORN J. 2020;112(3):217-224. doi:10.1002/aorn.13145
Stress, anxiety, pregnancy, pregnant women, health factors, United States	29-Aug-20	Pandemic-related pregnancy stress and anxiety among women pregnant during the coronavirus disease 2019 pandemic	American Journal of Obstetrics & Gynecology	Original Article	The authors conducted a study to examine the extent to which pandemic-related stress predicts heightened anxiety in women pregnant during this crisis. The authors recruited via social media 788 pregnant women from the USA to complete an online questionnaire that assessed COVID-19-related concerns and anxiety. A total of 166 women (21.1%) reported no to minimal anxiety symptoms, 280 (35.6%) reported mild anxiety symptoms, 170 (21.6%) reported moderate anxiety symptoms, and 171 (21.7%) reported severe anxiety symptoms. Abuse history, high-	The authors determined that stress related to preparation for birth during the pandemic and worries about COVID-19 infection can elevate women's risk of experiencing moderate or	Preis H, Mahaffey B, Heiselman C, Lobel M. Pandemic-related pregnancy stress and anxiety among women pregnant during the coronavirus disease 2019 pandemic. Am J Obstet Gynecol MFM. 2020. doi:10.1016/j.ajogmf.2020.100155

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					risk pregnancy, preparedness stress, and perinatal infection stress all independently predicted greater likelihood of moderate or severe anxiety. Pregnant women during the COVID-19 pandemic experienced substantial anxiety as indicated by the high prevalence of mild, moderate, and severe anxiety in this sample. Stress related to preparation for birth and worries about COVID-19 infection to self and the infant can elevate women's risk of experiencing moderate or severe anxiety over and above sociodemographic, obstetrical, and other health relevant factors.	severe anxiety over other health relevant factors.	
Pediatric, hematology, oncology, ALL incidence	29-Aug-20	COVID-19 and childhood acute lymphoblastic leukemia	Pediatric Blood & Cancer	Letter to the Editor	In this letter, the author responds to comments made by Taub et al. (2020) about the impact of the SARS-CoV-2 on the incidence of childhood acute lymphoblastic leukemia (ALL). He discusses two contrasting predictions about the incidence of ALL during the crisis. First, widespread exposure of children to SARS-CoV-2 could provide the crucial second hit that promotes clonal evolution and clinical emergence of ALL. Prior observations with other respiratory virus epidemics or pandemics support this argument. Second, and in contrast, the widespread closure of nurseries and schools in addition to social distancing may decrease exposure of young children in the most vulnerable age group (2-5 years) to the common but unidentified infections believed to trigger ALL in susceptible individuals. Therefore, a reduction in incidence of ALL would be expected to follow. The author then describes a strategy to test these two scenarios. He urges for expansion of such studies and inclusion of international collaboration.	The author describes two possible scenarios for the incidence of pediatric acute lymphoblastic leukemia (ALL) during the COVID-19 pandemic. He puts forth a call to action to study these two possibilities.	Greaves M. COVID-19 and childhood acute lymphoblastic leukemia [published online, 2020 Aug 29]. <i>Pediatr Blood Cancer</i> . doi:10.1002/pbc.28481
Pregnancy, critical care in pregnancy, critical care obstetrics, infectious disease in pregnancy, management	29-Aug-20	From the trenches: inpatient management of coronavirus disease 2019 in pregnancy	American Journal of Obstetrics & Gynecology MFM	Original Article	These authors offer a guide to inpatient management of pregnant patients with COVID-19. They recommend that COVID-19 testing be performed as RT-PCR testing from nasopharyngeal swabs. They encourage universal testing for pregnant patients upon hospital admission; if this is not feasible, testing may be based on symptoms or epidemiologic risk factors. Hospitalization should be considered for pregnant women with COVID-19 and severe symptoms or comorbidities. These patients should have basic lab and imaging tests upon admission, and contact and droplet precautions should be used. Current COVID-19 care focuses on IPC, but medications such as hydroxychloroquine may be considered, depending on institutional guidelines and infectious disease recommendations. Steroids and antibiotics are usually not indicated in these patients, but use should be individualized. Anticoagulation therapy may be helpful, based on clinical circumstances. The authors state that COVID-19 infection alone is not an indication for delivery. In preterm patients with severe illness, a multidisciplinary health care team should weigh the risks and benefits of prolonging pregnancy. C-section may be necessary with severe COVID-19 illness, but intubation should be	These authors offer a detailed guide to inpatient management of pregnant patients with COVID-19. The article includes checklists of recommended testing and tips for managing these patients.	Vega M, Hughes F, Bernstein PS, et al. From the trenches: inpatient management of coronavirus disease 2019 in pregnancy. <i>Am J Obstet Gynecol MFM</i> . 2020;2(3):100154. doi:10.1016/j.ajogmf.2020.100154

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					avoided if possible, due to risk of aerosolization. If needed for any reason, intubation should be performed in a negative pressure room, and staff should wear N95 respirators. Electronic fetal monitoring may be useful in monitoring both fetal and maternal oxygenation. In the postpartum period, supportive care, medications, and anticoagulation should continue as necessary. The authors encourage breastfeeding, with appropriate infection prevention measures such as hand washing and masks. They recommend close virtual follow-up for postpartum COVID-19 positive patients, to monitor for worsening illness.		
Delays, obstetric delivery, Brazil	29-Aug-20	Effect of delayed obstetric labor care during the COVID-19 pandemic on perinatal outcomes [Free Access to Abstract Only]	International Journal of Gynaecology & Obstetrics	Brief Communication	Since the beginning of the COVID-19 quarantine in Brazil, pregnant women, particularly those that were recommended elective C-sections, were admitted to São Paulo Hospital in the second stage of labor and went on to have vaginal deliveries. The authors conducted a comparative cohort study between March 11–June 11, 2019 and March 11–June 11, 2020 in order to evaluate whether the quarantine period led to pregnant women with spontaneous labor arriving at the hospital in a more advanced phase of labor. In 2019, there were 143 deliveries, and 41 of which were initiated by spontaneous labor. In 2020, there were 122 deliveries, and 40 patients arrived at the hospital in labor. Delivery within 3 hours of hospital admission occurred in 26.8% (11/41) and 40% (16/40) of cases in 2019 and 2020, respectively. The authors argue that the study population's fear of exposure to SARS-CoV-2 resulted in patients undergoing initial labor at home until their concerns about exposure were outweighed by concerns regarding the wellbeing of the neonates.	During the COVID-19 quarantine period, there was an increased number of patients admitted in advanced stages of labor, resulting in higher rates of vaginal deliveries compared to the same period in 2019 in São Paulo, Brazil. The authors argue the results were largely due to the study population's fear of exposure to SARS-CoV-2.	Sun SY, Guazzelli CAF, de Moraes LR, et al. Effect of delayed obstetric labor care during the COVID-19 pandemic on perinatal outcomes [published online 2020 Aug 29]. Int J Gynaecol Obstet. 2020. doi:10.1002/ijgo.13357
Children, immunosuppression, Spain	29-Aug-20	Clinical outcome of SARS-CoV-2 infection in immunosuppressed children in Spain	European Journal of Pediatrics	Communication	Limited information is available regarding SARS-CoV-2 infections in children with underlying diseases. The authors conducted a retrospective study of children < 15 years old with primary or secondary immunosuppression infected with SARS-CoV-2 during March 2020. In the series, 8 immunocompromised patients with COVID-19 disease are reported and accounted for 15% of the positive cases detected in children at the reference hospital in Spain. The majority of patients had mild-moderate symptoms. There was a predominance of febrile syndrome, with mild radiological involvement and in some cases with mild respiratory distress that required oxygen therapy. The authors discuss possible treatments and options for hospitalization or outpatient follow-up. The authors concluded that monitoring of children with immunosuppression and COVID-19 disease can be performed as outpatients if close monitoring is possible. Hospitalization should be assessed when high fever, radiological involvement, and/or respiratory distress are present.	SARS-CoV-2 infection is usually mild in children; however, much is still unknown. The authors of this study report that the outcome of immunosuppressed children with COVID-19 is generally good, with a mild-to-moderate course.	Pérez-Martínez A, Guerra-García P, Melgosa M, et al. Clinical outcome of SARS-CoV-2 infection in immunosuppressed children in Spain [published online ahead of print, 2020 Aug 29]. Eur J Pediatr. 2020;10.1007/s00431-020-03793-3. doi:10.1007/s00431-020-03793-3

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anxiety; depression; parenting; autism; China	28-Aug-20	The efficacy of WeChat-based parenting training on the psychological well-being of mothers with autistic children during the COVID-19 pandemic: A quasi-experimental study	JMIR Mental Health	Original Research	This study evaluated the impact of a WeChat-based parenting training on anxiety, depression, parenting stress, and hope in mothers with children with autism, as well as the feasibility of the program during the COVID-19 pandemic in Fuzhou, China in January 2020. 125 mothers with preschool children with autism were assigned to the control group (n=60, mean age 32.57 years, SD 3.45 years), in which they received routine care, or the intervention group (n=65, mean age 32.89 years, SD 3.68 years), in which they received the 12-week WeChat-based parenting training plus routine care, according to their preferences. Anxiety, depression, parenting stress, hope, satisfaction, and adherence to the intervention were measured at three timepoints: baseline (T0), postintervention (T1), and a 20-week follow-up (T2). The results of the linear mixed model analysis showed statistically significant time interaction effects for the intervention on anxiety (P<0.001), depression (P<0.001), parenting stress (P<0.001), and hope (P<0.001). Of all mothers in the intervention group, 90.4% (48.8/54) were extremely satisfied with the WeChat-based parenting training. The authors conclude the WeChat-based parenting training is an acceptable and effective approach for reducing anxiety, depression, and parenting stress, as well as increasing hope in mothers with children with autism during the global COVID-19 pandemic.	This study evaluated the impact of WeChat-based parenting training on anxiety, depression, parenting stress, and hope in mothers with children with autism, as well as the feasibility of the program during the COVID-19 pandemic in Fuzhou, China. The results suggest the WeChat-based parenting training is an acceptable and effective approach for reducing anxiety, depression, and parenting stress, as well as increasing hope.	Liu G, Wang S, Liao J, et al. The Efficacy of WeChat-Based Parenting Training on the Psychological Well-being of Mothers With Children With Autism During the COVID-19 Pandemic: Quasi-Experimental Study. JMIR Ment Health. 2021;8(2):e23917. Published 2021 Feb 10. doi:10.2196/23917
BCG vaccine, SARS-CoV-2, cross reactant immunodominant antibodies	28-Aug-20	Biological Rationale for the Repurposing of BCG Vaccine Against SARS-CoV-2.	Journal of Proteome Research	Original Research	The authors present a two-part rationale for the role of Bacillus Calmette-Guerin (BCG) vaccine in mitigating SARS-CoV-2 infections during the COVID-19 pandemic in 2020. First, they present updated epidemiological data demonstrating that national BCG vaccines provide statistically significant protection to their citizens by decreasing SARS-CoV-2 infections, decreasing COVID-19 deaths, and decreasing the COVID-19 mortality rate compared to countries with no BCG or an interrupted BCG vaccine program. Secondly, using the Informational Spectrum Method (ISM) to analyze protein-protein interactions including electron-ion interaction potential (EIIP), the informational spectrum (IS), and the cross-spectrum (CS) between interacting proteins, they determined distinct BCG antigens that have a similar informational spectrum to proteins found on the S1 subunit of the spike region of SARS-CoV-2. With the understanding that non-homologous proteins with closely related informational spectra possess similar immune reactivity, the ISM analysis demonstrates that BCG antigens Rv0934, Rv3875, Rv3763, and Rv2997 may cross react with the S1 subunit of SARS-CoV-2 and induce specific adaptive immune responses. They suggest that this finding may help explain the biological basis for BCG-induced protection against SARS-CoV-2 and could also be	The authors present a two-part rationale for the role of the BCG vaccine in mitigating SARS-CoV2 infections using updated epidemiological data showing the benefit of national BCG vaccine programs as well as ISM analysis illuminating specific BCG antigens with informational spectra similarities to the S1 subunit of the spike protein of SARS-CoV-2.	Glisic S, Perovic VR, Sencanski M, Paessler S, Veljkovic V. Biological Rationale for the Repurposing of BCG Vaccine against SARS-CoV-2. J Proteome Res. 2020 Nov 6;19(11):4649-4654. doi: 10.1021/acs.jproteome.0c00410. Epub 2020 Aug 28. PMID: 32794723.

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Infant, diarrhea, gastroenteritis, vomiting, Iran	28-Aug-20	Diarrhea as a Presenting Symptom of Coronavirus Disease 2019 in Children	Advanced Biomedical Research	Case Report	used to help redesign the BCG vaccine to provide improved protection against the virus. The authors present the case of a 16-month-old girl with hemangio-endothelioma and congenital hypothyroidism, admitted to the Besat Hospital in Iran on 21 March, 2020 with vomiting, diarrhea, and lethargy, who was ultimately diagnosed with COVID-19. These initial presenting symptoms are uncommon in the absence of other common COVID-19 symptoms such as fever, cough, sore throat, sneezing, myalgia, and fatigue. The patient was being treated with levothyroxine (1.5 µg/kg) since birth and prednisolone (2.5 mg twice daily) since the last 2 months. After admission, postero-anterior chest radiography showed areas of lung inflammation indicating the presence of pneumonia and a subsequent chest CT scan revealed pleural effusion. A positive PCR result was obtained for nasopharyngeal swab. The patient spent 10 days in pediatric ICU and was administered hydroxychloroquine plus Kaletra (lopinavir and ritonavir) based on the Iranian protocol for COVID-19. Afterward, the patient was discharged with stable vital sign and well-being. Her 4 family members were evaluated and confirmed to be positive for SARS-CoV-2 via PCR, although all were asymptomatic. They were placed under home quarantine for 3 weeks and treated with hydroxychloroquine plus Kaletra. This case shows that the clinical manifestations of COVID-19 can be uncommon and misleading in children and can become severe in patients with underlying illnesses.	The authors present the case of a 16-month-old girl with hemangio-endothelioma and congenital hypothyroidism, who presented with vomiting, diarrhea, and lethargy and was ultimately diagnosed with COVID-19. This case shows that the clinical manifestations of COVID-19 can be uncommon and misleading in children and can become severe in patients with underlying illnesses.	Moradveisi B, Ataee P, Ghaffarieh A. Diarrhea as a Presenting Symptom of Coronavirus Disease 2019 in Children. Adv Biomed Res. 2020;9:35. doi: 10.4103/abr.abr_90_20.
PIMS-TS, MIS-C Kawasaki-like disease	28-Aug-20	Pediatric Inflammatory Multisystem Syndrome: Statement by the Pediatric Section of the European Society for Emergency Medicine and European Academy of Pediatrics	Frontiers in Pediatrics	Perspective Article	This statement, published by the Pediatric Section of the European Society for Emergency Medicine and the European Academy of Pediatrics, was written to provide an update to generalists and emergency specialists on the new emerging clinical condition named Pediatric Inflammatory Multisystem Syndrome Temporally Associated with SARS-CoV2 (PIMS-TS) in the UK and Multisystem Inflammatory Syndrome in Children (MIS-C) in the US. The authors present their recommendations on the clinical assessment and management of these patients and highlight useful resources. They note that children with PIMS-TS appear to respond well to treatment if recognized promptly with no delay in treatment, and most children will have a full and quick recovery. Therefore, the authors urge all primary and secondary care health care professionals to include the diagnosis of PIMS-TS in the differential diagnosis of children with persistent fever for more than five days. Furthermore, the authors recommend that clinicians document and share their patients' data using research registries to learn more about this condition.	The authors provide an update for health care professionals in primary or secondary care on the clinical assessment and management of children with Pediatric Inflammatory Multisystem Syndrome Temporally Associated with SARS-CoV-2 (PIMS-TS). They also stress the importance of early recognition and intervention to prevent further complications and promote a quick recovery.	Nijman RG, De Guchtenaere A, Koletzko B, et. al. Pediatric Inflammatory Multisystem Syndrome: Statement by the Pediatric Section of European Society for Emergency Medicine and European Academy of Pediatrics. Front. Pediatr. 8:490. 2020. doi: 10.3389/fped.2020.00490.

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Food and nutritional security, public policy, brazil	28-Aug-20	Covid-19 pandemic implications for food and nutrition security in Brazil	Ciência & Saúde Coletiva	Original Article	The authors argue that the risks to food insecurity in Brazil have been present since 2016 and are now being exacerbated by the COVID-19 epidemic. With the loss of social protection policies that impact income, poverty, and the food and nutrition security (FNS), the government was not able to reduce inequalities or address food and nutritional insecurity before the start of the COVID-19 pandemic. COVID-19 exacerbated the accumulating problems concerning the FNS of all, especially the most socially and economically vulnerable, signaling for a possible increase in hunger situations. The authors emphasize articulation of measures in the three governmental spheres (federal, municipal and state) to ensure access to adequate and healthy food and reduce the disease's adverse effects on the diet, health, and nutrition among the most vulnerable people. The authors recommend the strengthening of Food Acquisition and National School Food programs, food and nutrition education initiatives, and monitoring of nutritional status to mitigate the hunger of several vulnerable groups.	This paper addresses the repercussions of COVID-19 on the situation of food and nutrition security (FNS) and its interface with social protection policies in Brazil. The authors discuss the situation of social protection policies, the FNS dimensions, and possible strategies for FNS in Brazil.	Ribeiro-Silva RC, Pereira M, Campello T, et al. Covid-19 pandemic implications for food and nutrition security in Brazil. Implicações da pandemia COVID-19 para a segurança alimentar e nutricional no Brasil. Cien Saude Colet. 2020;25(9):3421-3430. doi:10.1590/1413-81232020259.22152020
Saudi Arabia, infanticide-suicide	28-Aug-20	The first COVID-19 infanticide-suicide case: Financial crisis and fear of COVID-19 infection are the causative factors	Asian Journal of Psychiatry	Letter to the Editor	The global suicide occurrences have increased because of COVID-19 crisis-related issues such as fear of infection, the financial crisis, being infected with COVID-19, loneliness, social boycott, etc. This letter details a case study in which a 30-years old Indian woman and her six-month-old baby were found dead in their apartment in Saudi Arabia. The mother of the child was a trained nurse in search of a job. The father, and husband to the woman, had recently been retrenched from his technician job at Madinah Airport, and was admitted to a hospital 4 days before the suicide event due to COVID-19. Police suspect that the child was killed before the woman committed suicide. The authors stress that as tensions continue to rise due to COVID-19, further child infanticide-suicide possibilities are possible among families with economically distressed and/or positive COVID-10 status. They suggest that proper financial support, providing authentic information of COVID-19, and mental health promotional strategies to decrease incidences of COVID-19 related infanticide-suicide cases.	The authors describe a case report detailing a infanticide-suicide case with causative factors rooted in economic consequences of COVID-19. The authors stress that it is imperative to provide proper support mechanisms to struggling families in order to reduce the risk of further infanticide-suicide events.	Mamun MA, Bhuiyan, A. K. M. Israfil, Manzar MD. The first COVID-19 infanticide-suicide case: Financial crisis and fear of COVID-19 infection are the causative factors. Asian Journal of Psychiatry. 2020; doi: https://doi.org/10.1016/j.ajp.2020.102365.
Egypt, clinical management, guidance, testing, diagnosis, breastfeeding, severity, abnormalities, treatment, children	28-Aug-20	Practical approach to COVID-19: an Egyptian pediatric consensus	Egyptian Pediatric Association Gazette	Review	Pediatric pulmonologists and infectious disease consultants in Egypt created guidance for clinical management of children during the COVID-19 pandemic based on an extensive literature review and discussions about updated international guidelines, data, and recommendations. The guidance includes precautions to minimize the risk of transmission of infection in the emergency room and hospital. Recommended treatment of suspected COVID-19 in the emergency room is based on an algorithm including clinical presentation, laboratory tests, radiological	Pediatric pulmonologists and infectious disease consultants in Egypt created this guidance for clinical management of children during the COVID-19 pandemic. The guidance addresses safety precautions, procedure for	Mostafa AS, Abdalbak, A, Fouda EM, et al. Practical approach to COVID-19: an Egyptian pediatric consensus. Egypt Pediatric Association Gaz. 2020;68(28). doi.org/10.1186/s43054-020-00037-9

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					findings, and disease severity. Recommended testing for suspected cases includes complete blood count and radiology, with a nasopharyngeal swab for PCR used to confirm diagnosis. To determine severity, serum ferritin, D dimer, lactate dehydrogenase, and C-reactive protein should be assessed. The guidance addresses chest radiological abnormalities for x-ray and CT and laboratory abnormalities. It also classifies high-risk conditions in children, including diabetes, kidney disease, asthma, serious heart conditions, liver disease, severe obesity, and immunocompromising conditions. Recommended treatments are detailed in a treatment algorithm depending on severity of COVID-19. The guidance states that all confirmed or suspected COVID-19 mothers with any symptoms who are breastfeeding or practicing skin-to-skin contact should follow standard infant feeding guidelines with appropriate precautions.	diagnosis and assessing severity, testing for suspected or confirmed cases, chest and laboratory abnormalities, high-risk children, treatment, and breastfeeding.	
Pediatric, cerebral palsy, orthopedic, hip surveillance, Canada	28-Aug-20	Suspension of Hip Surveillance for Children with Cerebral Palsy During the COVID-19 Outbreak: The Benefit of Hip Surveillance Does Not Outweigh the Risk of Infection	Indian Journal of Orthopaedics	Review Article	Children with cerebral palsy (CP) undergo routine hip surveillance, to identify and rectify hip displacement before it becomes painful. One hip surveillance program in British Columbia, Canada, suspended activities in March 2020 due to the COVID-19 pandemic. 234 children were due for surveillance from March through July 2020. The authors estimate that each hip surveillance staff member would have been in contact with at least 4500 individuals over 5 months, and could transmit the virus to these children and their caregivers. Additionally, children with underlying conditions may be more susceptible to COVID-19, and co-morbidities are common in children with CP. Furthermore, the authors state that a delay of a few months in receiving orthopedic care is unlikely to significantly change outcomes. The impact of suspending hip surveillance and other non-emergent pediatric procedures could impact millions of children, and thus contribute to slowing the spread of COVID-19. After restrictions are relaxed, hip surveillance priority should be given to severe cases, and infection prevention measures should be followed.	These authors state that, while the risk of COVID-19 is high, suspension of hip surveillance for children with cerebral palsy is appropriate. They recommend the suspension of all non-emergent surveillance for children with chronic health conditions during the COVID-19 pandemic.	Miller S, Bone J, Mulpuri K. Suspension of Hip Surveillance for Children with Cerebral Palsy During the COVID-19 Outbreak: The Benefit of Hip Surveillance Does Not Outweigh the Risk of Infection [published online ahead of print, 2020 Aug 28]. Indian J Orthop. 2020;1-3. doi:10.1007/s43465-020-00236-x
Orthopedic emergency, trauma demographics, North India	28-Aug-20	Changing Pattern of Orthopaedic Trauma Admissions During COVID-19 Pandemic: Experience at a Tertiary Trauma Centre in India	Indian Journal of Orthopaedics	Original Research	To see if there was significant change caused by COVID-19 in the pattern and management of trauma in Chandigarh, India, the authors evaluated data on injuries during the lockdown period and compared it with data from the previous year, along with available international data. The authors collected data from their tertiary care hospital for two periods: March 25th - May 3 rd 2020, signifying strict lockdown, and May 4th - 31st, signifying conditional relaxations. Significant reductions in caseloads were noted; open injuries were less, road accidents were infrequent, but cases due to falls in children and the elderly were only slightly reduced. Only 1 case of bilateral amputation turned out to be positive for COVID-19, with no infectious consequences to the	This study shows the COVID-19 pandemic has led to significant reductions in trauma caseload and a change in injury patterns in India. A reduction in overall cases of trauma due to falls was noted among children, although it was not statistically significant, implying that falls of	Dhillon MS, Kumar D, Saini UC, Bhayana H, Gopinathan NR, Aggarwal S. Changing Pattern of Orthopaedic Trauma Admissions During COVID-19 Pandemic: Experience at a Tertiary Trauma Centre in India [published online, 2020 Aug 28]. Indian J Orthop. 2020;1-6. doi:10.1007/s43465-020-00241-0

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					treating staff. The reduction in overall cases of trauma due to falls among children was not statistically significant, implying that falls of children continued to occur, despite the lockdown.	children continued to occur despite the lockdown.	
Pediatric, MIS-C, Kawasaki disease, Iran	28-Aug-20	Multisystem Inflammatory Syndrome Associated with SARS-CoV-2 Infection in 45 Children: A First Report from Iran	Epidemiology & Infection	Original Article	Although the number of MIS-C reports is increasing during the COVID-19 pandemic, there are still rare reports in Asia. The authors performed a retrospective study of all MIS-C patients (n=45) admitted to three pediatric hospitals in Iran between 7 March- 23 June 2020. The median age of children was 7 years (range: 10 months-17 years). The most common presenting symptoms include fever (91%), abdominal pain (58%), and mucocutaneous rash (53%) with a median duration of symptoms prior to presentation of 5 (IQR: 3-7) days. Overall, the majority of cases at admission had markedly elevated inflammatory markers such as erythrocyte sedimentation rate (ESR) (95.5%) and C-reactive protein (CRP) (97%). Further laboratory measures are also described in the article. Twenty-five patients (56%) presented with cardiac involvement. Acute renal failure was observed in 13 cases (29%). Pleural, ascitic, ileitis, and pericardial effusions were found in 18%, 11%, 4%, and 2% of cases, respectively. The authors conclude that in this study, there was a wide spectrum of clinical presentations associated with MIS-C, but many patients had evidence of inflammation and multi-organ involvement.	To the authors' knowledge, this is the largest case series of MIS-C in Iran. They identified abnormal values of CRP, ESR, D-dimer, ferritin, and albumin in many patients, indicative of inflammation.	Mamishi S, Movahedi Z, Mohammadi M, et al. Multisystem Inflammatory Syndrome Associated with SARS-CoV-2 Infection in 45 Children: A First Report from Iran [published online, 2020 Aug 28]. Epidemiol Infect. 2020;1-16. doi:10.1017/S095026882000196 X
Breast milk; congenital infection; neonates; pregnancy	28-Aug-20	Clinical Features and Outcome of SARS-CoV-2 Infection in Neonates: A Systematic Review	Journal of Tropical Pediatrics	Original Research	This systematic review aimed to synthesize the currently available literature on various modes of transmission (congenital, intrapartum, and postpartum), clinical features, and outcomes of SARS-CoV-2 infection in neonates. The authors conducted a comprehensive literature search using PubMed, EMBASE, and Web of Science until 9 June 2020 and included studies reporting neonatal outcomes of SARS-CoV-2 proven pregnancies or neonatal cases diagnosed with SARS-CoV-2 infection. 86 publications, consisting of 45 case series and 41 case reports were included in this review. The case series reported 1992 pregnant women, of which 1125 (56.5%) gave birth to 1141 neonates. Also, 281 (25%) neonates were preterm, and C-section (66%) was the preferred mode of delivery. The case reports described 43 mother-baby dyads, of which 16 were preterm, 9 were low birth weight, and 27 were born by C-section. Overall, 58 neonates were reported with SARS-CoV-2 infection (4 had a congenital infection), of which 29 (50%) were symptomatic (23 required ICU) with respiratory symptoms being the predominant manifestation (70%). Also, postpartum acquisition was the most common mode of infection in neonates, although a few cases of congenital infection were reported. No mortality was reported in SARS-CoV-2-positive neonates.	This review suggests that the risk of SARS-CoV-2 infections in neonates is extremely low, and unlike children, most COVID-positive neonates were symptomatic and required intensive care.	Dhir SK, Kumar J, Meena J, Kumar P. Clinical Features and Outcome of SARS-CoV-2 Infection in Neonates: A Systematic Review [published online, 2020 Aug 28]. J Trop Pediatr. 2020;fmaa059. doi:10.1093/tropej/fmaa059

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Pediatrics, natural airway sedation	28-Aug-20	Role of outpatient pediatric natural airway sedation during the COVID-19 pandemic	Pediatric Anesthesia	Correspondence	During the COVID-19 pandemic, hospitals have canceled elective surgeries and other procedures in children in order to re-allocate resources and decrease transmission of the SARS-CoV-2 virus. Nevertheless, essential sedation and anesthetic care for infants and children still need to be provided. Some anesthesiologists may advocate for securing the airway of COVID-19 patients with a cuffed endotracheal tube or laryngeal mask airway. However, outside of the COVID-19 pandemic, the vast majority of sedation for many diagnostic or therapeutic procedures that occur in a non-operative setting use natural airway sedation with a high success rate and low incidence of adverse effects. Since there is more aerosol particle generation when the airway is intubated, in an attempt to reduce aerosol particle generation during the COVID-19 pandemic, the authors suggest that natural airway sedation should be used in cases of imaging and other minor procedures. This technique provides additional advantages, such as a shorter duration of sedation, faster recovery, and prompt discharge of the patient. This may ultimately result in decreasing the risk of COVID-19 exposure for healthcare staff and lowering healthcare costs and resource utilization. The authors also advocate for telehealth prescreening evaluations as well as multidisciplinary discussion among the sedation team to ensure optimal patient selection and exclusion of high-risk patients.	Traditional intubation methods often cause more aerosol particle generation. Therefore, during the COVID-19 pandemic, the authors suggest the use of natural airway sedation without the use of airway instrumentation for medically-appropriate pediatric patients.	Damania RC, Stormorken A, Landrigan-Ossar M, Cravero JP, Kamat PP. Role of outpatient pediatric natural airway sedation during the COVID-19 pandemic. Paediatr Anaesth. 2020;30(7):841-842. doi:10.1111/pan.13884
Asymptomatic, SARS-CoV-2, thrombocytopenia , NL ratio, India	28-Aug-20	Asymptomatic Pediatric Covid-19 Presenting with Thrombocytopenia - A Rare Finding	Indian Journal of Pediatrics	Letter to the Editor	The authors report two pediatric SARS-CoV-2 cases diagnosed positive by RT-PCR admitted in a COVID-dedicated hospital in India. Both cases were asymptomatic on presentation. Case 1 was a 5-year-old male with 0.8 Neutrophil-Lymphocyte Ratio (NLR) and platelet count of 30,800/mcL (grade 3 thrombocytopenia) which increased to 90,000/mcL on day 10 of treatment. Case 2 was a 4-year-old female with 0.4 NLR and platelet count of 66,900/mcL (grade 2 thrombocytopenia) which increased to 145,00/mcL on day 4 of admission. Both the patients recovered by Day 14 and were discharged after their RT-PCR was negative for SARS-CoV-2. The NLR on discharge decreased to 0.4 for case 1 and did not change for case 2. Although majority of the pediatric COVID-19 cases are asymptomatic or mildly symptomatic, in incidentally detected thrombocytopenia, the authors determined that no intervention is needed apart from follow-up of the platelet counts. The authors suggest that their NLR needs to be monitored and can be a prognostic predictor before deciding patient discharge.	The authors report two pediatric asymptomatic SARS-CoV-2 cases with thrombocytopenia in India. The authors suggest that Neutrophil-Lymphocyte Ratio needs to be monitored and can be a prognostic predictor before deciding patient discharge.	Ambike D, Bijarniya K. Asymptomatic Pediatric Covid-19 Presenting with Thrombocytopenia - A Rare Finding [published online 2020 Aug 28]. Indian J Pediatr. 2020. doi:10.1007/s12098-020-03482-x

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Nutrition, eating disorders, post-traumatic stress disorder, childhood trauma, attachment style	28-Aug-20	The impact of COVID-19 epidemic on eating disorders: A logical observation or pre versus post psychopathological features in a sample of patients with eating disorders and a group of healthy controls	International Journal of Eating Disorders	Original Research	This longitudinal observational study sought to evaluate the impact of the COVID-19 epidemic on patients with eating disorders. 74 patients with Anorexia Nervosa or Bulimia Nervosa (BN) and 97 healthy controls in Florence, Italy, were assessed before and during lockdown and at the beginning of treatment. Participants were given questionnaires to assess psychopathology, childhood trauma, attachment style, and COVID-19-related post-traumatic symptoms. Both categories of patients experienced increased compensatory exercise during lockdown; BN patients also had exacerbated binge eating. Lockdown interfered with treatment outcomes, as previously improving BN patients showed a re-exacerbation of binge eating during lockdown. The authors stress that the lockdowns during the COVID-19 epidemic interfered with the recovery process of patients with eating disorders, in terms of relapses of pathological eating behaviors.	This study emphasizes the effects of COVID-19 lockdowns on anorexia nervosa and bulimia nervosa presentation and treatment. The authors stress that the lockdowns had negative effects on both the treatment and the recovery process of patients.	Castellini G, Cassioli E, Rossi E, et al. The impact of COVID-19 epidemic on eating disorders: A longitudinal observation of pre versus post psychopathological features in a sample of patients with eating disorders and a group of healthy controls [published online 2020 Aug 28]. Int J Eat Disord. 2020. doi:10.1002/eat.23368
Infectious diseases, pediatrics, coronavirus, South Korea	28-Aug-20	Symptomatic and Asymptomatic Viral Shedding in Pediatric Patients Infected With Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2): Under the Surface	JAMA Pediatrics	Editorial	This editorial discusses a report by Han et al., entitled "Clinical Characteristics and Viral RNA Detection in Children with Coronavirus Disease 2019 in the Republic of Korea." The study included 91 children with COVID-19 in South Korea. 20 (22%) of the children were asymptomatic, and 18 (20%) were pre-symptomatic. Symptomatic children had symptoms for a median of 3 (range 1-28) days prior to diagnosis. The study demonstrated that not all infected children have symptoms, and symptoms are not always recognized quickly. The duration of symptoms in symptomatic infected children varied, with the median being 11 days (range 1-36 days). In this study, virus was detectable for a mean of 17.6 (SD 6.7) days in all of the children. This editorial notes that a drawback of the study by Han and colleagues is that its COVID-19 testing was qualitative, and therefore did not enumerate viral load. Additionally, all samples tested were from respiratory sites. Extensive information could be gained from evaluating viral loads from different sources in children.	This editorial discusses a report by Han et al., entitled "Clinical Characteristics and Viral RNA Detection in Children with Coronavirus Disease 2019 in the Republic of Korea." It highlights that many COVID-19 positive children may be asymptomatic, and that any infected child could shed virus for long periods.	DeBiasi RL, Delaney M. Symptomatic and Asymptomatic Viral Shedding in Pediatric Patients Infected With Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2): Under the Surface. JAMA Pediatr. Published online August 28, 2020. doi:10.1001/jamapediatrics.2020.3996
Attention Deficit Hyperactivity Disorder, children, chronotype, home confinement, sleep problems, trauma reaction, Turkey	28-Aug-20	Chronotypes and trauma reactions in children with ADHD in home confinement of COVID-19: full mediation effect of sleep problems [Free Access to Abstract Only]	Chronobiology International	Original Article	The authors conducted a cross-sectional study of 76 children (8-12 years) in a psychiatry clinic in Turkey to investigate the role of chronotype preference with Attention Deficit Hyperactivity Disorder (ADHD) during the COVID-19 pandemic. Trauma symptoms were evaluated with the Children's Impact of Event Scale (CRIES-8); sleep habits were assessed using the Children's Sleep Habits Questionnaire (CSHQ); and chronotype was assessed using the Children's Chronotype Questionnaire (CCQ). Chronotype is an individual's preferred sleep-wake schedule and consists of three main types: eveningness type, morningness type, and intermediate type. Eveningness types exhibit a delayed-phase sleep schedule, both going to sleep and getting up later	The authors conducted a cross-sectional study of 76 children (8-12 years) with Attention Deficit Hyperactivity Disorder (ADHD) in Turkey and evaluated trauma, sleep habits, and chronotype. The authors found that chronotype, an individual's preferred sleep-wake schedule, plays an	Çetin FH, Uçar HN, Türkoğlu S, Kahraman EM, Kuz M, Güleç A. Chronotypes and trauma reactions in children with ADHD in home confinement of COVID-19: full mediation effect of sleep problems [published online 2020 Aug 28]. Chronobiol Int. 2020;1-8. doi:10.1080/07420528.2020.1785487

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					compared to morningness types There were significant differences in CRIES-8 and CSHQ scores between the eveningness type group and morningness and intermediate type groups. The CRIES-8 scores of children with ADHD were related to the CCQ and CSHQ scores and severity of ADHD symptoms. In mediation analyses, sleep problems were found to be the full mediating factor in the relationship between CRIES-8 scores and severity of ADHD symptoms and the relationship between CCQ scores and the severity of ADHD symptoms. The authors found that chronotype of children with ADHD plays an important role on the negative effects of home confinement of ADHD children during the COVID-19 outbreak.	important role on the negative effects of home confinement of children with ADHD during the COVID-19 outbreak.	
Viral RNA detection, children, Republic of Korea	28-Aug-20	Clinical Characteristics and Viral RNA Detection in Children With Coronavirus Disease 2019 in the Republic of Korea	JAMA Pediatrics	Original Article	This study analyzed the full clinical course and duration of SARS-CoV-2 RNA detectability in children confirmed with COVID-19 in the Republic of Korea from February 18-March 31, 2020. A total of 91 children with COVID-19 were included (median [range] age, 11 [0-18] years). Twenty children (22%) were asymptomatic during the entire observation period. Among 71 symptomatic cases, 47 children (66%) had unrecognized symptoms before diagnosis, 18 (25%) developed symptoms after diagnosis, and only 6 (9%) were diagnosed at the time of symptom onset. Twenty-two children (24%) had lower respiratory tract infections. The mean (SD) duration of the presence of SARS-CoV-2 RNA in upper respiratory samples was 17.6 (6.7) days. Virus RNA was detected for a mean (SD) of 14.1 (7.7) days in asymptomatic individuals. There was no difference in the duration of virus RNA detection between children with upper respiratory tract infections and lower respiratory tract infections (mean [SD], 18.7 [5.8] days vs 19.9 [5.6] days; P = 0.54). In this case series study, inapparent infections in children may have been associated with silent COVID-19 transmission in the community.	The authors conducted a longitudinal case series of children under 19 years with COVID-19 in the Republic of Korea. This is the first study to analyze virus RNA detection throughout course of infection in children with COVID-19. The authors found that SARS-CoV-2 RNA was detected for a mean of 17.6 days in children's respiratory tracts.	Han MS, Choi EH, Chang SH, et al. Clinical Characteristics and Viral RNA Detection in Children With Coronavirus Disease 2019 in the Republic of Korea [published online ahead of print, 2020 Aug 28]. JAMA Pediatr. 2020. doi:10.1001/jamapediatrics.2020.3988
Pathogenesis, reproduction number, transmission	28-Aug-20	A systematic review on recent trends in transmission, diagnosis, prevention and imaging features of COVID-19	Process Biochemistry	Review	The authors present the perspective of different modes of transmission of SARS-CoV-2, the diagnostic methods, and the advancement of the computerized tomography. Droplets, aerosol, and close contact are the significant factors to transfer the infection to the suspect. The authors predict the possible transmission of the virus through medical practices such as ophthalmology, dental, and endoscopy procedures. Concerning pediatric transmission, only a few child fatalities have been reported. The possibility of getting infected is minimal for the newborn. There has been no asymptomatic spread in children until now. The authors discuss the current diagnostic methods for COVID-19 including IgM and IgG and CT scan, RT-PCR, and immunochromatographic fluorescence assay in detail. The introduction of artificial intelligence and deep learning algorithm	The authors present perspectives on transmission of COVID-19, comparative analysis of CT and RT-PCR, molecular assays for COVID-19 diagnosis, and an outlook of clinical procedures and treatment.	Manigandan S, Wu MT, Ponnusamy VK, Raghavendra VB, Pugazhendhi A, Brindhadevi K. A systematic review on recent trends in transmission, diagnosis, prevention and imaging features of COVID-19 [published online, 2020 Aug 20]. Process Biochem. 2020;10.1016/j.procbio.2020.08.016

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					can diagnose COVID-19 precisely. However, the developments of a potential technology for the identification of the infection, such as a drone with thermal screening without human intervention, need to be encouraged according to the authors.		
Transmission, children, asymptomatic, healthcare worker, USA	28-Aug-20	SARS-CoV-2 Point Prevalence among Asymptomatic Hospitalized Children and Subsequent Healthcare Worker Evaluation	Journal of the Pediatric Infectious Diseases Society	Article	The risk of SARS-CoV-2 transmission from asymptomatic children remains unknown. This study used a point prevalence survey of patients at a pediatric hospital in Chicago (USA) to ascertain the prevalence of asymptomatic SARS-CoV-2 in hospitalized children, the frequency of secondary infection among healthcare workers (HCW), and the level of environmental contamination. All inpatient children were offered tests via nasopharyngeal (NP) swab (n=148), excluding children already confirmed positive or who had been tested in the previous 72 hours. Only 2 patients tested positive (1.4%). 68 HCWs with significant exposure to these patients were monitored for symptoms for 2 weeks and 28 were tested via NP swab. All HCW tests were negative and no untested HCWs developed symptoms, indicating no secondary transmission events. 17 swab samples of high-touch surfaces in the patients' rooms all tested negative for SARS-CoV-2. These results indicate low risk of secondary infection with universal masking for HCWs exposed to asymptomatic children with SARS-CoV-2.	A point prevalence survey of a pediatric hospital in Chicago (USA) showed 1.4% prevalence of asymptomatic SARS-CoV-2 infection among inpatient children, no evidence of environmental contamination, and no secondary infection events among healthcare workers exposed to asymptomatic children.	Patel AB, Clifford A, Creatin J, et al. SARS-CoV-2 Point Prevalence among Asymptomatic Hospitalized Children and Subsequent Healthcare Worker Evaluation [published online, 2020 Aug 28]. J Pediatric Infect Dis Soc. 2020;piaa102. doi:10.1093/jpids/piaa102
Vertical transmission, perinatal transmission, breast milk, breastfeeding	28-Aug-20	Transmission of SARS-CoV-2 through breast milk and breastfeeding: a living systematic review	Annals of the New York Academy of Sciences	Review	At present, there is limited information on potential transmission of SARS-CoV-2 from mother to child, particularly through breast milk. This living systematic review included 340 studies involving pregnant or lactating women with suspected, probable, or confirmed SARS-CoV-2 and their infants or young children (0–24 months). 37/340 studies included breast milk samples of 77 mothers breastfeeding their children; 19/77 children had confirmed SARS-CoV-2 based on RT-PCR assays: 14 neonates (28 days or younger) and 5 older infants. 9/68 analyzed breast milk samples from mothers with COVID-19 had detectable SARS-CoV-2 RNA; of the 6 infants exposed, 4 were positive and 2 were negative via RT-PCR assay. Even though viral RNA was detected in breast milk samples, there were no attempts to culture the SARS-CoV-2 from breast milk isolates and information on feeding practices, contact precautions, skin-to-skin contact, and room environment was not consistently provided. The authors offer data collection guidelines for investigators working with breastfeeding mothers and their children.	This living systematic review included 340 studies involving pregnant or lactating women with suspected, probable, or confirmed SARS-CoV-2 and their infants or young children (0–24 months). The authors conclude that there is no strong evidence for SARS-CoV-2 transmission via breast milk, given a lack of consistent data on feeding practices, contact precautions, skin-to-skin contact, and room environment. Data collection guidelines for future research are provided.	Centeno-Tablante E, Medina-Rivera M, Finkelstein JL, et al. Transmission of SARS-CoV-2 through breast milk and breastfeeding: a living systematic review [published online, 2020 Aug 28]. Ann N Y Acad Sci. 2020. doi:10.1111/nyas.14477

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
Neonatal intensive care unit, neonates, parents, visitation restrictions, COVID-19, support staff	28-Aug-20	Impact of restrictions on parental presence in neonatal intensive care units related to coronavirus disease 2019	Journal of Perinatology	Original Article	While neonatal COVID-19 disease appears relatively uncommon, the risk-benefit calculation for restricting neonatal ICU (NICU) access remains unclear. The authors sought to discover the relationship between the emergence of COVID-19 and NICU family presence as well as how NICU design affects these changes. The authors conducted a cross-section survey of 277 global NICUs from April 21-30, 2020 to determine hospital and NICU entry policies prior to and during the COVID-19 pandemic. Responding NICUs were largely in the United States (91%). NICU policies preserving 24/7 parental presence decreased (83 vs. 53%, $p < 0.001$) and full parental participation in rounds fell (71 vs. 32%, $p < 0.001$). Single-family room design NICUs best preserved 24/7 parental presence policies after the emergence of COVID-19 (single-family room 65%, hybrid-design 57%, open bay design 45%, $p = 0.018$). Additionally, 120 (43%) NICUs reported reductions in therapy services, lactation medicine, and/or social work support. These findings show that hospital restrictions have significantly affected parental presence for NICU admitted neonates.	The authors conducted a survey of global NICUs and report dramatic changes in hospital and NICU entry policies related to COVID-19. Hospital restrictions have significantly affected parental presence for NICU admitted neonates, although single-family room design may partially attenuate this effect.	Darcy Mahoney A, White RD, Velasquez A, Barrett TS, Clark RH, Ahmad KA. Impact of restrictions on parental presence in neonatal intensive care units related to coronavirus disease 2019. J Perinatol. 2020;40(Suppl 1):36-46. doi:10.1038/s41372-020-0753-7
Transmission, pediatric, appendicitis, caretakers, USA	28-Aug-20	Parental COVID-19 Testing of Hospitalized Children: Rethinking Infection Control in a Pandemic	Journal of the Pediatric Infectious Diseases Society	Letter to Editor	In this letter, the authors argued that Denina et al. (2020) did not stratify the risks of parental symptomatology before hospitalization when exploring COVID-19 transmission between hospitalized children and their caregivers. Therefore, they conducted a point-prevalence study to assess the rate of COVID-19 in hospitalized children and their asymptomatic caretakers and screened them at the entrance to the pediatric emergency department at a major community hospital in New York City, USA between May 28th and June 22nd, 2020. They tested 40 asymptomatic consecutive caretaker-child pairs (children median age 8 years, range 0-21 years, 50% male). Medical cases represented 65% (26/40) of hospitalized children, none of which tested positive for COVID-19. 35% (14/40) children had surgical emergencies requiring hospital admission. One child with acute appendicitis tested positive for SARS-CoV-2. All other pediatric surgical cases were SARS-CoV-2 RT-PCR negative. The caretaker-child SARS-CoV-2 RT-PCR test concordance was evident in 95% (38/40) of the cohort. The hospitalized children and caretakers had an asymptomatic COVID-19 rate of 2.5% (1/40) and 7.5% (3/40), respectively. All SARS-CoV-2 RT-PCR positive results in caretaker-child pairs (whether concordant or discordant) were in children with appendicitis. The findings described the high frequency of caretaker-child test concordance and low children to asymptomatic parental rates, which could reflect the strict social distancing regulations in New York City or caretaker's concern of children's exposure to COVID-19.	The authors found the high frequency of caretaker-child test concordance and low children to asymptomatic parental rates, which could reflect the strict social distancing regulations in New York City or caretaker's concern of children's exposure to COVID-19.	Hassoun A, Prasad N, Pugh S, et al. Parental COVID-19 Testing of Hospitalized Children: Rethinking Infection Control in a Pandemic [published online, 2020 Aug 28]. J Pediatric Infect Dis Soc. doi:10.1093/jpids/piaa103

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RT-PCR, children, adults, dynamics, risk ratio, France	28-Aug-20	CHANGES IN REVERSE TRANSCRIPTION POLYMERASE CHAIN REACTION- POSITIVE SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 RATES IN ADULTS AND CHILDREN ACCORDING TO THE EPIDEMIC STAGES	The Pediatric Infectious Disease Journal	Brief Report	This report aims to describe the trends of RT-PCR-positive SARS-CoV-2 rates in children compared to adults in France. The authors conducted a prospective multi-center study of 45 hospitals, pediatric wards, emergency units, and virology laboratories in France that performed RT-PCR for SARS-CoV-2 from March 2-April 26, 2020 (n = 52,588). Participants were stratified by age-group: <5 years, 5 to <10 years, 15 to <60 years, and 60+ years. Among the 52,588 RT-PCR tests conducted, 6490(12.3%) were in children and 46,098(87.7%) were in adults. The findings suggest that the risk of a positive RT-PCR test comparing adults to children was 3.5 for the entire study period (95% CI:3.2-3.9). Despite a variable risk, the dynamics of infection remained similar between both children and adults. Risk ratios of positive RT-PCR tests observed in children from the start of the epidemic period was 7.1 (95% CI: 4.3-11.7) and reduced to 3-4.9 during the following weeks. The authors conclude by suggesting active surveillance of RT-PCR-positive test results in both adults and children could play a critical role in detecting any re-emergence of the disease.	The authors compare the dynamics of COVID-19 infection and RT-PCR tests. The risk ratio of a positive RT-PCR SARS-CoV-2 test is 3.5 comparing adults to children (95% CI:3.2-3.9) during the epidemic period in France. However, children and adults have similar infection dynamics of COVID-19.	Levy C, Basmaci R, Bensaïd P, et al. CHANGES IN REVERSE TRANSCRIPTION POLYMERASE CHAIN REACTION-POSITIVE SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 RATES IN ADULTS AND CHILDREN ACCORDING TO THE EPIDEMIC STAGES [published online ahead of print, 2020 Aug 28]. <i>Pediatr Infect Dis J</i> . 2020; doi:10.1097/INF.0000000000002861
Single-cell RNA expression profiling of SARS-CoV-2-related ACE2 and TMPRSS2 in human trophoblast and placenta	27-Aug-20	Single-cell RNA expression profiling of SARS-CoV-2-related ACE2 and TMPRSS2 in human trophoblast and placenta	Ultrasound in Obstetrics and Gynecology	Original Research	This study examined the characteristics and distribution of SARS-CoV-2 target cells in the human trophoblast (TE) and placenta through evaluation of the expression ACE2 and TMPRSS2. Transcriptomic analysis was conducted of 4,198 early TE cells, 1260 first-trimester placental cells, and 189 extra-villous trophoblast cells (EVTs) from 24-week placentae. To confirm the bioinformatic results, the authors then performed immunohistochemical staining of 3 1st-trimester, 3 2nd-trimester and 3 3rd-trimester placentae from 9 women recruited prospectively in Beijing, China [ages not provided]. In the human TE, 54.4% of TE1 cells, 9.0% of cytotrophoblasts (CTBs), 3.2% of EVT cells and 29.5% of syncytio-trophoblasts (STBs) were ACE2-positive. In addition, 90.7% of TE1 cells, 31.5% of CTBs, 22.1% of EVT cells and 70.8% of STBs were TMPRSS2-positive. The ACE2 + TMPRSS2-positive TE1 cells were correlated with an increased capacity for viral invasion, epithelial-cell proliferation and cell adhesion. Expression of ACE2 and TMPRSS2 was observed on immunohistochemical staining in first-, second- and third-trimester placentae. The authors conclude that ACE2- and TMPRSS2-positive cells are present in the human TE and placenta in all three trimesters of pregnancy, which highlights the possibility of a transplacental approach for vertical transmission.	In this study of the expression of ACE2 and TMPRSS2 in human trophoblast and placenta, the authors found that ACE2 and TMPRSS2 are expressed in human trophoblast (TE) and placenta throughout pregnancy. In addition, ACE2 + TMPRSS2-positive early TE cells showed a strong association with increased capacity for viral invasion, epithelial-cell proliferation and cell-adhesion-molecule binding. This highlights the possibility of a transplacental approach for vertical transmission of SARS-CoV-2.	Cui D, Liu Y, Jiang X, et al. Single-cell RNA expression profiling of SARS-CoV-2-related ACE2 and TMPRSS2 in human trophoblast and placenta. <i>Ultrasound Obstet Gynecol</i> . 2021;57(2):248-256. doi:10.1002/uog.22186

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vertical transmission, transplacental transmission, electron microscopy, placenta, SARS-CoV-2	27-Aug-20	Confirmatory evidence of the visualization of severe acute respiratory coronavirus 2 invading the human placenta using electron microscopy	American Journal of Obstetrics & Gynecology	Letter to the Editor	In this letter to the editor, the authors provide a follow-up to their May 2020 article reporting on the use of electron microscopy to visualize the invasion of the human placenta by SARS-CoV-2. For context, they summarize additional evidence they have provided in a previous Letter to the Editor reply: (1) the extracellular structures that were visualized were identical to those seen within the cells, thus indicating that these were not clathrin-coated vesicles; (2) immunohistochemical analysis of the placental samples was positive for SARS-CoV-2 glycoprotein using a specific antibody in conjunction with positive and negative controls; (3) the virus was immunolocalized using immunogold electron microscopy; and (4) the virus was detected in the placenta using RT-PCR-specific primers. Furthermore, they add that fresh placental tissues were collected immediately after birth by their neonatal research team and provide additional information on the methods by which SARS-CoV-2 RNA was isolated and assayed. They cite subsequent reports that are consistent with their original findings, and emphasize that there is scientific and clinical evidence of placental invasion by SARS-CoV-2. They also cite evidence that when vertical transplacental transmission occurs, the viral load in the placenta is severalfold higher than in the other maternal and fetal compartments.	The authors provide a follow-up to their May 2020 article reporting on the use of electron microscopy to visualize the invasion of the human placenta by SARS-CoV-2, with additional information on their findings and methods. They also cite subsequent reports that are consistent with their findings, re-affirming that there is scientific and clinical evidence of placental invasion by SARS-CoV-2.	Algarroba GN, Hanna NN, Rekawek P, et al. Confirmatory evidence of the visualization of severe acute respiratory syndrome coronavirus 2 invading the human placenta using electron microscopy. Am J Obstet Gynecol. 2020;223(6):953-954. doi:10.1016/j.ajog.2020.08.106
Pregnancy, vertical transmission, neonatal, umbilical cord, antibodies	27-Aug-20	Vertical transmission of antibodies in infants born from mothers with positive serology to COVID-19 pneumonia	European Journal of Obstetrics, Gynecology, and Reproductive Biology	Letter to the Editor	This letter shares two cases of asymptomatic mothers who had serology positive for SARS-CoV-2 IgG, with umbilical cord and neonatal blood testing positive for SARS-CoV-2 IgG after delivery. The first patient tested positive for COVID-19 on a nasopharyngeal swab and serology was positive for IgG in May 2020. She underwent a repeat C-section, and serological testing on umbilical cord and neonatal peripheral blood were positive for SARS-CoV-2 IgG, while the infant's nasopharyngeal swab RT-PCR test was negative. The neonate was admitted to NICU for mild respiratory distress, but discharged after 10 days. The second mother had a nasopharyngeal swab negative for COVID-19 in June 2020, but serology was positive for IgG. This patient delivered vaginally, and testing on the umbilical cord, amniotic fluid, and infant's peripheral blood were all positive for SARS-CoV-2 IgG. The infant's nasopharyngeal swab tested negative. IgG is transferred across the placenta during pregnancy, but IgM is usually not. The authors mention other studies demonstrating SARS-CoV-2 IgM in newborns, suggesting that the infants had developed infection in utero, but further research is needed on this topic.	This letter shares two cases of asymptomatic mothers who had serology positive for SARS-CoV-2 IgG, with umbilical cord and neonatal blood testing positive for SARS-CoV-2 IgG after delivery. Both infants nasopharyngeal swab RT-PCR tests were negative.	Vendola N, Stampini V, Amadori R, Gerbino M, Curatolo A, Surico D. Vertical transmission of antibodies in infants born from mothers with positive serology to COVID-19 pneumonia [published online ahead of print, 2020 Aug 27]. Eur J Obstet Gynecol Reprod Biol. 2020;S0301-2115(20)30535-2. doi:10.1016/j.ejogrb.2020.08.023
Distress, emotional stability,	27-Aug-20	How Personality Relates to Distress in	International Journal of Environmental	Original Research	This study investigated the psychological distress of parents during the lockdown in Italy and identified contributing factors. An online survey was administered to 833 participants from April	The results of this study conducted in Italy showed a positive relationship	Mazza C, Ricci E, Marchetti D, et al. How Personality Relates to Distress in Parents during the

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hyperactivity–inattention, mental health, neuroticism, parenting, Italy		Parents during the Covid-19 Lockdown: The Mediating Role of Child's Emotional and Behavioral Difficulties and the Moderating Effect of Living with Other People	Research and Public Health		3rd – 15th 2020. Mediation and moderated mediation models were run to explore the association between parent neuroticism and parent distress, mediated by child hyperactivity-inattention and emotional symptoms, and considering the moderating effect of living only with children. For parents living only with children, high levels of psychological distress depended exclusively on their levels of neuroticism. For parents living with at least one other person in addition to children, distress levels were also mediated by child behavioral and emotional difficulties. Motherhood emerged as a significant factor contributing to distress. Parent psychological distress decreased with increased child age. Preventive measures should be primarily targeted to families with younger children, parents who are already known to present emotional instability, and parents of children who have received local mental health assistance for behavioral and/or emotional difficulties.	between parent neuroticism and parent distress during Italy's lockdown period, after controlling for parents' age, income, and the number of children. Psychological distress was greater for mothers, parents of younger children, and parents of children with behavioral/emotional difficulties.	Covid-19 Lockdown: The Mediating Role of Child's Emotional and Behavioral Difficulties and the Moderating Effect of Living with Other People. Int J Environ Res Public Health. 2020;17(17):E6236. Published 2020 Aug 27. doi:10.3390/ijerph17176236
Pregnancy, maternal health, lung ultrasound, radiology, screening	27-Aug-20	Lung Ultrasound Is Not a Useful Screening Tool for Severe Acute Respiratory Syndrome Coronavirus 2 in Pregnant Women: A Pilot Study [No Abstract and Article not available for free]	Journal of Ultrasound in Medicine	Letter to the Editor	Lung ultrasound (LUS) has been suggested as a safe and effective tool for lung imaging in patients with COVID-19, especially in pregnancy; however, the usefulness of LUS in screening for SARS-CoV-2 in pregnancy has not previously been studied. The authors conducted a prospective cohort pilot study on asymptomatic pregnant women undergoing screening for SARS-CoV-2 (n=75). Quantitative RT-PCR results were positive in 3 women (4%) and negative in 72 (96%). LUS findings were normal in all cases. No patients were symptomatic for COVID-19 at the time of screening or at follow-up. In conclusion, although LUS is likely to be useful in symptomatic pregnant women with COVID-19, in this pilot study, despite the relatively small study population, LUS did not seem to be useful in the screening for COVID-19 in pregnancy.	Lung ultrasound was not found to be effective at screening for SARS-CoV-2 infection in 75 asymptomatic pregnant women, three of whom (4%) were found to be positive for SARS-CoV-2 by RT-PCR.	Youssef A, Brunelli E, Azzarone C, et al. Lung Ultrasound Is Not a Useful Screening Tool for Severe Acute Respiratory Syndrome Coronavirus 2 in Pregnant Women: A Pilot Study [published online, 2020 Aug 27]. J Ultrasound Med. doi:10.1002/jum.15451
Neonate, horizontal transmission, vertical transmission, congenital malformation, USA	27-Aug-20	Neonates With Complex Cardiac Malformation and Congenital Diaphragmatic Hernia Born to SARS-CoV-2 Positive Women-A Single Center Experience	World Journal of Pediatric Congenital Heart Surgery	Case Series	The clinical course of neonates with complex congenital malformations exposed to maternal COVID-19 infection is unknown. The authors report the cases of seven neonates from a single academic medical center in New York City, USA with congenital heart and lung malformations born to women who tested positive for SARS-CoV-2 during pregnancy. Neonates born to mothers diagnosed with COVID-19 between March 16, 2020 and May 7, 2020 and admitted to the Infant Cardiac Unit were eligible for inclusion. Three mothers were asymptomatic during hospital course, three mothers experienced mild to moderate COVID-19 symptoms, and one mother developed symptoms after delivery. Six neonates had congenital heart disease, and one neonate had a congenital diaphragmatic hernia. Data about the neonates' clinical characteristics and disease course was abstracted from the medical record. The clinical course for all	The authors describe a case series of neonates with complex congenital heart or lung malformations born to women who tested positive for SARS-CoV-2 during pregnancy. No neonatal adverse outcomes were noted, and no evidence of vertical or horizontal transmission of SARS-CoV-2 was observed.	Goldshtrorn N, Vargas D, Vasquez A, et al. Neonates With Complex Cardiac Malformation and Congenital Diaphragmatic Hernia Born to SARS-CoV-2 Positive Women-A Single Center Experience [published online ahead of print, 2020 Aug 27]. World J Pediatr Congenit Heart Surg. 2020;2150135120950256. doi:10.1177/2150135120950256

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					seven neonates was as expected for the corresponding congenital lesion. None of the infants tested positive by nasopharyngeal test for SARS-CoV-2 at 24 hours of life or at multiple other points during their hospitalization.		
Adolescent, Nephrotic syndrome, Proteinuria	27-Aug-20	COVID-19 Associated with Onset Nephrotic Syndrome in a Pediatric Patient: Coincidence or Related Conditions?	Pediatric Nephrology	Brief Report	The authors describe a case of SARS-CoV-2 infection presenting with a complete picture of the onset of nephrotic syndrome along with respiratory symptoms in a pediatric patient. The patient is a 15-year-old boy admitted in April 2020 with fever, generalized edema, myalgias, and oliguria. He had no history of kidney disease and had normal urine tests shortly before being affected by COVID-19. However, in a matter of hours, he developed progressive dyspnea, was diagnosed with nephrotic syndrome, and tested positive for SARS-CoV-2 infection. Furthermore, his chest X-ray and CT scan showed bilateral pleural effusion and reticular interstitial opacity in the lungs. The patient was subsequently treated with chloroquine and azithromycin, and daily boluses of methylprednisolone. His respiratory syndrome and edema improved, and kidney biopsy will be undertaken when possible.	To the authors' knowledge, this is the first reported case of COVID-19 with the simultaneous onset of nephrotic syndrome and speculate that this could be either a coincidence or an unusual form of presentation of COVID-19. Therefore, pediatricians should be aware of this possibility when treating children and test them for proteinuria, serum proteins, and blood lipids to diagnose patients' nephrotic conditions.	Alvarado A, Franceschi G, Resplandor E, Sumba J, Orta N. COVID-19 associated with onset nephrotic syndrome in a pediatric patient: coincidence or related conditions? [published online, 2020 Aug 27]. <i>Pediatr Nephrol.</i> 2020;1-3. doi:10.1007/s00467-020-04724-y
Coagulopathy, Placental pathology, Pregnancy, fetal heart rate	27-Aug-20	COVID-19 During Pregnancy: Non-reassuring Fetal Heart Rate, Placental Pathology and Coagulopathy	Ultrasound in Obstetrics and Gynecology	Case Report	The authors present the case of a 27-year-old woman who presented to the obstetrical outpatient clinic at 31+4 weeks gestation with fever and respiratory symptoms. She tested positive for SARS-CoV-2 RNA by nasopharyngeal PCR test and developed coagulopathy in the absence of severe clinical symptoms. At 32+1 weeks gestation, an emergency cesarean was performed for non-reassuring fetal heart rate and oligohydramnios. The patient subsequently recovered and was discharged from the hospital two days postoperatively. Of note, the placenta showed increased perivillous fibrin deposition and intervillitis, and a swab of the fetal side of the placenta was positive for SARS-CoV-2 RNA by PCR. Moreover, placental infection with SARS-CoV-2 was demonstrated by placental immunostaining. Also, notably, the PCR test of the vaginal swab was positive for SARS-CoV-2 RNA, suggesting perinatal transmission. However, neonatal nasopharyngeal swabs for SARS-CoV-2 RNA on day four and seven were negative. Besides, the infant had an uneventful course and was discharged from the hospital after 31 days.	The authors suggest a relation between placental fibrin deposition and both chronic and acute intervillitis, non-reassuring fetal heart rate and coagulopathy in pregnant women with COVID-19.	Mongula JE, Frenken MWE, van Lijnschoten G, et al. COVID-19 during pregnancy: non-reassuring fetal heart rate, placental pathology and coagulopathy [published online, 2020 Aug 27]. <i>Ultrasound Obstet Gynecol.</i> 2020;10.1002/uog.22189.
Children, nasopharyngeal swabs, radiology, 3D, Texas, USA	27-Aug-20	Design of 3D-Printed Nasopharyngeal Swabs for Children is	American Journal of Neuroradiology	Research Article	The authors describe a novel use of maxillofacial CT scans to aid in designing pediatric nasopharyngeal (NP) swabs for COVID-19 testing because adult 3D-printed NP swabs are too inflexible and too large for safe pediatric use. Maxillofacial CT datasets of 5 patients, 11 to 34 months of age and unremarkable for	The authors note that swabs for COVID-19 testing in children need to be smaller and more flexible to navigate	Starosolski Z, Admane P, Dunn J, Kaziny B, Huisman TAGM, Annapragada A. Design of 3D-Printed Nasopharyngeal Swabs for Children is Enabled by

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		Enabled by Radiologic Imaging			pathologies involving the maxillofacial region, were randomly selected from the Texas Children's Hospital database (USA). Examination of the maxillofacial CT scans of the pediatric patients suggested that primary deflection of the swab in the sagittal plane would be sufficient to navigate from the external nares to the posterior nasopharynx. Therefore, the authors designed elliptical cross-section swabs (Design ES) and verified that sagittal shaft deflection was adequate. The authors chose navigation time and a qualitative assessment of resistance as measures of patient discomfort. They then made 3D prints of the NP passage and physically tested the ability of individual swab prototypes to navigate the passage. Five swab designs were tested (two commercial mini-swabs and three in-house-printed), and Design ES was ultimately chosen as the preferred design for clinical testing based on the shortest navigation time and the lowest resistance scores. Of note, at the time of this article, the pediatric swabs printed using Design ES have now been used in >1000 patients with no reported problems.	delicate pediatric nasopharyngeal cavities. Therefore, the authors suggest that maxillofacial CT scans may be helpful in designing 3D-printed nasopharyngeal swabs for use in infants and young children.	Radiologic Imaging [published online, 2020 Aug 27]. AJNR Am J Neuroradiol. 2020;10.3174/ajnr.A6794.
Burns unit, Cesarean section, Infection control, Women's health, Jordan	27-Aug-20	Preparing the Burns Unit to Accommodate Vaginal Delivery and Cesarean Section for Pregnant Women with COVID-19: A Successful Experience from Jordan	Advances in Therapy	Commentary	Health facilities aim to prevent cross-infection between COVID-19 positive patients, negative patients and staff. Additionally, surgical patients with COVID-19 (including pregnant women) need close monitoring, since they have a higher mortality rate. Personal contact and transport for COVID-19 positive patients should be minimized. A hospital in Jordan transitioned its burns unit to become a "closed circuit" unit for COVID-19 positive pregnant women and surgical patients. The unit's ten negative pressure rooms and operating room were equipped with monitoring and ventilation capabilities, as well as obstetric supplies. All entrances except one were locked. After completion of shifts, staff stayed in an isolated facility for 14 days, and were offered COVID-19 testing at the end of isolation. The authors specifically reviewed the cases of two pregnant women who were admitted with positive COVID-19 tests in pregnancy, and had uncomplicated cesarean deliveries in the unit. The neonates were isolated in separate rooms, and had negative COVID-19 tests. The authors conclude that health facilities need to use their resources to control cross-infection from COVID-19.	This article discusses a hospital in Jordan that transitioned its burns unit to become a "closed circuit" unit for COVID-19 positive pregnant women and surgical patients, with favorable results.	Altal O, Bani Hani D, Aleshawi A, Alhowary AA, Obeidat B, Bani-Ata M. Preparing the Burns Unit to Accommodate Vaginal Delivery and Cesarean Section for Pregnant Women with COVID-19: A Successful Experience from Jordan [published online ahead of print, 2020 Aug 27]. Adv Ther. 2020;1-5. doi:10.1007/s12325-020-01457-0
Hyperinflammatory response, Kawasaki disease, pediatrics	27-Aug-20	Kawasaki disease epidemic: pitfalls	Italian Journal of Pediatrics	Commentary	Recent reports have described a new type of hyperinflammatory response following exposure to SARS-CoV-2 in the pediatric population. Some of the clinical features are attributable to Kawasaki disease (KD). In this commentary, the authors discuss the possible association between SARS-CoV-2 and KD. Although little is known about the etiology of KD, the most accepted hypothesis is that of a probable viral origin. Therefore, in genetically predisposed children, SARS-CoV-2 could trigger an	The authors of this commentary emphasize the importance of avoiding diagnostic pitfalls when children present with symptoms compatible with Kawasaki disease during the COVID-19 pandemic	Gallizzi R, Corsello G, Pajno GB. Kawasaki disease epidemic: pitfalls. Ital J Pediatr. 2020;46(1):121. Published 2020 Aug 27. doi:10.1186/s13052-020-00887-4

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					exaggerated inflammatory response clinically similar to KD. The authors discuss a cluster of 8 children in the UK who were diagnosed with hyperinflammatory shock syndrome. This clinical manifestation could represent a new phenomenon that affects previously asymptomatic children with SARS-CoV-2 infection, and manifests itself as hyperinflammatory multi-organ syndrome similar to shock syndrome in KD. Furthermore, both SARS-CoV-2 and KD lead to high levels of inflammatory cytokines and activated macrophages. Therefore, for clinicians to avoid diagnostic and therapeutic pitfalls, it is necessary to exclude SARS-CoV-2 infection through nasopharyngeal swab or serological testing in children with symptoms of KD.	They recommend that clinicians exclude SARS-CoV-2 infection through nasopharyngeal swab or serological testing within this pediatric population.	
Placenta, pregnancy, severe acute respiratory syndrome coronavirus 2	27-Aug-20	Placental transfer and safety in pregnancy of medications under investigation to treat coronavirus disease 2019	American Journal of Obstetrics & Gynecology MFM	Review Article	This literature review examines the antenatal toxicity profiles and placental transfer of medications being considered for COVID-19 treatment. Since many proposed COVID-19 drugs have been previously used for other indications, the authors reviewed 502 clinical studies of possible COVID-19 treatments from 1 March to 30 May 2020, and compared this information to pre-existing data on the use of these medications in pregnancy. The use of repurposed medications in the setting of COVID-19 may change their safety profile. However, several treatments would be considered acceptable in pregnancy, including azithromycin, chloroquine and hydroxychloroquine, lopinavir/ritonavir, interferon, colchicine, oseltamivir, steroids, and some monoclonal antibodies. Drugs that are strictly contra-indicated in pregnancy include thalidomide and renin-angiotensin system modifiers. Remdesivir, umifenovir, favipiravir, interleukin 6 inhibitors, and many other treatments have insufficient data to recommend their use in pregnancy. The authors state that including pregnant women in clinical trials is essential to developing safe and effective treatments for this population.	This literature review examines the antenatal toxicity profiles and placental transfer of medications being considered for COVID-19 treatment. Since many proposed COVID-19 drugs have been previously used for other indications, information exists on which treatment options may be acceptable for pregnant patients.	Louchet M, Sibide J, Peytavin G, Picone O, Tréluyer JM, Mandelbrot L. Placental transfer and safety in pregnancy of medications under investigation to treat coronavirus disease 2019. Am J Obstet Gynecol MFM. 2020;2(3):100159. doi:10.1016/j.ajogmf.2020.100159
WHO, vaccines, pregnancy, vaccine trials, prioritization	27-Aug-20	COVID-19 vaccines and neglected pregnancy	The Lancet	Correspondence	The authors discuss the WHO strategic framework for the equitable allocation of resources including vaccines during the COVID-19 pandemic. The framework suggests healthcare workers, individuals > 65-years-old, and those with other underlying conditions be prioritized for vaccination. Current trials for a COVID-19 vaccine have explored the use of a non-replicating, adenovirus-vectored vaccine that has shown sustained T-cell and neutralizing antibody responses in healthy adults who were not pregnant. However, the authors highlight the historic exclusion of pregnant women from vaccine trials. Given the consistent observations of increased risks of adverse outcomes of COVID-19 among pregnant women, the authors stress the importance of prioritizing this population for vaccination. Further, research has supported evidence that the	The authors suggest that pregnant women, given their increased risk of adverse reactions of COVID-19, should be included in phase 3 vaccine trials and be prioritized for vaccination.	Dashraath P, Nielsen-Saines K, Madhi SA, et al. COVID-19 vaccines and neglected pregnancy [available online, 2020 Aug 27]. The Lancet. 2020 doi: 10.1016/S0140-6736(20)31822-5

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					non-replicating vaccine platform could deliver proteins to the mother to induce an immune response without harming the fetus. The authors conclude by suggesting that pregnant women should be included in phase 3 vaccine trials of adenovirus-vectored vaccines, which should be coupled with provisions to increase surveillance for maternal and fetal safety.		
Children, MIS-C, young people, mortality, critical care, UK	27-Aug-20	Clinical Characteristics of Children and Young People Admitted to Hospital with Covid-19 in United Kingdom: Prospective Multicenter Observational Cohort Study	The British Medical Journal	Original Research	This prospective observational cohort study aimed to characterize the clinical features of children and young people admitted to hospitals in the UK with laboratory-confirmed SARS-CoV-2 infection, and explore factors associated with admission to critical care, mortality, and development of multisystem inflammatory syndrome (MIS-C). The authors included 651 children and young people aged < 19 years admitted to 138 hospitals with confirmed SARS-CoV-2 and enrolled into the International Severe Acute Respiratory and emergency Infections Consortium (ISARIC) WHO Clinical Characterization Protocol UK study between 17 January and 3 July 2020. The cohort included more male (56%) and more of white ethnicity (57%), with most (58%) children having no known comorbidities. 18% was admitted to critical care, which was associated with age < 1 month, age 10-14 years, and black ethnicity. Also, 11% met the WHO preliminary criteria for MIS-C, and those patients were older (median age 10.7 years), more likely to be of non-white ethnicity, and five times more likely to be admitted to critical care. Furthermore, children with MIS-C were more likely to present with fatigue, headache, myalgia, sore throat, lymphadenopathy, and a lower platelet count than children who did not have MIS-C. Of note, no deaths occurred in the MIS-C group.	Findings from this large prospective cohort study of children admitted to UK hospitals with laboratory-confirmed COVID-19 suggest that severe disease and death were rare. This study also provides evidence for additional clinical and laboratory characteristics that should help to refine the WHO case definition for MIS-C.	Swann O, Holden K, Turtle L et al. Clinical characteristics of children and young people admitted to hospital with covid-19 in United Kingdom: prospective multicentre observational cohort study. BMJ. 2020:m3249. doi:10.1136/bmj.m3249
Palliative care, tele visits, telemedicine, United States	27-Aug-20	Pediatric Palliative Care When COVID-19 Positive Adults Are Dying in a Children's Hospital	Pediatrics	Original Article	The Children's Hospital at Montefiore, a facility attached to an adult hospital, received an influx of adults who were critically ill with COVID-19. This article describes the expansion of the palliative care capabilities of this children's hospital in New York, USA to serve admitted COVID-19-positive adults. The standard hospital palliative care was revised to an inhouse consultation team, with all other team members working remotely through tele visits. Palliative care training was provided, addressing physical, emotional, social, and spiritual aspects of pain likely to be experienced by inpatient adults and their families who were not allowed to visit. For the palliative care team, a twice weekly virtual "connect" group that blended the medical debriefing model with a mental health processing group was developed. The authors suggest that this approach may be useful for other children's hospitals that may admit adult patients due to the COVID-19 pandemic.	The article describes the expansion of palliative care capabilities of a children's hospital in New York, USA by training frontline medical providers and enlarging our pediatric palliative care presence to serve each adult admitted with COVID-19.	Norris SE, Strumph K, Rahmani NE. Pediatric Palliative Care When COVID-19 Positive Adults Are Dying in a Children's Hospital [published online 2020 Aug 27]. Pediatrics. 2020. doi:10.1542/peds.2020-1570

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Beliefs, breastfeeding, pregnancy, sexual health	27-Aug-20	Beliefs related to sexual intimacy, pregnancy and breastfeeding in the public during COVID-19 era: a web-based survey from India [Free Access to Abstract Only]	Journal of Psychosomatic Obstetrics and Gynaecology	Letter	This study from India aimed to evaluate the beliefs held by the public regarding sexual health, pregnancy, and breastfeeding during the COVID-19 era. In this online cross-sectional survey a self-designed questionnaire was circulated by snowballing sampling. 1636 people responded: 63% of the participants mentioned that kissing could spread the virus. Unprotected sexual intercourse with the spouse can cause infection spread, was reported by 35.9%. 22% thought that unprotected sexual intercourse with unknown partners/persons could not spread the infection. 49.7% of the participants reported infection can be transmitted from mother to the child/fetus during the process of birth or pregnancy and 21.3% of the participants reported going ahead with the C-section if the mother is suspected or is confirmed to be infected. About one-fifth feared for risk of birth defects and abortion in case the mother is infected. 28% of the participants reported COVID-19 can be transmitted to newborns by breastfeeding. The study suggests that a significant proportion of people have misinformation about sexual intimacy, pregnancy, and breastfeeding in the ongoing pandemic which needs to be addressed.	The present study suggests that a significant proportion of people have misinformation about sexual intimacy, pregnancy, and breastfeeding in the ongoing pandemic. There is a need to escalate the awareness program in this regard.	Sahoo S, Pattnaik JI, Mehra A, Nehra R, Padhy SK, Grover S. Beliefs related to sexual intimacy, pregnancy and breastfeeding in the public during COVID-19 era: a web-based survey from India [published online, 2020 Aug 27]. J Psychosom Obstet Gynaecol. 2020;1-8. doi:10.1080/0167482X.2020.1807932
Italy, lockdown, pediatric emergency department, children	27-Aug-20	Three months of COVID-19 in a pediatric setting in the center of Milan	Pediatric Research	Review Article	During the peak of the COVID-19 epidemic in the Lombardy region of Italy, many units of the hospitals in Milan were rapidly converted into ICUs or semi-intensive units for adult patients, forcing the pediatric inpatient units to face daily reorganization and eventually causing restricted routine care pathways for chronic patients. The Pediatric Emergency Unit had to develop a system to effectively separate the children and caregivers infected with COVID-19 from those who were not affected in order to provide the best treatment for pediatric patients. The authors outline the system employed in their pediatric units in order to allow for the best treatment of both pediatric COVID patients, as well as chronic pediatric patients not diagnosed with COVID-19. The authors express the need for communication between adult and pediatric specialists, and the need for data sharing between specialists.	The authors review the framework for their different pediatric units in a major hospital in Milan, Italy in order to provide the best care for each type of pediatric patient. They discovered that having distinct units for COVID-patients and chronic pediatric patients was the best solution.	Agostoni C, Bertolozzi G, Cantoni B, et al. Three months of COVID-19 in a pediatric setting in the center of Milan [published online 2020 Aug 27]. Pediatr Res. 2020; doi:10.1038/s41390-020-01108-8
MIS-C, pediatrics, Santiago, Chile	27-Aug-20	Multisystem inflammatory syndrome in children (MIS-C): Report of the clinical and epidemiological characteristics of cases in Santiago de Chile during	International Journal of Infectious Diseases	Report	The authors' main objective was to describe the clinical and epidemiological characteristics of children hospitalized with MIS-C in Santiago, Chile. They conducted an observational study of children with MIS-C in three pediatric hospitals from May 1-June 24, 2020. 27 patients from 0-14 years old were admitted; 16 required intensive care admission with no deaths, and 20 had no-comorbidities. Gastro-intestinal disorders were the most frequently observed symptoms, and inflammatory markers were increased at admission. A recent SARS-CoV-2 infection was detected in 82% of cases. The severe group showed significantly	The authors describe the first series of 27 children with MIS-C in Santiago, Chile. These cases occurred during the autumn/winter season several weeks after the peak of SARS-CoV-2 cases.	Torres JP, Izquierdo G, Acuña M, et al. Multisystem inflammatory syndrome in children (MIS-C): Report of the clinical and epidemiological characteristics of cases in Santiago de Chile during the SARS-CoV-2 pandemic [published online ahead of print, 2020 Aug 27]. Int J Infect Dis.

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		the SARS-CoV-2 pandemic			lower hemoglobin and albumin, decreased platelet counts, and higher D-dimer during evaluation. Echocardiography showed abnormalities (myocardial, pericardial, or coronary) in 12 patients during their hospital stay. Anti-inflammatory treatment (immunoglobulin and/or corticosteroids) was prescribed in 24 patients. MIS-C appeared in clusters weeks after the peak of SARS-CoV-2 cases, especially in Santiago's most vulnerable areas. The authors emphasize the importance of early diagnosis and timely management of MIS-C during the pandemic.		2020;S1201-9712(20)30691-3. doi:10.1016/j.ijid.2020.08.062
Age-dependent immunological responses, Pediatric multi-system inflammatory disorder, MIS-C, Prothrombotic phenomena	27-Aug-20	Age-Related differences in immunological responses to SARS-CoV-2	The Journal of Allergy and Clinical Immunology: In Practice	Review	This review summarizes the age-dependent differences in COVID-19 phenotypes and postulates immunological mechanisms that may explain these observations. The prevalence of severe pediatric COVID-19 infection is only 5.9%, compared to 18.5% in adults. Infected pediatric patients may demonstrate minimal symptoms, while older adults are at greater risk of developing severe COVID-19. Case-fatality rates in Italy and China show an increasing trend with age—from 3.5-3.6% (age 60-69 years), 8.0-12.8% (age 70-79 years) to 14.8-20.2% (age 80 years and above). The authors pose several explanations for age-dependent COVID-19 differences: children may have higher titers of cross-neutralizing antibodies, fewer instances of antibody-dependent enhancement, protective age-dependent physiological differences in immunological responses, and fewer COVID-19-risk-associated comorbidities.	The authors suggest several explanations for age-dependent differences in COVID-19 disease phenotype, such as higher titers of cross-neutralizing antibodies and fewer instances of antibody-immunological differences in children, increased COVID-19-associated comorbidities in adults, and notable age-dependent physiological differences in immunological responses.	Yin Wong LS, Ling Loo EX, Hui Kang AY, et al. Age-Related differences in immunological responses to SARS-CoV-2. J Allergy Clin Immunol Pract. 2020;S2213-2198(20)30842-4. doi:10.1016/j.jaip.2020.08.026
Alcohol-based hand sanitizer, exposure, quarantine, children, ethanol ABHS, USA	27-Aug-20	Alcohol-based hand sanitizer exposures and effects on young children in the U.S. during the COVID-19 pandemic [Free Access to Abstract only]	Clinical Toxicology (Philadelphia, Pa.)	Letter to Editor	With the increasing use of alcohol-based hand sanitizer (ABHS) during the COVID-19 pandemic, risks of increased ABHS exposure to young children need attention. To understand the effects of ABHS in children ≤5 years, the authors searched the American Association of Poison Control Centers' National Poison Data System (NPDS) during January-April 2020. There were 4451 exposures in children ≤5 years (age range 5 days- 5 years, median 1.9 years). NPDS received an increase in cases (35.8%) from January (n = 904) to April 2020 (n = 1228), consistent with rising demand for ABHS during the COVID-19 pandemic. Ethanol ABHS exposure (98.7%, 4392/4451) was the most common; isopropanol ABHS exposure was minimal (1.3%, 59/4451). Ingestion (94.0%, 4184/4451) was the primary route, followed by ocular (5.5%, 256/4451). Of 81 children referred for medical evaluation, five (0.1%, 5/4451) were hospitalized. No deaths were reported. Unintentional exposures accounted for 99.8% (4442/4451) of calls. Primary residence was the most common setting (96.1%, 4278/4451), which may coincide with COVID-19 quarantine and increased access.	This study based on the search of the American Association of Poison Control Centers' National Poison Data System during January-April 2020 showed an increase in alcohol-based hand sanitizer (ABHS) exposure cases, consistent with rising demand for ABHS during the COVID-19 pandemic. Ethanol ABHS exposure was the most common exposure and primary residence was the most common setting.	McCulley L, Cheng C, Mentari E, et al. Alcohol-based hand sanitizer exposures and effects on young children in the U.S. during the COVID-19 pandemic [published online, 2020 Aug 27]. Clin Toxicol (Phila). 2020;1-2. doi:10.1080/15563650.2020.1811298

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COVID-19; SARS-CoV-2; children; cluster; family; viral load.	26-Aug-20	Transmission dynamics of SARS-CoV-2 within families with children in Greece: A study of 23 clusters	Journal of Medical Virology	Original Research	This study investigated transmission dynamics of SARS-CoV-2 within families with children in Greece focusing on the comparison of disease severity, outcome, and viral load between adults and children. From February 26 through May 3, 2020, family clusters (with at least one child per family) from 3 reference laboratories were identified through the national registry of SARS-CoV-2 infections. RT-PCR was performed on each patient and cycle threshold (Ct) values were examined and categorized as high (<25), moderate (25-30) and low (>30). 23 family clusters with a median number of 5 (range: 3-7) family members were studied (109 household members in total; 66 adults and 43 children). The 1st household member with COVID-19 was an adult in 21 (91.3%) family clusters and a child in 2 (8.7%). Transmission occurred from an adult to a child in 19 clusters and/or from an adult to another adult in 12 clusters. There was no evidence of child-to-adult or child-to-child transmission identified. Children were more likely to have an asymptomatic SARS-CoV-2 infection compared to adults (40% versus 10.5%, p=0.021) and adults were more likely to develop a severe clinical course compared to children (8.8% versus 0%, p=0.021). Children were significantly more likely to have a low viral load while adults were more likely to have a moderate viral load (40.7% and 18.5% versus 13.8% and 51.7%, respectively; p-value=0.016). This study provides insight into transmission dynamics of SARS-CoV-2 within families with children indicating that the prevalent direction of transmission is from adult-to-child.	This study investigated the transmission dynamics of SARS-CoV-2 within families with children in Greece. The authors suggested that the prevalent direction of transmission of SARS-CoV-2 within families with children is adult-to-child.	Maltezou HC, Vorou R, Papadima K, et al. Transmission dynamics of SARS-CoV-2 within families with children in Greece: A study of 23 clusters. <i>J Med Virol</i> . 2021;93(3):1414-1420. doi:10.1002/jmv.26394
COVID-19; pediatric; rural; SARS-CoV-2; telemedicine	26-Aug-20	Lessons Learned: Pediatric Tele-mental Health in a Rural Medical Center in the Age of SARS-CoV-2	The Journal of Rural Health	Commentary	In this commentary, the authors share lessons learned from their experience of implementing a telemedicine program for pediatric [no age range given] mental health care during the COVID-19 pandemic. In February 2020, there were no telehealth visits conducted by the General Ambulatory Pediatric (GAP) clinic in a rural area of New Hampshire, USA. By April, 82% of the visits were by telemedicine. The primary concerns raised by the GAP staff (13 general pediatric clinicians and 1 behavioral health clinician) were lack of patient privacy, inadequate infrastructure, and a lack of widely distributed, specific, and standardized tele-mental health protocols. Privacy concerns included no guarantee for confidentiality in patients' homes, that Health Insurance Portability and Accountability Act (HIPAA) standards could not be met, and that providers had to choose between connecting via telephone or non-HIPAA compliant methods such as FaceTime. Limits to technology and inequitable access to resources were concerns, with frozen videos, poor audio, and an inability to read verbal cues as some of the significant technical problems. The GAP group also noted a decrease in mental health concern phone	In this commentary, the authors share lessons learned from their experience of implementing a telemedicine program in a rural part of the US for pediatric mental health care during the COVID-19 pandemic.	Satti K, Ojugbele O. Lessons Learned: Pediatric Telemental Health in a Rural Medical Center in the Age of SARS-CoV-2. <i>J Rural Health</i> . 2021;37(1):260-262. doi:10.1111/jrh.12512

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					calls and began reaching out to families identified as high risk. However, the lack of standardization meant that each provider made their own decisions as to how to proceed, especially as emergency care was overwhelmed by the pandemic and the GAP providers feared for loss of following. The authors stress that telehealth infrastructure must be improved for rural communities.		
Childhood sexual abuse; children; mental health; development; lockdown; COVID-19 pandemic; isolation; protection	26-Aug-20	Ascending Child Sexual Abuse Statistics in India During COVID-19 Lockdown: A Darker Reality and Alarming Mental Health Concerns	Indian Journal of Psychological Medicine	Editorial	The authors describe the challenges of, and possible solutions to, child sexual abuse (CSA) during the COVID-19 pandemic and lockdown in India. CSA is linked to adverse impacts on the normal development and maturation of children, and around 53% of Indian children have reported experiencing abuse. The key risk factors for CSA include overstressed caregivers becoming violent or abusive and children's restricted mobility. During lockdown, CSA can be devastating as the isolation has further limited support networks, making it even more difficult for the victims to seek help or escape, particularly since 93% of perpetrators are relatives or known individuals. UNICEF emphasizes the need for circulation of information and services available to protect children from violence, abuse, and neglect during COVID-19 via text messages, educational platforms, and social media. The authors call for the implementation of legislative actions and community-based interventions through virtual media to prevent a further rise in CSA statistics, and to ensure child protection.	The authors describe the challenges of, and possible solutions to, child sexual abuse (CSA) during the COVID-19 pandemic and lockdown in India. During lockdown, CSA can be devastating as the isolation has further limited support networks, making it even more difficult for the victims to seek help or escape. The authors call for the implementation of legislative actions and community-based interventions through virtual media to prevent a further rise in CSA statistics, and to ensure child protection.	Poddar S, Mukherjee U. Ascending Child Sexual Abuse Statistics in India During COVID-19 Lockdown: A Darker Reality and Alarming Mental Health Concerns. Indian J Psychol Med. 2020;42(5):493-494. Published 2020 Aug 26. doi:10.1177/0253717620951391
Anesthesia, obstetrics, labor, USA, PPE	26-Aug-20	What obstetricians should know about obstetric anesthesia during the COVID-19 pandemic	Seminars in Perinatology	Original Article	This article examines recommendations for obstetric anesthetic practice on a Labor and Delivery Unit (L&D) in the USA during the COVID-19 pandemic. The authors provide the following recommendations based on available evidence: 1) Anesthesiologists need to be actively involved in the care of sick or potentially complex patients early in their presentation to the labor and delivery unit. Consultation should occur shortly after a patient's admission to L&D. For patients who are being admitted for routine induction or labor, the anesthesiologist may delay interacting with the patient until the COVID-19 status is known, or until the time of neuraxial labor analgesia placement. 2) SARS-CoV-2 infection is not a contra-indication to neuraxial labor analgesia, and COVID-19 infection should prompt an anesthesia consultation and early placement of neuraxial labor analgesia in the event of an emergent C-section. Placement of neuraxial analgesia is not considered an aerosolizing procedure. Inhaled	The authors provide recommendations regarding obstetric anesthetic practice on Labor and Delivery Units during the COVID-19 pandemic. They address early neuraxial anesthesia, prevention of viral spread in the operating room, and adaptations for women with severe respiratory infections.	Ring LE, Martinez R, Bernstein K, Landau R. What obstetricians should know about obstetric anesthesia during the COVID-19 pandemic. Semin Perinatol. 2020 Aug 26;44(7):151277. doi: 10.1016/j.semperi.2020.151277.

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					nitrous oxide is not recommended due to the risk of aerosolizing the virus. 3) Due to the risk of aerosolizing procedures in the operating room, the entire anesthesia team should take airborne, droplet and contact isolation precautions for any Person Under Investigation or SARS-CoV-2 infected patient undergoing C-section delivery. In the event that general anesthesia is necessary, the anesthesiologist should ensure that viral particles will be excluded from the ventilator by the application of a HEPA filter. 4) The authors provide further recommendations on adapting anesthesia in the event of severe respiratory infection resulting in a metabolic or mixed metabolic/respiratory acidosis. They conclude that these measures can have real effects on reducing the transmission of the viral illness and maintaining patient and caregiver safety in the labor room.		
Child and adolescent psychiatry, online education, psychological first aid, quarantine, school counseling, school psychology	26-Aug-20	Impact of COVID-19 on the Mental Health of Children and Adolescents	Cureus	Review	As of 18 Aug 2020, 67.6% of students are impacted globally due to school closures in 143 countries. This abrupt change in learning environment and limited social interactions has significantly disrupted the lives of students and their families, posing a potential risk to the mental well-being and brain development of children. It is essential for the scientific community and healthcare workers to assess the psychological impact caused by the COVID-19 pandemic on children and adolescents, as many several mental health disorders begin during childhood. This review investigates and identifies the risk factors and proposes possible solutions to avoid the detrimental consequences of this crisis on children's mental health. Risk factors include job loss and financial insecurity in the family, food insecurity, lost loved ones, having healthcare workers as parents, inadequate technology for distance learning. Interventions include taking breaks from news and social media, exercise, healthy eating, improving sleep hygiene, meditation, clear and realistic educational expectations, behavioral activation, problem-solving skills, and providing adequate information about COVID-19 and quarantine measures to children to reduce uncertainty and anxiety.	This review investigates and identifies the risk factors on children's mental health caused by the COVID-19 pandemic and proposes possible solutions to avoid detrimental psychological consequences.	Shah K, Mann S, Singh R, Bangar R, Kulkarni R. Impact of COVID-19 on the Mental Health of Children and Adolescents. Cureus. 2020 Aug 26;12(8):e10051. doi: 10.7759/cureus.10051. PMID: 32999774; PMCID: PMC7520396.
Quarantine, children, fever, compliance	26-Aug-20	Home quarantine compliance is low in children with fever during COVID-19 epidemic	World Journal of Clinical Cases	Original Research	At the start of the COVID-19 outbreak in China, the state issued a series of measures to guide the prevention and control of the epidemic. One of these measures was home isolation for children with fevers. However, due to the nature of children, the implementation of home isolation was difficult. The authors of this study looked at factors that influence home quarantine compliance in children with fever. A total of 495 pediatric patients (mean 3.56 +/- 2.89 years old) with respiratory tract infection and fever were selected from the general fever clinic at Xiamen Children's Hospital, China from February 6 – 27, 2020. On day 8 after a hospital visit, follow-up was conducted via	The authors examined the level of compliance of home isolation measures in children who presented to the general fever clinic at Xiamen Children's Hospital in China. They identified the need for better education about quarantine measures to improve adherence for	Lou Q, Su DQ, Wang SQ, Gao E, Li LQ, Zhuo ZQ. Home quarantine compliance is low in children with fever during COVID-19 epidemic. World J Clin Cases. 2020 Aug 26;8(16):3465-3473. doi: 10.12998/wjcc.v8.i16.3465. PMID: 32913853; PMCID: PMC7457107.

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					<p>telephone to evaluate the compliance of home quarantine. Among the ten quarantine measures, the proportion of families adhering to keeping 1.5 m distance, proper hand hygiene, wearing masks at home, and proper cough etiquette was very low (< 30% for each measure). The authors observed that compliance increased with the age of children. Compared with children whose caregivers were young adults, children with elderly caregivers were 2.46 times more likely to show poor compliance. Furthermore, children who received intensive information on quarantine measures had significantly better compliance. The authors also note that strengthening education on the quarantine measures is critical to improving compliance, especially in young children with elderly caregivers.</p>	<p>children. Compared with children whose caregivers were young adults, children with elderly caregivers were 2.46 times more likely to show poor compliance</p>	
Pregnancy, infection prevention and control, Saudi Arabia	26-Aug-20	Infection Prevention and Control Challenges With First Pregnant Woman Diagnosed With COVID-19: A Case Report in Al Ahssa, Saudi Arabia	Cureus	Case Report	<p>This case report describes a 38-year-old female at 38 weeks of gestation brought to a maternity and children’s hospital in Saudi Arabia on 27 March 2020 for labor pain. Although she had a history of exposure to a COVID-19 patient diagnosed one day back (her brother), she presented no COVID-19 related respiratory or gastro-intestinal symptoms. The patient was placed in a negative pressure room, and signage was placed on the isolation room door. Clinical examination, laboratory results, and chest X-ray showed normal. Using a well-trained team and following PPE recommendations, C- section under spinal anesthesia was carried out in an operation room supplied by high-efficiency particulate air (HEPA) filter. The neonate was shifted to the neonatal care unit for isolation after routine care and the mother recovered in the same operating room before being transferred to the isolation ward. The patient received pre- and post-surgery antibiotic surgical prophylaxis as per guideline. Terminal cleaning and fumigation were done for the assigned operation room immediately. As per the Saudi Ministry of Health protocol, isolation and swabbing were continued every 3 days, and she was transferred after 2 weeks to quarantine. 2 days post-operation, a positive nasopharyngeal swab result by PCR was obtained from the mother. Contact tracing for all 29 health care workers exposed to the patient was undertaken and 1 healthcare worker was found to be infected.</p>	<p>This case report describes a suspected COVID-19 patient in Saudi Arabia brought to the hospital at 38 weeks of gestation for labor pain on 27 March 2020. This article focuses on details from admission to the postpartum period, with an emphasis on infection control measures.</p>	<p>AlOmrn A, Almatawah Y, Sharit BA. Infection Prevention and Control Challenges With First Pregnant Woman Diagnosed With COVID-19: A Case Report in Al Ahssa, Saudi Arabia. Cureus. 2020;12(8):e10035. doi:10.7759/cureus.10035</p>
Spain, pediatric, x-rays, pneumonia, radiology, pediatric imaging, thoracic imaging	26-Aug-20	Pediatric chest x-ray in COVID-19 infection	European Journal of Radiology	Original Research	<p>In this study, the authors aim to establish the radiological manifestations and patterns of COVID-19 in children. 44 patients (median age= 79.8 months, range 2 weeks to 16 years; 29 males and 15 females) with confirmed COVID-19 and chest x-rays (CXR) were enrolled in a tertiary hospital in Madrid, Spain. The majority of children with COVID-19 showed abnormalities in their CXR (90%), however the findings were non-specific. There was good agreement between radiologists when describing consolidations,</p>	<p>In this article, the authors aim to establish common chest x-ray patterns (CXR) seen in pediatric COVID-19 patients, and solidify the role of imaging studies as a complementary means of managing children with</p>	<p>Espin IM, Barriocanal MB, Calle MDC, Rey CC, Bret-zurita M. Pediatric chest x-ray in covid-19 infection. 2020;131(June). doi:10.1016/j.ejrad.2020.109236</p>

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					normal x-rays, as well as peripheral and multifocal ground-glass opacities. The authors also list guidelines for managing children with COVID-19. Imaging techniques can play a complementary role in the management of pediatric patients especially those with known or suspected COVID-19, moderate/severe symptoms, or underlying health risk factors. However, given the non-specificity of the findings and the lowered sensitivity of CXR compared to other imaging techniques, CXR cannot be used as a first-line diagnostic test. However, CXR should be considered in patients with slow evolution and in suspected complications. CXR should not be performed systematically to avoid radiation exposure.	known or suspected COVID-19. They recommend the use of CXR for children with moderate/severe symptoms and in those with underlying risk factors.	
MIS-C, infant, premature, Brazil, hyperinflammation	26-Aug-20	MULTISYSTEM INFLAMMATORY SYNDROME IN A CHILD ASSOCIATED WITH CORONAVIRUS DISEASE 19 IN THE BRAZILIAN AMAZON: FATAL OUTCOME IN AN INFANT	Revista Paulista de Pediatria	Case Report	The authors describe the case of a 7-month-old female infant with a history of extreme prematurity and hospitalization due to acute respiratory distress symptoms and late neonatal sepsis. After surgical gastrostomy for swallowing coordination problems, on the 7th post-operative day, she presented with high fever, dry cough, decreased oxygen saturation, and watery diarrhea. Oropharyngeal aspiration and RT-PCR tests for SARS-CoV-2 were positive. The patient worsened to vasoplegic shock, myocarditis and hyperinflammation syndrome, shown by high levels of troponin I, ferritin, CRP, D-dimer and hypoalbuminemia. The patient did not respond to therapeutic measures, leading to death two days after pediatric intensive support. The patient's clinical course was acute, reaching the hyperinflammation stage in only two to three days after the onset of symptoms, possibly due to significant comorbidity and multiple organ dysfunction syndromes.	The authors present the case of a 7-month-old female infant with SARS-CoV-2 infection and a history of extreme prematurity. Patients with a history of extreme prematurity may present with MIS-C in the presence of COVID-19 and are a group of special concern.	Farias ECF, Justino MCA, Mello MLFMF. MULTISYSTEM INFLAMMATORY SYNDROME IN A CHILD ASSOCIATED WITH CORONAVIRUS DISEASE 19 IN THE BRAZILIAN AMAZON: FATAL OUTCOME IN AN INFANT. Rev Paul Pediatr. 2020. doi:10.1590/1984-0462/2020/38/2020165
Asymptomatic cases, Brazil, child, gastrointestinal symptoms	26-Aug-20	Family COVID-19 cluster analysis of an infant without respiratory symptoms	Journal of the Brazilian Society of Tropical Medicine	Case Report	The diagnosis of COVID-19 without fever or respiratory symptoms requires a high degree of clinical suspicion or epidemiological links. The authors report the case of a 2-year and 9-month-old male child who presented with bloody diarrhea and no vomiting or significant fever at a clinic in Northeast-Brazil. Two days after the onset of symptoms, the child complained of sore throat and moderate abdominal pain. A swab of the nasopharynx/oropharynx collected two days later yielded positive results for COVID-19, but a fecal sample yielded negative results. The C-reactive protein and interleukin-6 levels on day 12 were within normal values. The authors describe the clinical findings of family members with whom he had been in contact with. Although all contacts were asymptomatic, the molecular and serological assays demonstrated that several relatives had current or past SARS-CoV-2 infections. The present study showed the importance of clinical manifestations other than respiratory	The authors report the case of a child with COVID-19 who attended a clinic in Northeast-Brazil with gastro-intestinal symptoms and no respiratory problems and the subsequent screening of his close family members. The present study showed the importance of clinical manifestations other than respiratory symptoms for the suspicion and diagnosis of COVID-19 among children with mild	Jesus MCS, Lima AGA, Santos VS, et al. Family COVID-19 cluster analysis of an infant without respiratory symptoms. Rev Soc Bras Med Trop. 2020;53:e20200494. doi:10.1590/0037-8682-0494-2020

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					symptoms for the suspicion and diagnosis of COVID-19 among children with mild gastro-intestinal symptoms.	gastro-intestinal symptoms.	
Brazil, kidney disease, guidelines	26-Aug-20	Recommendations Of The Brazilian Society Of Nephrology Regarding Pediatric Patients On Renal Replacement Therapy During The Covid-19 Pandemic	Brazilian Journal of Nephrology	Review Article	The impact of COVID-19 led to specific regional recommendations for populations in need of specialized care, such as children and adolescents with kidney diseases, particularly in renal replacement therapies (RRT). The authors present the recommendations of the Brazilian Society of Nephrology regarding treatment of these pediatric patients during the pandemic. Articles and documents from medical societies and government agencies on specific recommendations for children with RRT were taken into consideration along with epidemiologic factors in Brazil. The result was a framework for outpatient care, transportation to dialysis centers, peritoneal dialysis, hemodialysis, and kidney transplantation in children and adolescents in a pandemic environment. The authors highlight that patients with chronic kidney disease on RRT are at increased risk of COVID-19, and specific measures must be taken to reduce the risk of contracting SARS-CoV-2 and developing COVID-19.	Brazilian nephrologists outline guidelines for treating child and adolescent patients with chronic kidney disease undergoing renal replacement therapies. The authors stress that this patient population is at increased risk for SARS-CoV-2 infection so specific measures should be employed to reduce their risk.	Tavares MS, Penido MIMG, Andrade OVB, et al. Recommendations Of The Brazilian Society Of Nephrology Regarding Pediatric Patients On Renal Replacement Therapy During The Covid-19 Pandemic. J Bras Nefrol. 2020; doi:10.1590/2175-8239-JBN-2020-5108
Pediatric, gastrointestinal symptoms, clinical presentation	26-Aug-20	Recognising the Gastrointestinal Manifestation of Pediatric Coronavirus Disease 2019	The Indian Journal of Pediatrics	Scientific Letter	Gastrointestinal (GI) features of SARS-CoV-2 infection are now being recognized more frequently. The authors describe two male pediatric patients (ages 9 and 15 years old) admitted for profuse nausea and vomiting with a lack of respiratory symptoms. Both were found to be positive for SARS-CoV-2 by RT-PCR. These cases illustrate that GI symptoms may be the sole symptoms of COVID-19. The authors present other reports of GI manifestations in pediatric COVID-19 and MIS-C. The recognition of GI manifestations is important in children as children infected with coronaviruses have GI symptoms more often compared with adults. The authors conclude that pediatricians to be aware of the spectrum of GI manifestations in pediatric SARS-CoV-2 infection and maintain a high index of suspicion for COVID-19, especially in those who have been exposed to a COVID-19 patient.	In this article, the authors highlight the spectrum of GI manifestations in pediatric COVID-19 reported in literature which may range from mild non-specific symptoms as seen in the two patients reported here to more severe symptoms.	Bolia R, Ranjan R, Bhat NK. Recognising the Gastrointestinal Manifestation of Pediatric Coronavirus Disease 2019 [published online, 2020 Aug 26]. Indian J Pediatr. doi:10.1007/s12098-020-03481-y
Ocular symptoms, conjunctival discharge, children, Wuhan, China	26-Aug-20	Ocular Manifestations and Clinical Characteristics of Children With Laboratory-Confirmed COVID-19 in Wuhan, China	JAMA Ophthalmology	Original Research	The authors conducted a cross-sectional study to investigate ocular manifestations and clinical characteristics of children with laboratory-confirmed COVID-19. They included 216 pediatric patients with a median age of 7.25 (interquartile range 2.6-11.6) years with confirmed COVID-19 admitted from January 26 to March 18, 2020, to Wuhan Children's Hospital, China. The demographic information and clinical manifestations of patients were collected through medical record reviews and electronic questionnaires, and two research team members independently reviewed all data. The results showed that of the 216 children, 93 (43.1%) were asymptomatic, and all children with mild (46.8%) or	Findings from this study suggest that ocular disorders in children with COVID-19 are typically very mild and not associated with long-term complications. Therefore, these data could help guide the prevention and management of ocular	Ma N, Li P, Wang X, et al. Ocular Manifestations and Clinical Characteristics of Children With Laboratory-Confirmed COVID-19 in Wuhan, China [published online ahead of print, 2020 Aug 26]. JAMA Ophthalmol. 2020;10.1001/doi:10.1001/jamaophthalmol.2020.3690

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					moderate (53.2%) symptoms recovered. Fever (37.5%) and cough (36.6%) were the most common initial symptoms, which was similar to those observed in adult patients with COVID-19. However, forty-nine children (22.7%) showed various ocular manifestations, of which nine had ocular complaints as the initial manifestations of COVID-19. The most common ocular manifestations were conjunctival discharge (55.1%), eye rubbing (38.8%), and conjunctival congestion (10.2%). Of note, children with systemic symptoms or with cough were more likely to have ocular symptoms compared to asymptomatic children, and the difference was statistically significant. Furthermore, ocular symptoms were typically mild, and most children recovered without any treatment.	disorders in children with COVID-19.	
Pediatric, neonatal, respiratory, India	26-Aug-20	SARS-CoV-2 Infection in a Term Neonate Presenting with Respiratory Failure on Day 3 of Life	Indian Journal of Pediatrics	Letter to the Editor	This letter reviews the case of a female born in India at 38 weeks of pregnancy via cesarean delivery, secondary to placenta previa. She had no immediate symptoms but developed jaundice on Day 2 of life, with a serum bilirubin of 14.7 mg/dL. On Day 3 she displayed a sudden cough and apnea. She was intubated, became bradycardic, and was declared dead at 78 hours of life. The postmortem nasopharyngeal swab was positive for SARS-CoV-2 RT-PCR. All tested health care workers and family contacts, including parents, were COVID-19 negative. The source of infection for this infant is unknown. The authors recommend that any neonate presenting with unexplained respiratory symptoms should be tested for COVID-19.	These authors review the case of a term neonate who exhibited sudden respiratory failure on Day 3 of life, and tested positive for COVID-19. The authors recommend that any neonate with unexplained respiratory symptoms should be tested for COVID-19.	Mukhopadhyay K, Agarwal A, Laxmi V, Mohi GK, Pvm L. SARS-CoV-2 Infection in a Term Neonate Presenting with Respiratory Failure on Day 3 of Life [published online ahead of print, 2020 Aug 26]. Indian J Pediatr. 2020;10.1007/s12098-020-03480-z. doi:10.1007/s12098-020-03480-z
Children, transmission, France	26-Aug-20	Children account for a small proportion of diagnoses of SARS-CoV-2 infection and do not exhibit greater viral loads than adults	European Journal of Clinical Microbiology & Infectious Diseases	Brief Report	Previous reports have suggested that children are less affected than adults by SARS-CoV-2. The authors analyzed SARS-CoV-2 diagnoses between February 27 and March 14, 2020, and mortality among positive patients in Marseille university hospitals (France). Of 4050 individuals tested by nasopharyngeal swab, 228 were found positive using RT-PCR (5.6%). Deaths occurred in 2 out of 99 documented cases (both > 85 years old). Positive tests were significantly lower among children aged 0–1 years (0%), 1–5 years (1.1%), and 5–10 years (3.6%) than among subjects > 18 years (6.5% average). The group with the highest proportion of positive patients was 45–65 years old (8.1%). Viral loads did not differ between children and adults, and children were mostly asymptomatic, indicating that children may not contribute significantly to virus circulation. Therefore, predictive models based on previously known respiratory viral diseases should be used with caution.	The authors analyzed SARS-CoV-2 diagnoses and mortality rates among positive patients in Marseille university hospitals (France). Because children (< 18 years) tested positive at lower rates than adults (> 18 years), there was little difference in viral load, and children were mostly asymptomatic, they conclude that children do not appear to contribute significantly to virus circulation.	Colson P, Tissot-Dupont H, Morand A, et al. Children account for a small proportion of diagnoses of SARS-CoV-2 infection and do not exhibit greater viral loads than adults [published online, 2020 Aug 26]. Eur J Clin Microbiol Infect Dis. 2020. doi:10.1007/s10096-020-03900-0
Transmissibility, compartmental models, age-	26-Aug-20	A five-compartment model of age-	Infectious Diseases of Poverty	Research Article	COVID-19 has been observed to disproportionately affect people based on age-class. The authors aim to quantify the age-specific transmission patterns of COVID-19 by using a transmission	The authors demonstrate through a compartmental model that transmission of	Zhao ZY, Zhu YZ, Xu JW, et al. A five-compartment model of age-specific transmissibility of SARS-

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specific dynamics, SEAIR, Hunan Province, China		specific transmissibility of SARS-CoV-2			model. The model consisted of five compartments: susceptible, exposed, asymptomatic, infected, and recovered (SEAIR). The age-structure of the model consisted of four groups: ≤ 14-years-old, 15-44 years-old, 45-64 years-old, and ≥ 65 years-old. The model was based on cases from the Hunan Province, China from January 5 – February 19, 2020 (N=1126). Given the model inputs, there appears to be greatest transmissibility between those ≥ 65 years-old and those 45-64 years-old. Additionally, transmission seemed to be lowest between those who were 45-64 years-old and those who were in the same age group, followed by transmission between those 45-64 years old and those 15-44 years-old. The authors conclude by suggesting transmission of SARS-CoV-2 varies by age-category and is observed to be higher among those who are middle-aged and elderly.	SARS-CoV-2 is highest among those who are middle-aged (45-64 years-old) and those who are elderly (≥ 65 years-old).	CoV-2. Infect Dis Poverty. 2020;9(1):117. Published 2020 Aug 26. doi:10.1186/s40249-020-00735-x
Thrombosis, pregnancy, coagulopathy, postpartum, United Kingdom	26-Aug-20	COVID-19 Coagulopathy in Pregnancy: Critical Review, Preliminary Recommendations and ISTH Registry - Communication from the ISTH SSC for Women's Health	Journal of Thrombosis and Haemostasis	Clinical Guidelines	This report provides expert consensus on COVID-19 coagulopathy in pregnancy and was developed by the International Society on Thrombosis after a structured literature search using MEDLINE (1946 to July 16th 2020), EMBASE (1947 to July 16th 2020), and EPUB Ahead of Print & Other Non-Indexed Citations (inception to July 16th 2020). The purpose of this report is to: 1) examine the current evidence of COVID-19 outcomes in pregnancy; 2) highlight the specific pregnancy-related haemostatic issues; 3) provide recommendations to guide care of COVID-19-affected pregnant women with respect to coagulopathy and 4) introduce an international registry to systematically analyze the occurrence and impact of coagulopathy in women with COVID-19 during pregnancy and postpartum period.	The authors provide preliminary recommendations to assist in the care of COVID-19-affected pregnant women with coagulopathy or thrombotic complications.	Kadir RA, Kobayashi T, Iba T, et al. COVID-19 Coagulopathy in Pregnancy: Critical Review, Preliminary Recommendations and ISTH Registry - Communication from the ISTH SSC for Women's Health [published 2020 Aug 26]. J Thromb Haemost. 2020; doi:10.1111/jth.15072
Immunization, vaccine, disruptions, global	26-Aug-20	Vaccines and routine immunization strategies during the COVID-19	Human Vaccines & Immunotherapies	Review	Quarantine and social distancing measures put into place during the COVID-19 pandemic poses a risk to global immunization practices. The authors reviewed the literature to address global disruptions in childhood immunization programs during the pandemic. They outline issues regarding routine immunizations during the pandemic, the impact of existing vaccines in persons with COVID-19, and additional immunization measures such as mass vaccination campaigns and surveillance efforts. The authors present evidence suggesting low- and middle-income countries observed considerable declines in childhood immunization coverage rates since the start of the pandemic. Further, the authors note that children missing vaccinations due to immunization program disruptions may risk serious consequences of community outbreaks of vaccine-preventable diseases. The authors conclude by suggesting that due to children comprising a smaller proportion of cases globally, routine immunization practices should be prioritized during the COVID-19 pandemic.	Disruptions of immunization strategies due to COVID-19 have been observed. The risk of missed vaccinations may pose a threat to concurrent or future outbreaks of vaccine-preventable diseases; continuation of immunization programs should be prioritized.	Dinleyici EC, Borrow R, Safadi MAP, et al. Vaccines and routine immunization strategies during the COVID-19 pandemic [published online ahead of print, 2020 Aug 26]. Hum Vaccin Immunother. 2020;1-8. doi:10.1080/21645515.2020.1804776

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Pediatric, encephalopathy, MIS-C, immunology	26-Aug-20	Encephalopathy and bilateral thalamic lesions in a child with MIS-C associated with COVID-19	Neurology	Clinical/Scientific Notes	The authors report the case of a previously healthy 33-month-old boy with two days of fever, emesis, and rash. Nasopharyngeal SARS-CoV-2 RT-PCR testing was initially negative; the repeat test was indeterminate. SARS-CoV-2 antibody testing was positive. He was admitted to the hospital and treated for a presumed diagnosis of MIS-C. The patient developed worsening respiratory status over the subsequent 24-48 hours. Chest radiograph displayed bilateral pleural effusions. EEG showed moderate background slowing. The following day, MRI brain revealed restricted diffusion in the bilateral lateral thalamic nuclei without T2/FLAIR changes. The patient's neurological status continued to improve with continued treatment of his inflammatory syndrome. Repeat EEG showed only mild diffuse slowing, and repeat brain MRI on day 15 showed resolution of the thalamic lesions. He was discharged home on day 15 on oral steroids, with mild residual weakness. While MIS-C affects multiple organ systems, the authors are unaware of other patients with associated encephalopathy, EEG slowing, and thalamic lesions and suggest that this patient's encephalopathy may reflect CNS effects of his marked systemic inflammatory response.	The authors report a case of a previously healthy 33-month-old child who met criteria for MIS-C, had abnormal EEG and MRI findings and developed reversible encephalopathy. The authors suggest that this patient's encephalopathy may reflect CNS effects of his systemic inflammatory response rather than direct entry of the virus into the CNS.	Abel D, Shen MY, Abid Z, et al. Encephalopathy and bilateral thalamic lesions in a child with MIS-C associated with COVID-19 [published 2020 Aug 26]. Neurology. doi:10.1212/WNL.00000000000010652
Early discharge, length of stay, postpartum, pregnancy, puerperium, New York, USA	26-Aug-20	Early postpartum discharge during the COVID-19 pandemic	Journal of Perinatal Medicine	Report	This report aimed to explore the implementation of early postpartum discharge during the COVID-19 pandemic in health systems in New York, USA (NY). The authors performed a retrospective analysis of all uncomplicated postpartum patients in seven obstetrical units located in NY between December 8, 2019 and June 20, 2020 (N = 11,770). Women were split into two groups based on if they delivered prior to or during the pandemic (start of the pandemic declared Mid-March). Length of stay, defined as the time from delivery to discharge, were compared between groups. The findings suggest significantly shorter lengths of stays comparing before and during pandemic periods for both vaginal and cesarean deliveries. Length of stays for vaginal deliveries were reduced from 48 hours before the pandemic to 34 hours during the pandemic, while cesarean deliveries reduced from 74 hours before the pandemic to 48 hours during the pandemic (p<0.0001). Adverse outcomes of these practices were not evaluated in this report. The authors concluded that these New York health systems were successful in implementing early postpartum discharge for low-risk patients during the COVID-19 pandemic.	This report suggested that New York health systems successfully implemented early postpartum discharge for low-risk patients during the COVID-19 pandemic. Length of stays were significantly reduced during the pandemic period for both vaginal and cesarean deliveries.	Bornstein E, Guleren M, Husk G, et al. Early postpartum discharge during the COVID-19 pandemic [published online ahead of print, 2020 Aug 26]. J Perinat Med. 2020;/j/jpme.ahead-of-print/jpm-2020-0337/jpm-2020-0337.xml. doi:10.1515/jpm-2020-0337
Children, childcare programs, transmission, Rhode Island, USA	26-Aug-20	Transmission of SARS-CoV-2 in Childcare Settings	NEJM Journal Watch	Summary and Comment	The author summarizes and comments on the findings from a report on the transmission of SARS-CoV-2 from children following the reopening of childcare centers in Rhode Island, USA. The Rhode Island Department of Public Health investigated all COVID-19 cases associated with licensed home- and center-based	This study demonstrating limited secondary spread of COVID-19 among young children in childcare centers in Rhode Island,	Lehman, D. Transmission of SARS-CoV-2 in Childcare Settings. NEJM Journal Watch. 2020; https://www.jwatch.org/na52320/2020/08/26/transmission-sars-

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					childcare programs approved to reopen on June 1, 2020. Centers reopened with mandated reduced enrollment, cohorting of children and staff, symptom tracking, universal masking by staff, and enhanced cleaning procedures. Findings showed that from June 1 to July 31, 52 cases (33 confirmed, 19 probable) were identified at the 666 centers, out of roughly 19,000 children. Furthermore, 58% of cases were in children and 42% in adults. Of the 22 adults, 20 were teachers, and 2 were parents. Also, cases occurred in 29 childcare programs, and in 20 of these, a single case was reported, with no evidence of secondary transmission. Finally, possible secondary transmission was detected in 4 centers (17 cases in children and adults) between July 15 and 31, leading to center closures and quarantining. Therefore, limited secondary transmission was observed following the reopening of childcare centers in Rhode Island.	USA and provides clinicians with concrete data to share with families when considering a return to school. The results are reassuring and suggest that the USA CDC's recommendations for infection prevention can play a role in reducing outbreaks.	cov-2-childcare-settings?query=C19&cid=DM97750_NEJM_Registered_Users_and_InActive&bid=249084857. Published August 26, 2020. Accessed August 30, 2020.
Pediatric, guidelines, institution-specific, New York City, USA	26-Aug-20	A Clinical Pathway for Hospitalized Pediatric Patients with Initial SARS-CoV-2 Infection	Hospital Pediatrics	Review Article	Initial SARS-CoV-2 infection can present a significant disease burden for the pediatric population. Through interaction with large populations of COVID-19 patients at a quaternary care children's hospital in New York City, USA, the authors found an urgent need to create a unified, multidisciplinary, evidence-informed set of guidelines for the diagnosis and management of COVID-19 in children. They describe their institution's practices for the hospitalized pediatric patient with confirmed or suspected initial SARS-CoV-2 infection. This review details guidelines for testing, inpatient monitoring and management, discharge, and newborn considerations. In addition to minimizing staff exposure to SARS-CoV-2, the authors note enhanced inter-disciplinary communication, improvements in provider satisfaction with consistency and quality of care, and improved provider comfort in caring for patients with this novel disease. They hope that this review will help institutions make their own evidence-informed, institution-specific guidelines and see similar positive outcomes.	This review outlines single-center specific guidelines at a hospital in New York City, USA, for caring for pediatric patients infected or suspected of infection with SARS-CoV-2. The authors hope that these guidelines will help institutions make well-informed protocols for pediatric patients with SARS-CoV-2 infection.	Diamond R, Fischer A, Hooe B, et al. A Clinical Pathway for Hospitalized Pediatric Patients With Initial SARS-CoV-2 Infection [published online 2020 Aug 26]. Hosp Pediatr. 2020. doi:10.1542/hpeds.2020-0170
Hypoxia, nitric oxide, pregnancy, Boston, USA	26-Aug-20	High Concentrations of Nitric Oxide Inhalation Therapy in Pregnant Patients with Severe Coronavirus Disease 2019 (COVID-19)	Obstetrics and Gynecology	Original Research	There is a lack of therapies to treat or prevent progression of COVID-19 hypoxic respiratory failure in pregnant patients. The authors investigated treating patients meeting criteria for severe/critical COVID-19 with high dose (160-200 ppm) nitric oxide by mask. 6 pregnant patients who were admitted to Massachusetts General Hospital in Boston, USA, from April-June 2020, received inhalation nitric oxide therapy. An increase in systemic oxygenation was found for each therapy session. 3 of the 6 patients remained pregnant at the time of hospital discharge, and the remaining 3 delivered a total of 4 neonates, all of whom were in good condition at a 28-day follow-up. The authors hypothesize that free-radical nitric oxide gas exerts virucidal action on critical viral proteins, but the precise anti-viral	Pregnant patients experiencing hypoxic respiratory failure due to COVID-19 were treated with high-dose nitric oxide, and improvements were seen in their cardiopulmonary function as a result.	Safae Fakhr B, Wiegand SB, et al. High Concentrations of Nitric Oxide Inhalation Therapy in Pregnant Patients With Severe Coronavirus Disease 2019 (COVID-19) [published online 2020 Aug 26]. Obstet Gynecol. 2020. doi:10.1097/AOG.0000000000004128

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					effects have yet to be determined. The authors state that the high dose inhaled nitric oxide was well-tolerated and associated with improved oxygenation and respiratory rate for pregnant patients with hypoxic respiratory failure, but randomized trials would be beneficial for drawing more concrete associations.		
Pediatrics, rural medicine, telemedicine, tele-health	26-Aug-20	Lessons Learned: Pediatric Tele-Mental Health in a Rural Medical Center in the Age of SARS-CoV-2	Journal of Rural Health	Commentary	Approximately 20% of the USA population resides in rural areas. Equity of access to mental health care services in these locations is often compromised by geography, distance to care providers, socio-economic status, lack of trust in the mental health system, and a shortage of mental health providers. Children in rural areas have been reported to have a higher prevalence of mental health challenges and lower probability of receiving mental health care compared to urban residents. Tele-mental health services have been considered as a means to bridge this gap but are not fully optimized in primary care. In March 2020, due to SARS-CoV-2, social distancing guidelines were encouraged to mitigate virus spread, which created an urgent need to conduct a majority of pediatric visits remotely, including visits addressing mental health. The authors delineate several major concerns regarding the provision of pediatric mental health visits using telemedicine. During telehealth visits, providers seeing adolescents for mental health issues could not guarantee the level of privacy that patients had access to within their homes. Another major area of concern was inadequate infrastructure for the provision of optimal tele-mental health care, including technological constraints and inadequate access of resources. Finally, they note that there was increased provider stress from a lack of standardized, specific, and widespread guidelines for usage of tele-mental health platforms.	The authors of this commentary note the positive implications of using pediatric tele-mental health in rural settings to increase access to care during the COVID-19 pandemic. They emphasize that for rural pediatric tele-mental health services to be successful and sustainable, infrastructure for carrying out these visits must be improved.	Satti K, Ojugbele O. Lessons Learned: Pediatric Tele-Mental Health in a Rural Medical Center in the Age of SARS-CoV-2 [published online ahead of print, 2020 Aug 26]. J Rural Health. 2020;10.1111/jrh.12512. doi:10.1111/jrh.12512
Asymptomatic, thrombocytopenia , NL ratio, India Acute kidney injury, continuous kidney replacement therapy, plasmapheresis, China	26-Aug-20	Be aware of acute kidney injury in critically ill children with COVID-19	Pediatric Nephrology	Original Article	Acute kidney injury (AKI) is a common complication of critically ill adult patients with COVID-19, but no studies have investigated kidney impairment in children with COVID-19. The authors conducted a retrospective observational study of kidney involvement in pediatric COVID-19 cases in Wuhan Children's Hospital from January 24-March 20, 2020. Among 238 confirmed COVID-19 cases, only three were critically ill and needed intensive care unit (ICU) admission. All three developed AKI, but AKI was not detected in any non-critically ill patients outside the ICU. Two of the patients with AKI had prodromal gastrointestinal symptoms. The patients with AKI were treated with plasma exchange and continuous kidney replacement therapy (CKRT), resulting in one complete recovery, one partial recovery, and one mortality due to critical illness. The authors concluded that critically ill children with COVID-19 may develop AKI, especially following prodromal gastrointestinal symptoms. This study	The authors conducted a study of kidney involvement in 238 pediatric COVID-19 cases in Wuhan, China. This is the first study describing acute kidney injury (AKI) in pediatric patients with COVID-19. The authors argue for plasma exchange and continuous kidney replacement therapy in management of critically ill patients with AKI.	Wang X, Chen X, Tang F, et al. Be aware of acute kidney injury in critically ill children with COVID-19 [published online 2020 Aug 26]. Pediatr Nephrol. 2020;1-7. doi:10.1007/s00467-020-04715-z

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					supports plasma exchange and CKRT in management of critically ill patients with AKI.		
Maternal health, child health, pregnancy, birth, depression, biocultural, human biology, United States	26-Aug-20	Maternal and child health during the COVID-19 pandemic: Contributions in the field of human biology	American Journal of Human Biology	Commentary	The authors present the COVID-19 and Reproductive Effects (CARE) project as a case study documenting the complex COVID-19-linked factors impacting prenatal care and birth experiences. The CARE study is a longitudinal study in the USA designed to evaluate how the pandemic has affected pregnant women's prenatal care decisions and birth experiences. Preliminary evidence suggests that participants anticipated altering aspects of their birth plan because of COVID-19, including shortened hospital stays, switching to an out-of-hospital delivery to avoid exposure to the virus in the hospital, and laboring with fewer support people. Preliminary evidence shows the pandemic is impacting maternal mental health, such as increased depression symptoms associated with financial stress. The authors summarize other current COVID-19 human biology studies that apply a biocultural approach to understand the health impacts of the pandemic. The authors argue that the field of human biology and a biocultural perspective is needed to clarify how the lived experience of the COVID-19 pandemic may shape later health.	The authors argue that the field of human biology and a biocultural perspective is needed to clarify how the lived experience of the COVID-19 pandemic may shape maternal and child health.	Gildner TE, Thayer ZM. Maternal and child health during the COVID-19 pandemic: Contributions in the field of human biology [published online 2020 Aug 26]. Am J Hum Biol. 2020. doi:10.1002/ajhb.23494
Maternal mental health, psychosocial stress, Fetal brain	26-Aug-20	COVID-19 induced psychosocial stressors during gestation: possible maternal and neonatal consequences	Current Medical Research and Opinion	Commentary	The COVID-19 pandemic has presented significant challenges for society, and the stressors of the pandemic may adversely impact the mental health of both infected and non-infected individuals. Pregnant women may be at an increased risk of serious mental health consequences as anxiety surrounding the pandemic is compounded by pregnancy-specific concerns. Maternal psychosocial stress (MPS) can elevate maternal cytokines and cortisol levels, cause abnormalities in serotonin homeostasis, and increase oxidative stress leading to poor fetal brain development and maturation. The authors provide commentary about how MPS can ultimately act as a developmental teratogen adversely impacting neonatal outcomes and leading to fetal metabolic and immune alternations. Fetal exposure to MPS during gestation can increase the life-time risk of neurobehavioral disorders, obesity, and cardiovascular disease in the offspring. Therefore, timely psychological intervention is needed to help counter the development of MSP and reduce the risk of subsequent fetal and child somatic and mental health disorders. The authors recommend that clinical psychologists and psychiatrist assist pregnant women in coping with the stress surrounding the COVID-19 pandemic. Psychological counselling can be provided using telehealth, and health care organizations should ensure that adequate numbers of mental health providers are secured to assist pregnant women and neonates during the pandemic.	The authors provide commentary about how maternal psychosocial stress due to the COVID-19 pandemic may increase the life-time risk of neurological, metabolic, and cardiovascular disease in exposed children. Health care organizations and hospitals should seek to address MPS through increasing pregnant women's access to clinical psychologists and psychiatrists throughout the pandemic.	Nabi G, Siddique R, Xiaoyan W, et al. COVID-19 induced psychosocial stressors during gestation: possible maternal and neonatal consequences [published online ahead of print, 2020 Aug 26]. Curr Med Res Opin. 2020;1. doi:10.1080/03007995.2020.1815003

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Pediatric neuropsychology, brain injury, inpatient rehabilitation, USA, North America, South America	26-Aug-20	COVID-19 issues related to pediatric neuropsychology and inpatient rehabilitation - challenges to usual care and solutions during the pandemic	The Clinical Neuropsychologist	Research Article	A group of pediatric neuropsychologists from 12 North American and 2 South American pediatric rehabilitation units discussed challenges to clinical care caused by the COVID-19 pandemic and provided solutions. Challenges included barriers to neurobehavioral and cognitive assessments, psycho-education and rapport-building with caregivers, and ensuring academic accommodations. Combining telehealth with face-to-face care using PPE and social distancing helped alleviate some of these barriers. In-person care was prioritized for cases with sensory and/or functional impairment or levels of emotional dysregulation necessitating a behavior plan. Assessments were shortened and drawing/writing tasks were limited. Psycho-education with caregivers incorporated additional checks for understanding (e.g. the teach-back method). Neuropsychologists took a more active role ensuring academic accommodations were made given the disruption of special education services.	This article summarizes the challenges to clinical care caused by the COVID-19 pandemic experienced by neuropsychologists and their patients in North and South American pediatric rehabilitation units. Strategies are provided for overcoming barriers to neurobehavioral and cognitive assessments, psycho-education, rapport building, and school re-integration.	Koterba CH, Baum KT, Hamner T, et al. COVID-19 issues related to pediatric neuropsychology and inpatient rehabilitation - challenges to usual care and solutions during the pandemic [published online, 2020 Aug 26]. Clin Neuropsychol. 2020;1-15. doi:10.1080/13854046.2020.1811892
Factor X deficiency, gastrointestinal bleeding, rare bleeding disorders	26-Aug-20	Gastrointestinal bleeding in a newborn infant with congenital factor X deficiency and COVID-19-A common clinical feature between a rare disorder and a new, common infection	International Journal of Laboratory Hematology	Letter to the Editor	Severe factor X (FX) deficiency can cause potentially life-threatening bleeding. To date, there is little data on COVID-19 infections in people with congenital bleeding disorders. These authors present the case of a 19-year-old woman who was diagnosed with a mild COVID-19 infection in the ninth month of her pregnancy. A subsequent test was negative, and she then had an uneventful cesarean delivery. Postpartum, the infant had bloody vomiting and was diagnosed with gastro-intestinal bleeding. The infant was hospitalized in the NICU and tested positive for SARS-CoV-2. He received frozen plasma and tranexamic acid. After 10 days in the NICU, he stayed in an isolation room for five days, and was then discharged to home. The infant was diagnosed with severe FX deficiency. He has had no further symptoms for two months after discharge. Gastro-intestinal bleeding can be a sign of SARS-CoV-2 infection or of congenital FX deficiency, so the cause in this case is uncertain. Infants born to COVID-19 positive mothers need close monitoring, especially if they have comorbidities.	These authors present the case of an infant with both severe factor X deficiency and COVID-19 infection.	Dorgalaleh A, Baghaipour MR, Tabibian S, et al. Gastrointestinal bleeding in a newborn infant with congenital factor X deficiency and COVID-19-A common clinical feature between a rare disorder and a new, common infection [published online ahead of print, 2020 Aug 26]. Int J Lab Hematol. 2020;10.1111/ijlh.13318. doi:10.1111/ijlh.13318
Turkey, anxiety, pediatric hematology/oncology	26-Aug-20	Are the Anxiety Levels of Pediatric Hematology-Oncology Patients Different from Healthy Peers During the COVID-19 Outbreak?	Journal of Pediatric Hematology/Oncology	Original Research	In this retrospective cohort study, the authors assessed the anxiety levels of children with hematologic or oncologic disease and their parents after the COVID-19 outbreak. The study participants included 15 patients aged 12-18 years receiving treatment at a pediatric hematology and oncology unit in an academic medical center in Turkey, 33 parents of those patients, and 35 healthy peers and their parents. General anxiety and pandemic-related anxiety levels were assessed using the State-Trait Anxiety Inventory. No significant difference was observed for pandemic-related anxiety levels (P>0.05), but both parent groups exhibited higher anxiety levels with regard to the	The authors assessed the anxiety levels of children and their parents in a pediatric hematology and oncology unit at an academic medical center in Turkey and compared these with healthy peers and parents. Both parent groups displayed higher levels of anxiety due to the	Cakiroglu S, Yeltekin C, Fisgin T, et al. Are the Anxiety Levels of Pediatric Hematology-Oncology Patients Different From Healthy Peers During the COVID-19 Outbreak? [published online 2020 Aug 26]. J Pediatr Hematol Oncol. 2020;10.1097/. doi:10.1097/MPH.0000000000001924

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		[Free Access to Abstract Only]			pandemic than did their children (P<0.05). Children with hematology-oncology disease reported significantly higher Trait anxiety levels than their healthy peers (P=0.01). Additionally, children who had not received stem cell transplantation had higher anxiety scores than the families of children who had undergone transplantation (P<0.05).	pandemic than the children did, and the children in the hematology and oncology unit reported higher levels of trait anxiety than healthy peers.	
Trisomy 21, pediatrics, down syndrome	26-Aug-20	Trisomy 21 and COVID-19 in Pediatric Patients	The Journal of Pediatrics	Case Report	Children with intellectual developmental disabilities have increased mortality rates compared to their peers. Anatomic, immunologic, and metabolic comorbidities associated with Trisomy 21 (T21) may increase the risk for severe COVID-19 disease in children with T21. This case report presents 4 pediatric patients (n=4, males, age range=10 months-17 years) with T21 who developed COVID-19 requiring hospitalization (range=2-23 days). All 4 cases had comorbidities of obstructive sleep apnea and congenital heart disease. Other comorbidities included obesity and dysphagia, which were present in 2 of the cases. 3 of the 4 cases required oxygen or mechanical ventilation respiratory support, and 1 case was considered severe. Due to the increased risk of developing severe COVID-19 associated with several common T21 comorbidities, the authors suggest that children and adults with T21 be considered high-risk and recommend taking extra caution with SARS-CoV-2-infected T21 patients.	Common comorbidities associated with Trisomy 21 (T21) may place patients at an increased risk of developing severe COVID-19. Children with T21 should be considered high risk and monitored carefully if infected with SARS-CoV-2.	Newman AM, Jhaveri R, Patel AB, et al. Trisomy 21 and COVID-19 in Pediatric Patients. J Pediatr. 2020;S0022-3476(20)31103-3. doi:10.1016/j.jpeds.2020.08.067
Osteosarcoma, children, respiratory failure, pediatric hematology/oncology	26-Aug-20	Respiratory Failure in a Child With Pulmonary Metastatic Osteosarcoma and COVID-19 [Free Access to Abstract Only]	Journal of Pediatric Hematology/Oncology	Case Report	Although it is anticipated that immune-compromised children and children with cancer may be at higher risk of developing severe or fatal COVID-19, there are no currently published reports of a fatal case of COVID-19 in a child with cancer. Because of the discrepancy in disease severity between adult and pediatric patients, the authors report the case of an adolescent with pulmonary metastatic osteosarcoma who died of COVID-19 early in the course of the pandemic in New York City, USA. They summarize the patient's clinical course, including lab measurements, chest x-rays, and treatments. They express a desire that there be increased surveillance for children with pulmonary metastatic disease as it may predispose these children to a more severe outcome from COVID-19 infection.	An adolescent diagnosed with pulmonary metastatic osteosarcoma died of respiratory failure as a result of COVID-19. The authors hope that this case study will help increase awareness of complications and surveillance of this specific population.	Offenbacher R, Fabish L, Baker A, et al. Respiratory Failure in a Child With Pulmonary Metastatic Osteosarcoma and COVID-19 [published online 2020 Aug 26]. J Pediatr Hematol Oncol. 2020; doi:10.1097/MPH.0000000000001897
Pediatric surgery, infectivity, asymptomatic carriage, testing	26-Aug-20	Pediatric Surgery during the COVID-19 Pandemic: An International Survey of Current Practice	European Journal of Pediatric Surgery	Original Article	This study aimed to understand the challenges experienced by pediatric surgeons in the early phases of the pandemic. 2 pediatric surgeons from each of the 10 countries most affected by COVID-19 were surveyed over a 10-day period. 20 pediatric surgeons responded. All centers had postponed non-emergency surgery and clinics for nonurgent conditions with virtual consultations being undertaken in 90% of centers. 65% of centers had not knowingly operated on a positive patient. Minimal access surgery was performed in 75% centers but a further 75% had	This study investigated infection control, specific surgical conditions, and the surgical workforce of pediatric surgeons around the world, finding that there has been a profound impact on clinical practice especially with regard to	Nasher O, Sutcliffe JR, Stewart RJ. Pediatric Surgery during the COVID-19 Pandemic: An International Survey of Current Practice [published online, 2020 Aug 26]. Eur J Pediatr Surg. 2020; doi:10.1055/s-0040-1714714

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					reduced or stopped upper gastro-intestinal endoscopy. The management of simple appendicitis was unchanged in 70% centers, patients with intussusception were being referred for the radiological reduction in all centers, and definitive pull-through surgery for Hirschsprung patients was performed by 95% where washouts were successful. Timing of surgery for reducible neonatal inguinal hernias had changed in 55% of centers, and the management of urgent feeding gastrostomy referrals and inflammatory bowel disease patients failing with biological therapy varied considerably. Service provision has been severely affected by COVID-19 leading to an inevitable increase in untreated surgical pathology.	service provision for non-neonatal patients.	
Breast milk, breastfeeding, vertical transmission, neonate, Mexico	26-Aug-20	A Case Report of Newborn Infant with Severe COVID-19 in Mexico: Detection of SARS-CoV-2 in Human Breast Milk and Stool	International Journal of Infectious Disease	Case Report	There exists a lack of understanding about the source and potential for mother-to-infant vertical transmission of SARS-CoV-2. The authors report the case of a mother with COVID-19 and her female neonate who tested positive for SARS-CoV-2 at the time of birth in Mexico. The 21-year-old mother displayed symptoms of COVID-19 at 38 weeks of gestation and tested positive by RT-PCR. The infant was born via emergency c-section and was immediately separated from her mother after birth. Both nasopharyngeal and oropharyngeal swabs collected from the neonate during delivery tested positive for SARS-CoV-2 by RT-PCR. Additionally, the RT-PCR results showed a low cycle threshold value suggesting a high viral load in the neonate. The neonate had newborn jaundice, tachypnea, hyponatremia, central cyanosis, dyspnea, and an oxygen saturation of 87% and was classified as a severe case of COVID-19. The neonate was feed synthetic milk formula instead of human milk until she was confirmed as a case of COVID-19 without adverse effects. On the fourth day after delivery, RT-PCR analyses of the mother's milk and stool samples tested positive for SARS-CoV-2 RNA, and a similar finding was observed in the infant's stool sample. Nasopharyngeal and oropharyngeal swabs and stool samples taken from the infant on day 13 after delivery tested negative for SARS-CoV-2. However, maternal samples remained positive.	The authors report the case of a severe COVID-19 infection in a neonate born to a woman who tested positive during pregnancy in Mexico. Both nasopharyngeal and oropharyngeal swabs collected from the neonate immediately after birth tested positive for SARS-CoV-2 suggesting intrauterine vertical transmission. Additionally, shedding of SARS-CoV-2 RNA in maternal and infant stool and breast milk was detected.	Hinojosa-Velasco A, de Oca PVB, García-Sosa LE, et al. A Case Report of Newborn Infant with Severe COVID-19 in Mexico: Detection of SARS-CoV-2 in Human Breast Milk and Stool [published online ahead of print, 2020 Aug 26]. Int J Infect Dis. 2020;S1201-9712(20)30684-6. doi:10.1016/j.ijid.2020.08.055
Pediatrics, mental health, sedentary activity, social distancing	26-Aug-20	Combating the Dangers of Sedentary Activity on Child and Adolescent Mental Health During the Time of COVID-19	Journal of the American Academy of Child & Adolescent Psychiatry	Letter to the Editor	While the impact of the COVID-19 pandemic, subsequent quarantine, and social distancing on physical activity has been covered extensively, there has been limited focus on how the resulting sedentary behavior may impact mental health. Sedentary behavior has been found to correlate with increased risk of mental illness. In this letter to the editor, the author describes various strategies to combat the dangers of sedentary activity in children and adolescents. Participation in individual and group exercise has been found to be a robust pro-health activity. At the neighborhood level, local leaders could allow	The author emphasizes the importance of addressing the mental health consequences that have arisen as a result of the COVID-19 pandemic and subsequent physical inactivity in children and adolescents. It is important to explore ways to combat	Mittal VA, Firth J, Kimhy D. Combating the Dangers of Sedentary Activity on Child and Adolescent Mental Health During the Time of COVID-19 [published online ahead of print, 2020 Aug 26]. J Am Acad Child Adolesc Psychiatry. 2020;S0890-8567(20)31352-6. doi:10.1016/j.jaac.2020.08.003

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					staggered and monitored playground access with accessible hand sanitizer. Where outdoor school infrastructure is available, teacher- or trainer-led group physical activities can be conducted with proper social distancing. It is also important to provide resources to educate parents and guardians about the developmental importance of play as well as mental health benefits of regular activity. The author describes the need for policymakers, teachers, parents, and youth themselves to collaborate and cooperate.	sedentary activity in this population.	
Neonatal, health care, shortage of testing, PPE, equipment, pediatrics	26-Aug-20	COVID-19 and Newborn Care: April 2020	Pediatrics	Review	This study aimed to assess the impact of the COVID-19 pandemic on the health care of newborn infants and families. Vermont Oxford Network in partnership with the American Academy of Pediatrics Section on Neonatal-Perinatal Medicine conducted an audit in April 2020, including identifying the census of infants admitted within 28 days of birth, confirmed infant cases, and suspected infant cases, and asking about the shortages that significantly impacted care for infants and families in eligible hospitals. 434 hospitals participated and 359 completed the audit, of which 75% were in the USA. The highest level of care reported was predominantly level III (63%) or IV (26%) NICU. 39% had special COVID-19 units. The 275 hospitals completing the census reported 54 confirmed cases and 311 suspected COVID-19 cases among 11,341 eligible infants. Overall, 62% of hospitals reported no confirmed or suspected cases; 90% reported three or fewer. Of the 332 hospitals completing the shortage part, 54% reported significant shortages of equipment, testing, or personnel. 73% reported minor disruptions to care for infants and families; 3% reported an inability to provide care to some, most, or all infants. The authors concluded that there were a small number of newborns with suspected or confirmed COVID-19 and there were shortages of testing, equipment, and staff even in units with few or no cases.	This audit conducted in April 2020 provides a baseline for understanding the impact of COVID-19 on the care of newborns and families. The study showed a small number of newborns with suspected or confirmed COVID-19 and there were shortages of testing, equipment, and staff even in units with few or no cases.	Horbar JD, Edwards EM, Soll RF, Ehret DEY, Zayack D, Hudak ML. COVID-19 and Newborn Care: April 2020 [published online, 2020 Aug 26]. Pediatrics. doi:10.1542/peds.2020-002824
Transmission, pediatric, close contact, household transmission, hoarseness, German	26-Aug-20	Interrupted Chain of Transmission in a Pediatric COVID-19 Case [Free Access to Abstract only]	Klinische Padiatrie	Short Communication	This case report described a 9-year-old girl from Germany who was infected by SARS-CoV-2 by an unknown vector. To the best of the authors' knowledge, no other person became infected by her. On the day prior to the onset of acute symptoms, she only had hoarseness. On the next day, the girl experienced a sudden onset of feeling ill while playing in close contact with 2 of her siblings in an indoor area. She complained of a headache that she had never had before. Her auricular temperature was measured at 38.2°C. A few hours after she fell asleep, she became tachypneic and developed colicky abdominal pain and a further rise of temperature to 38.7°C. On the following day, she was tested positive for SARS-CoV-2 using RT-PCR. She had mild disease and recovered quickly. After 3 weeks, all household members were	This case report from Germany showed a 9-year-old girl suffering from COVID-19 without infecting another person with SARS-CoV-2 despite having close contact with other children and adults before developing symptoms and after symptoms had subsided.	Ebcm SG. Interrupted Chain of Transmission in a Pediatric COVID-19 Case [published online, 2020 Aug 26]. Klin Padiatr. doi:10.1055/a-1219-7978

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					tested negative for the presence of SARS-CoV-2 antibodies, except for the girl. She had been in close indoor contact with 3 adults and 3 children before the onset of symptoms. Two days before the onset of symptoms, she had been at school and had attended an indoor track and field training event with multiple children and teachers. None of the girl's contacts outside the family became knowingly infected.		
Pregnancy, research, repository, enrollment	26-Aug-20	Rapid establishment of a COVID-19 perinatal biorepository: early lessons from the first 100 women enrolled	BMC Medical Research Methodology	Original Research	Given the critical importance of including pregnant women and newborns in COVID-19 research, the authors sought to establish a biorepository containing wide-ranging sample types from pregnant women and their newborns at a major academic medical center in Boston, USA. They used a systematic approach to enrollment, with 100 women and 78 newborns enrolled between April 2 and June 9, 2020. They describe the challenges to enrolling and obtaining samples imposed by the COVID-19 pandemic and highlight the strategies used to overcome them. Cross-training study teams on both the adult and pediatric protocols, developing scripts for the consent to standardize the process, and instituting an outpatient consent strategy to complement the inpatient enrollment improved overall enrollment and sample collection rates. The rate at which mother-newborn dyads were enrolled increased overall, from 5 to over 8 per week. The highest sample yield was for placenta (96%), umbilical cord blood (93%), urine (99%), and maternal blood (91%). The lowest-yield sample types were maternal stool (30%) and breastmilk (22%).	The authors describe the establishment of a COVID-19 perinatal biorepository, the unique challenges imposed by the COVID-19 pandemic, and strategies used to overcome them to improve enrollment and sample collection.	Shook LL, Shui JE, Boatman AA, et al. Rapid establishment of a COVID-19 perinatal biorepository: early lessons from the first 100 women enrolled. BMC Med Res Methodol. 2020;20(1):215. Published 2020 Aug 26. doi:10.1186/s12874-020-01102-y
Tele-neuropsychology, healthcare delivery, practice models, telehealth, telemedicine	26-Aug-20	Transitioning to telehealth neuropsychology service: considerations across adult and pediatric care settings	The Clinical Neuropsychologist	Research Article	In response to the COVID-19 pandemic, neuropsychologists have sought to establish new guidelines and care models using telehealth neuropsychology (teleNP) services. Primary considerations for transitioning to teleNP include scope and limitations of the telehealth modality, informed consent for telehealth services, patient privacy and confidentiality, test security, and validity of telehealth assessments. Given timelines for fully re-opening clinical settings, access to traditional models of neuropsychological care remains unclear. The authors predict that these considerations will remain relevant even upon return to an in-office practice, as many assessment models will likely continue with teleNP to some extent. Specialists will need to consider the unique needs of their populations in ensuring quality care, as diagnostic differences and patient age will impact participation in teleNP.	TeleNP presents an opportunity and a challenge for neuropsychologists looking to provide patient care in the context of social distancing and stay-at-home restrictions. The field of neuropsychology has opportunities to advance beyond traditional settings and focus on alternative delivery of patient care.	Kelsey C. Hewitt, Sandra Rodgin, David W. Loring, Alison E. Pritchard & Lisa A. Jacobson (2020) Transitioning to telehealth neuropsychology service: considerations across adult and pediatric care settings, The Clinical Neuropsychologist, DOI: 10.1080/13854046.2020.1811891
COVID-19; CT; Imaging; Injury; Kidney; Renal	25-Aug-20	Acute reversible renal failure requiring temporary	Radiology Case Reports	Case Report	The authors report renal radiological changes in a 17-year-old male with morbid obesity (BMI 47.16) but no other previous medical history and COVID-19, and the proposed mechanisms for their development. The patient presented with fever, shortness	This is a case study of a 17-year-old boy with COVID-19-related kidney problems, with bilateral	Faqeeh S, Madkhali R. Acute reversible renal failure requiring temporary dialysis in a patient with COVID-19. Radiol Case Rep.

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		dialysis in a patient with COVID-19			of breath, productive cough and pleuritic chest pain and was admitted to ICU on May 27, 2020, where he tested positive for COVID-19 by nasopharyngeal swab. His clinical condition worsened, and the next day he was intubated. His serum creatinine level increased from 53 to 1147 $\mu\text{mol/L}$ on June 10. He received continuous renal replacement therapy followed by hemodialysis. An abdominal CT revealed bulky kidneys with bilateral peripheral focal areas of decreased attenuation. After 7 weeks of supportive treatment in the hospital, the patient's clinical status improved. A repeated CT scan of the abdomen/pelvis demonstrated improvement of the bilateral kidney changes, and he was discharged home. The authors state that renal COVID-19 effects can appear radiologically as bilateral peripheral low perfusion. The kidney changes in this patient were multiple bilateral low attenuation defects and infarctions, similar to vasculitis, likely related to vasculopathy. The authors suggest possible mechanisms for the development of vasculopathy, hypercoagulability, and acute kidney injury in patients with COVID-19, including direct cytopathic effects of the virus on endothelial cells and kidneys, cytokine storm, hypotension leading to renal hypoperfusion, and renal medullary hypoxia.	peripheral low perfusion on CT scan similar to findings in patients with vasculitis. The authors say the proposed mechanisms of COVID-19-related kidney dysfunction include direct cytopathic effects of the virus on endothelial cells and kidneys, cytokine storm, hypotension leading to renal hypoperfusion, and renal medullary hypoxia.	2020 Nov;15(11):2449-2452. doi: 10.1016/j.radcr.2020.08.049.
COVID-19; pregnancy; fetus; antenatal corticosteroids	25-Aug-20	Antenatal corticosteroids and COVID-19: balancing benefits and harms	American Journal of Obstetrics and Gynecology	Letter to the Editor	This letter is in response to Rasmussen et al.'s article 2020 recommending against the routine use of antenatal corticosteroids for fetal lung maturity in pregnant women with SARS-CoV-2 infection. The authors believe that this recommendation warrants further discussion and highlight the fact that the impact of corticosteroid treatment in nonpregnant patients with COVID-19 is currently unclear, precluding conclusions about likely maternal harm in the context of COVID-19. In these unique circumstances, decision-making about the use of antenatal corticosteroids should keep in mind that the absolute benefits of antenatal corticosteroids for fetal lung maturity change on a week-by-week basis during pregnancy. In births of <34 weeks' gestation, the absolute risk reduction of neonatal respiratory distress syndrome associated with antenatal corticosteroids is 128 fewer cases per 1000, from a baseline risk of 310 per 1000. In contrast, the absolute risk reduction of neonatal ventilation of >6 hrs associated with antenatal corticosteroids in those born at 34 weeks' gestation is 24 fewer cases per 1000 (95% CI, 14–35), from a US population baseline risk of 64 per 1000, and at 36 weeks' gestation, it is 7 fewer cases per 1000 (95% CI, 4–9), from a baseline risk of 17 per 1000. Considering the week-by-week absolute benefits of antenatal corticosteroids will help obstetrical care providers weigh the	This letter is in response to Rasmussen et al.'s 2020 article recommending against the routine use of antenatal corticosteroids for fetal lung maturity in pregnant women with SARS-CoV-2 infection. The authors argue that considering week-by-week absolute benefits of antenatal corticosteroids will help obstetric care providers weigh the potential harms and benefits of this treatment and minimize maternal harm while reducing the burden of neonatal respiratory morbidity.	Liauw J, Gundy S, Rochweg B. Antenatal corticosteroids and COVID-19: balancing benefits and harms. Am J Obstet Gynecol. 2020;223(6):956-957. doi:10.1016/j.ajog.2020.08.062.

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					potential harms and benefits of this treatment and minimize maternal harm while reducing the burden of neonatal respiratory morbidity in a time when ventilation resources are of paramount importance.		
Breastfeeding; COVID-19; India; misinformation; media; stigma; social support	25-Aug-20	Breastfeeding in India is disrupted as mothers and babies are separated in the pandemic	British Medical Journal (BMJ)	Commentary	This commentary discusses the impact of COVID-19 on breastfeeding in India, driven by separating mothers from infants and the provision of formula due to fears of infection. The author reports an increase in advertising for formula in India since the start of the pandemic, some of which contains incorrect information that conflicts with the WHO's recommendations. There have been instances of non-profit organizations distributing formula, which defies the Infant Milk Substitutes (IMS) Act of 1992 (though these actions have been denied or ceased by the accused parties). The author also argues that breastfeeding has been stigmatized in India, and the lack of clear guidance for COVID-19 positive mothers has resulted in high maternal anxiety. The author recommends informing leaders of non-profit organizations and health workers of the IMS Act and increasing support for lactating mothers. Additionally, he highlights efforts to combat this false information campaign and improve breastfeeding. Efforts include a Facebook group called "Breastfeeding Support for Indian Mothers," which has amassed over 126,000 members, and a training conducted by doctors in Mumbai on safe breastfeeding during the pandemic.	In this commentary, the author reports that false media campaigns and social stigma surrounding breastfeeding during COVID-19 in India has decreased breastfeeding rates. Additionally, the author highlights promising efforts to decrease maternal anxiety and maintain positive breastfeeding practices during the pandemic.	Bhatt, N. (2020). Breastfeeding in India is disrupted as mothers and babies are separated in the pandemic. <i>BMJ</i> 2020; 370 doi: https://doi.org/10.1136/bmj.m3316
vertical transmission, neonates, pregnancy, SARS-CoV-2, nanostructure, placenta	25-Aug-20	Comparative nanostructure consideration on novel coronavirus and possibility of transplacental transmission	American Journal of Obstetrics and Gynecology	Letter to the Editor	This letter briefly explores the theoretical possibility of transplacental transmission of SARS-CoV-2 from mother to fetus. Conceptually, the viral pathogen that is smaller than the pore size of the placenta can pass the placenta and further cause neonatal infection. For example, the transplacental transmission of HIV is explained by the particle size of the virus and the pore size of the placenta. However, the size of the SARS-CoV-2 virus is about 50 to 120 nm, whereas the pore size of the placenta is much smaller at about 10 nm. Therefore, the authors claim it is unlikely that transplacental transmission SARS-CoV-2 can occur if there is no placental pathology. The authors claim that SARS-CoV-2 infection in neonates is more likely explained by respiratory transmission from close contact with the mother.	The authors of this apply an analysis of nanostructure on the theoretical possibility of transplacental transmission of SARS-CoV-2 from mother to fetus. They claim that because the pore size of the placenta is substantially smaller than the size of SARS-CoV-2, they consider vertical transmission of SARS-CoV-2 through the placenta to be unlikely.	Sriwijitalai W, Wiwanitkit V. Comparative nanostructure consideration on novel coronavirus and possibility of transplacental transmission. <i>Am J Obstet Gynecol.</i> 2020;223(6):955. doi:10.1016/j.ajog.2020.08.061
vertical transmission, neonates, pregnancy, SARS-CoV-2,	25-Aug-20	Comparative nanostructure consideration on novel coronavirus and possibility of	American Journal of Obstetrics and Gynecology	Letter to the Editor	This letter briefly explores the theoretical possibility of transplacental transmission of SARS-CoV-2 from mother to fetus. Conceptually, the viral pathogen that is smaller than the pore size of the placenta can pass the placenta and further cause neonatal infection. For example, the transplacental transmission of HIV is explained by the particle size of the virus and the pore size of the	The authors of this apply an analysis of nanostructure on the theoretical possibility of transplacental transmission of SARS-CoV-	Sriwijitalai W, Wiwanitkit V. Comparative nanostructure consideration on novel coronavirus and possibility of transplacental transmission. <i>Am J</i>

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nanostructure, placenta		transplacental transmission			placenta. However, the size of the SARS-CoV-2 virus is about 50 to 120 nm, whereas the pore size of the placenta is much smaller at about 10 nm. Therefore, the authors claim it is unlikely that transplacental transmission SARS-CoV-2 can occur if there is no placental pathology. The authors claim that SARS-CoV-2 infection in neonates is more likely explained by respiratory transmission from close contact with the mother.	2 from mother to fetus. They claim that because the pore size of the placenta is substantially smaller than the size of SARS-CoV-2, they consider vertical transmission of SARS-CoV-2 through the placenta to be unlikely.	Obstet Gynecol. 2020;223(6):955. doi:10.1016/j.ajog.2020.08.061
Child health, food insecurity, free school meals, public health nutrition, public health policy	25-Aug-20	Half of children entitled to free school meals did not have access to the scheme during COVID-19 lockdown in the U.K.	Public Health	Original Research	This cross-sectional study investigated access to free school meals (FSMs) among eligible children (n=635, age range=4-18 years) in the U.K. during COVID-19 lockdown. Multi-variable logistic regression was used to analyze associations between demographics and access to FSMs and associations between household food insecurity measures and access to FSMs, which were categorized as either prepared meals or vouchers that could be used to purchase food. 51% of eligible children accessed an FSM during the month after lockdown. Children in junior school or above (8+ years old) (AOR: 11.81; 95% CI: 5.54, 25.19), who belonged to low-income families (AOR: 4.81; 95% CI: 2.10, 11.03) or who were still attending school (AOR: 5.87; 95% CI: 1.70, 20.25) were more likely to receive FSMs. Children in Wales were less likely to access FSMs than those in England (AOR: 0.11; 95% CI: 0.03, 0.43). Access to FSMs was not associated with reported hunger; however, those using FSM benefits were 14 times more likely to have recently used a food bank (OR: 13.89; 95% CI: 2.27, 85.10). The authors conclude that FSM vouchers were inadequate replacements for prepared FSMs, as children attending school were more likely to receive a meal, and assert that U.K. lawmakers must do more to support families relying on income-related benefits, especially in case of a second wave of infections and in the economic recession likely following the pandemic.	According to this cross-sectional case study, 49% of eligible children in the U.K. did not access a free school meal in the month following COVID-19 lockdown. The authors urge lawmakers to improve access to free school meals and other income-related benefits in case another lockdown occurs.	Parnham JC, Laverty AA, Majeed A, et al. Half of children entitled to free school meals did not have access to the scheme during COVID-19 lockdown in the UK. Public Health. 2020;187:161-164. doi:10.1016/j.puhe.2020.08.019
Children, mental health, development	25-Aug-20	Children and the Pandemic: Staying Optimistic	NEJM Catalyst	Conversation	The ways in which children are being impacted by the pandemic is compounded by an increased lack of in-school learning and social exposure. In an interview, the President of UCSF Benioff Children's Hospitals and ASPR Senior Advisor at the U.S. Department of Health and Human Services explains that children seem to be less affected than adults by COVID-19, possibly due to differences in their ACE 2 receptor. However, MIS-C seems to be a severe consequence of SARS-CoV-2 infection. Additionally, he discusses the impact of the pandemic on children's mental and developmental gains due to less in-person schooling. He explains that the debate	The President of UCSF Benioff Children's Hospitals and ASPR Senior Advisor at the U.S. Department of Health and Human Services responds to questions about the COVID-19 pandemic and its impact on children. He discusses the clinical issues, as well as the ways that the	Children and the Pandemic: Staying Optimistic Catalyst non-issue content. Catalyst.nejm.org. https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0492. Published 2020.

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					of how children can return to school safely is a public health and educational issue. He recommends that children's hospitals, pediatricians, and health systems collaborate to provide incoming medical data to the community.	pandemic is impacting the health of children across the world.	
Pregnant women, obstetric care, pregnancy, isolation, infection precaution	25-Aug-20	COVID-19 Barriers to Care for Pregnant Patients in Prolonged Isolation	Case Reports in Obstetrics and Gynecology	Case Report	The authors report a case of a 36-year-old previously healthy primigravida Haitian female who had preterm premature rupture of membranes at 19 weeks of gestation. Upon admission at 22 weeks and 5 days of gestation, she had experienced one month of intermittent dry cough and leakage of clear fluid. She was treated with latency antibiotic therapy and antenatal corticosteroids and fetal monitoring. The patient had positive SARS-CoV-2 RNA tests for 6 consecutive weeks and remained in isolation despite the resolution of mild symptoms during her first week of admission. The care team was concerned that her mood, engagement, and appetite were being affected by prolonged isolation. The patient expressed how difficult it had been to cope with the prognosis of her infant while isolated in a negative pressure room for weeks and communicating only through iPad screens and virtual interpreters. The authors argue that not only was the isolation for the patient personally demanding in the setting of the novel coronavirus and pregnancy, but her experience as a non-English speaking immigrant also amplified her isolation. The authors conclude that obstetric healthcare providers may not be able to provide the highest quality care during the COVID-19 pandemic with the essential precautions in place.	The authors report the case of a 36-year-old female from Haiti during her first pregnancy who remained admitted in isolation, though asymptomatic, for over 6 weeks due to persistent positive SARS-CoV-2 testing. The authors describe the challenges of physical isolation, language barriers, and cultural differences in obstetric healthcare during the COVID-19 pandemic.	Burgoyne ME, Elsamadicy EA, Cojocar L, Desai A. COVID-19 Barriers to Care for Pregnant Patients in Prolonged Isolation. Case Rep Obstet Gynecol. 2020. Published 2020 Aug 25. doi:10.1155/2020/8847859
Hyperglycemia, hypoglycemia, fasting blood glucose, glycemic target, China	25-Aug-20	J-shaped association between fasting blood glucose levels and COVID-19 severity in patients without diabetes	Diabetes Research and Clinical Practice	Original Article	This retrospective, multi-centered study in China of 293 COVID-19 adult patients without diabetes explores the association between fasting blood glucose (FBG) levels and the risk of COVID-19 disease progression, with the goal of providing clinical evidence for glycemic targets in patients. In comparison to FBG for mild and moderate cases (median 5.30, IQR 4.80–5.90 mmol/L), severe and critical patients had significantly higher FBG (median 7.35, IQR 5.60–9.58 mmol/L, $p < 0.0001$). COVID-19 patients in severe or critical condition had significantly lower high-density lipoprotein (HDL) levels (median 1.15, IQR 0.97–1.41 mmol/L) than mild and moderate cases (median 1.02, IQR 0.83–1.25 mmol/L, $p < 0.0001$). FBG levels were plotted in quintiles with levels set at <4.74 mmol/L, 4.74–5.21 mmol/L, 5.21–5.78 mmol/L, 5.78–7.05 mmol/L, and ≥ 7.05 mmol/L. The constituent ratio of severe and critical cases in each FBG quintile was 20.7%, 1.7%, 13.8%, 27.1%, and 67.2%, respectively ($p < 0.0001$). The authors found that associations between FBG and risk of severe or critical condition were J-shaped for symptomatic COVID-19 adult patients without diabetes, with a nadir at 4.74–5.78 mmol/L, and	This retrospective, multi-centered study in China provides evidence that associations between fasting blood glucose and risk of severe or critical condition were J-shaped for symptomatic COVID-19 adult patients without diabetes, with a nadir at 4.74–5.78 mmol/L, and varying magnitudes of association.	Zhu B, Jin S, Wu L, et al. J-shaped association between fasting blood glucose levels and COVID-19 severity in patients without diabetes [published online ahead of print, 2020 Aug 25]. Diabetes Res Clin Pract. 2020;168:108381. doi:10.1016/j.diabres.2020.108381

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					varying magnitudes of association. The authors demonstrated that HDL can be used as a protective factor for preventing COVID-19 exacerbation.		
MIS-C, pediatric, arrhythmia, second-degree heart block, transvenous pacing	25-Aug-20	High-Grade Heart Block Requiring Transvenous Pacing Associated with Multisystem Inflammatory Syndrome in Children During the COVID-19 Pandemic	HeartRhythm Case Reports	Case Report	This report describes the case of an 11-year-old male presenting in April 2020 with fever, dyspnea, cough, rash, and conjunctival injection. Imaging studies demonstrated pneumonia, a respiratory panel was positive for Mycoplasma pneumoniae, and SARS-CoV-2 RT-PCR testing was negative. Lab studies revealed a hyper-inflammatory state, neutrophilia, and lymphopenia. An EKG showed coronary artery dilation, and aspirin and IV immunoglobulin (IVIG) was given. Multiple antibiotic regimens were tried. On hospital day 4, the patient was diagnosed with second-degree type II heart block. A trans-venous bipolar pacing catheter was placed, and he received methylprednisolone. The day after pacer placement, the patient improved to second-degree type I block. 48 hours later, his status changed to a first-degree atrio-ventricular block, trans-venous pacing was discontinued, and the patient remained stable. An ELISA assay was positive for anti-COVID-19 IgG, and IgM was negative. The patient's hyper-inflammation, coronary artery dilation, and high-grade heart block were deemed consistent with MIS-C. The authors contribute this patient's recovery to methylprednisolone, IVIG, and trans-venous pacing. They encourage vigilance for cardiac complications in patients with MIS-C.	These authors present the case of a pediatric patient who developed severe hemodynamic instability and high-grade heart block associated with MIS-C requiring trans-venous pacing.	Domico M, McCanta AC, Hunt JL, Ashouri N, Nugent D, Kelly RB. High-Grade Heart Block Requiring Transvenous Pacing Associated with Multisystem Inflammatory Syndrome in Children During the COVID-19 Pandemic [published online, 2020 Aug 25]. HeartRhythm Case Rep. 2020; doi:10.1016/j.hrcr.2020.08.015
Children, adolescent, depression, anxiety, autism spectrum disorder (ASD), attention deficit/hyperactivity disorder (ADHD), telehealth	25-Aug-20	Psychosocial consequences of COVID -19 in children, adolescents and young adults: a systematic review	Psychiatry and Clinical Neurosciences	Letter to the Editor	This letter presents the main findings of a systematic review of 21 studies (n=33,398) on psychosocial consequences of COVID-19 in children, adolescents, and young adults. The background, methods, and results are presented as an online supplement. According to the findings, excess worrying, irritability, home confinement and fear of COVID-19 infection and transmission are associated with mild to severe anxiety symptoms during the COVID-19 pandemic. Isolation could be a risk factor for deterioration in mental health, including depressive and anxiety symptoms, distress, fear, post-traumatic stress, and insomnia. During the pandemic, children and adolescents with autism spectrum disorder and attention deficit/hyperactivity disorder exhibited negative behavioral changes. Screen time increased and physical activity decreased for young people. Telehealth was reported to be effective in diminishing and managing emotional symptoms in both youth and parents.	According to this review, excess worrying, irritability, home confinement, and fear of COVID-19 infection are associated with anxiety symptoms during the pandemic. Isolation could be a risk factor for mental health deterioration, including depressive and anxiety symptoms, distress, fear, post-traumatic stress, and insomnia.	Stavridou A, Stergiopoulou AA, Panagouli E, et al. Psychosocial consequences of COVID -19 in children, adolescents and young adults: a systematic review [published online ahead of print, 2020 Aug 25]. Psychiatry Clin Neurosci. 2020;10.1111/pcn.13134. doi:10.1111/pcn.13134
Nutrition, immune response, exercise, respiratory muscle training	25-Aug-20	Physical activity and nutrition guidelines to help with the	Journal of Sports Sciences	Original Article	Staying at home to prevent the spread of the virus during the COVID-19 pandemic and being largely inactive is associated with unintended consequences which can increase infection risk and exacerbate poor health conditions, including impaired immune function. This review aims to provide practical guidelines for	This review aims to provide practical guidelines for nutrition, diet, and exercise during the COVID-19 quarantine	Khoramipour K, Basereh A, Hekmatikar AA, et al. Physical activity and nutrition guidelines to help with the fight against COVID-19. Journal of Sports

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		fight against COVID-19			nutrition, diet, and exercise during the COVID-19 quarantine period. The authors suggest performing aerobic, resistance training, respiratory muscle training and yoga in the healthy, and in those with upper respiratory tract illness; patients with lower respiratory tract illness should be restricted to respiratory muscle training and yoga. Vitamins D and C, omega-3 fatty acids, and regular consumption of fruit and vegetables might be considered as nutritional aids to support the immune system in those affected by COVID-19. Given that no specific treatments have yet been identified, the authors emphasize the importance of proper nutrition along with balanced diet and exercise to maintain a healthy immune system.	period, depending on the individual's health status.	Sciences. Published 2020 Aug 25. doi.org/10.1080/02640414.2020.1807089
Pediatric, infectious diseases, asymptomatic infection, research	25-Aug-20	A Pediatric Infectious Disease Perspective of SARS-CoV-2 and COVID-19 in Children	Journal of the Pediatric Infectious Diseases Society	Review Article	Evidence on the role of children in the clinical burden and transmission of SARS-CoV-2 is emerging. Severe manifestations and acute clinical burden of COVID-19 has largely spared children compared to adults; however, understanding the epidemiology, clinical presentation, diagnosis, management, and prevention opportunities as well as the social and behavioral impacts of the pandemic on child health is vital. Efforts are necessary to clarify the contribution of asymptomatic and mild infections to transmission within households and communities as well as to understand the clinical and epidemiologic significance of uncommon severe post-infectious complications. In this article, the authors summarize the current knowledge, identify useful resources, and outline research opportunities related to pediatric SARS-CoV-2 infection. They argue that pediatric infectious disease clinicians have a unique opportunity to advocate for the inclusion of children in epidemiological, clinical, treatment, and prevention COVID-19 studies. These clinicians also should represent children in the development of guidance and policy during the pandemic response.	This article reviews the current state of knowledge of SARS-CoV-2 infection in children. The authors argue that the pediatric infectious diseases community should advocate for the inclusion of children in clinical research, treatment, and prevention trials for COVID-19.	Shane AL, Sato AI, Kao C, et al. A Pediatric Infectious Disease Perspective of SARS-CoV-2 and COVID-19 in Children [published online, 2020 Aug 25]. J Pediatric Infect Dis Soc. 2020;pii:099. doi:10.1093/jpids/piaa099
Minority, mood, prenatal, socioeconomic status, stress, New York, USA	25-Aug-20	Early Pregnancy Mood Before and During COVID-19 Community Restrictions Among Women of Low Socioeconomic Status in New York City: A Preliminary Study	Archives of Women's Mental Health	Short Communication	The authors conducted this study to explore the mental health consequences of COVID-19-related social restrictions on pregnant women with low socio-economic status. They included women who appeared for their first prenatal appointment at the Mount Sinai Hospital OB/GYN Ambulatory Practice, New York, USA, between February 3 and June 12, 2020. The Edinburgh Postnatal Depression Scale (EPDS) was provided to all women as a screening for prenatal mood dysregulation, with a cutoff score of ≥ 12 consistent with probable depression. Of the 485 women who completed the EPDS, 406 (83.7%) reported mood changes over the past two weeks, 3 women (15.1%) had a score ≥ 9 , and 40 women (8.2%) had a score ≥ 12 . There was no significant difference in mean EPDS scores between women screened before and after New York's March 12, 2020 ban on large gatherings (5.0	This study suggests that mood dysregulation symptoms for minority women of low socioeconomic status declined despite COVID-19-related social restrictions. However, these results might prove temporary as the pandemic continues, and as economic and employment concerns worsen.	Silverman ME, Medeiros C, Burgos L. Early pregnancy mood before and during COVID-19 community restrictions among women of low socioeconomic status in New York City: a preliminary study [published online, 2020 Aug 25]. Arch Womens Ment Health. 2020;10.1007/s00737-020-01061-9

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					vs. 4.5, $p = 0.25$). However, the mean EPDS score for women screened in the six weeks before social restrictions was higher than the mean EPDS score for those screened in the last six weeks of available data, during restrictions (5.0 vs. 3.9, $p < 0.01$). Furthermore, a post hoc analysis showed no significant difference in prenatal appointment attendance by week ($p = 0.59$) after restrictions were implemented.		
Pregnancy, breastfeeding, clinical trials, research	25-Aug-20	Include pregnant women in research-particularly covid-19 research	BMJ	Editorial	Clinical trials, especially of drugs, frequently exclude pregnant and breastfeeding women. Therefore, the safety of treatments in this population is often unknown. This article highlights the RECOVERY (Randomized Evaluation of COVID-19 Therapy) trial, which has included pregnant and breastfeeding women. The authors suggest that researchers link trial data to routine surveillance systems for pregnancy and infant outcomes, for easier integration of information. They recommend that the default process for trials be to include, rather than exclude, pregnant and breastfeeding women. This practice is particularly important during the COVID-19 pandemic, in order to provide the full benefit of potentially life-saving vaccines and treatments to this population.	This editorial recommends that the default process for clinical trials be to include, rather than exclude, pregnant and breastfeeding women. This practice is particularly important during the COVID-19 pandemic.	Knight M, Morris RK, Furniss J, Chappell LC. Include pregnant women in research-particularly covid-19 research. <i>BMJ</i> . 2020;370:m3305. Published 2020 Aug 25. doi:10.1136/bmj.m3305
Pregnancy, maternal leave policies, asymptomatic, Italy	25-Aug-20	Asymptomatic SARS-CoV-2 infections in pregnant patients in an Italian city during complete lockdown	Journal of Medical Virology	Original Research	Italy imposed a complete COVID-19 lockdown in mid-March 2020. Genoa, Italy has had a high prevalence of COVID-19, with 3508 new cases reported in April 2020. On 1 April, all four hospitals in Genoa began screening every intrapartum patient with rt-PCR testing from nasopharyngeal swabs. This study analyzed the results of these screenings from 1-30 April 2020. Within this time frame, 333 women were tested, with a mean age of 35.02 years (SD 6.02 years). Nine (2.7%) of the women were symptomatic. All patients reported they had stopped working and were observing complete lockdown. One symptomatic patient (0.3% of all tested) and 6 asymptomatic patients (1.8%) tested positive. Out of the total 324 asymptomatic patients, five of the six who tested positive lived in the most disadvantaged neighborhood in the city. Compared to other reports, data from this study show a low prevalence of SARS-CoV-2 in asymptomatic pregnant patients. The authors credit lockdown and social distancing with the low prevalence of infection in this study.	This study analyzes the prevalence of SARS-CoV-2 infection in intrapartum women in Genoa, Italy, in April 2020. Compared to other reports, this study presents a low prevalence of SARS-CoV-2 in asymptomatic pregnant patients.	Massarotti C, Adriano M, Cagnacci A, et al. Asymptomatic SARS-CoV-2 infections in pregnant patients in an Italian city during complete lockdown [published online ahead of print, 2020 Aug 25]. <i>J Med Virol</i> . 2020;10.1002/jmv.26458. doi:10.1002/jmv.26458
Medical isolation, parental separation, child welfare, child mental health, ethics	25-Aug-20	Family Presence for Patients and Separated Relatives During COVID-19: Physical, Virtual, and Surrogate	Journal of Bioethical Inquiry	Symposium: COVID-19	During the COVID-19 pandemic, infected persons (including children) may need to undergo strict medical isolation and be separated from their families. Such a practice raises ethical questions, sometimes weighing the hazards of non-infected parents staying with their infected children in isolation facilities against the psychological costs of separation. Drawing on lessons from the 2002-2003 SARS epidemic and the recent Ebola epidemic in West Africa, this paper examines the ethical	This paper examines the ethical management of three modes of “family presence” during the COVID-19 pandemic: physical, virtual, and surrogate. The authors argue that it is sometimes	Voo TC, Senguttuvan M, Tam CC. Family Presence for Patients and Separated Relatives During COVID-19: Physical, Virtual, and Surrogate [published online, 2020 Aug 25]. <i>J Bioeth Inq</i> . 2020;1-6. doi:10.1007/s11673-020-10009-8

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					management of three modes of “family presence” during the COVID-19 pandemic: physical, virtual, and surrogate. Physical presence is usually prohibited or limited to exceptional circumstances. Virtual presence is often allowed when technology is available. When visits are not allowed, frontline workers may act as surrogate family for patients, performing bedside vigils for dying patients or serving as surrogate caregivers for children. The authors argue for allowing physical presence under some conditions, particularly when children are young or very ill, and when it is feasible for parents to remain in isolation with their children and comply with necessary infection control measures.	ethically necessary to allow the physical presence of parents for very young and critically ill children when parents can comply with infection control measures.	
Pediatric, school reopening, mask adherence, modeling, USA	25-Aug-20	Impacts of K-12 school reopening on the COVID-19 epidemic in Indiana, USA	medRxiv	Pre-print (not peer-reviewed)	Schools in the USA are reopening despite a high incidence of COVID-19, necessitating analyses of the associated risks and benefits. The authors sought to determine the impact of school reopening on COVID-19 burden using a modeling study with the mock population of Indiana. Eleven scenarios were compared with varying levels of school operating capacity and face-mask adherence. The authors projected 19,527 (95% CI: 4,641-56,502) infections and 360 (95% CI: 67-967) deaths if schools operated remotely from August 24 to December 31, 2020. Reopening at full capacity with low face-mask adherence resulted in a proportional increase of 81.7 (95% CI: 78.2-85.3) times the number of infections and 13.4 (95% CI: 12.8-14.0) times the number of deaths. Operating at reduced capacity with high face-mask adherence resulted in only an 11.6% (95% CI: 5.50%-17.9%) increase in the number of infections. The authors concluded that reduced capacity and high face-mask adherence in schools would substantially reduce the burden of COVID-19 in schools and across the state. They note that the model does not capture heterogenous decisions across school districts within the state.	The authors modeled the impact of various school reopening scenarios in Indiana, USA on COVID-19 infections and deaths. The results suggest that schools should give serious consideration to reducing their capacity and enforcing adherence to face masks.	Espana G, Cavany S, Oidtmann R et al. Impacts of K-12 school reopening on the COVID-19 epidemic in Indiana, USA. [published online, 2020 Aug 25]. medRxiv. doi:https://doi.org/10.1101/2020.08.22.20179960
Children, dental care, dentist-patient relation, pandemic, Poland	25-Aug-20	Children's Dental Anxiety during the COVID-19 Pandemic: Polish Experience	Journal of Clinical Medicine	Original Article	The authors assessed the emotional state of 25 children aged 4 to 7 years who required intervention at the Pediatric Dentistry Clinic at Poznan University of Medical Sciences, Poland, during the COVID-19 nationwide quarantine (pandemic group), between 24 March and 30 April 2020. The pre-pandemic group used for comparison consisted of 20 children aged 4 to 7 years requiring dental intervention between January and June 2018. The children's emotional state was evaluated in the waiting room before dental procedures by a caregiver, dentist, and by the child, using the Faces Anxiety Scale and transforming the results into Likert scales. The level of anxiety in caregivers was also measured. The results showed that children requiring dental intervention during the nationwide quarantine did not have a significantly higher anxiety level than the age- and indication-	This study suggests that the reorganization of oral healthcare under the COVID-19 pandemic scenario did not profoundly affect children's dental anxiety. It also highlights the importance of reassuring caregivers on the safety of dental visits during the pandemic to minimize the effect of their anxiety on dental fears in children.	Olszewska A, Rzymiski P. Children's Dental Anxiety during the COVID-19 Pandemic: Polish Experience. J Clin Med. 2020;9(9):E2751. Published 2020 Aug 25. doi:10.3390/jcm9092751

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					matched pre-pandemic control group, regardless of whether their emotional state was evaluated by the dentist, caregivers, or by themselves. Moreover, caregiver anxiety levels were higher in the pandemic group than the pre-pandemic subset and revealed stronger correlations with the dental anxiety in children.		
Placenta, ACE2, TMPRSS2, spike glycoprotein, vertical transmission	25-Aug-20	Consistent localization of SARS-CoV-2 spike glycoprotein and ACE2 over TMPRSS2 predominance in placental villi of 15 COVID-19 positive maternal-fetal dyads	Placenta	Original Research	The reported rates of vertical transmission of SARS-CoV-2 from an infected mother to infant are low (<5%). However, the localization and abundance of SARS-CoV-2 viral proteins and cellular entry machinery within the placenta remain largely uncharacterized. The authors examined placenta tissue samples from 15 COVID-19 positive maternal-fetal dyads and 10 COVID-19 negative controls. Of the positive maternal-fetal dyads, 5 neonates had a positive COVID-19 nasal swab providing evidence of fetal transmission. Immunofluorescence was used to examine the localization and abundance of the SARS-CoV-2 spike glycoprotein (CoV2 SP) as well as the co-localization of the SARS-CoV-2 viral entry proteins ACE2 and transmembrane serine protease 2 (TMPRSS2) within the placental samples. In COVID-19 positive pregnancies with and without fetal transmission, CoV2 SP was present within the villous placenta. CoV2 SP and ACE2 localized within the outer syncytiotrophoblast layer of the placental villi. However, TMPRSS2 expression was absent from both groups of placentas. Pathological analysis of the placental tissue from COVID-19 positive pregnancies revealed increased fibrosis and subchorionic thickening compared to negative controls. Additionally, since the placenta shares developmental and physiological similarities with the lung and intestine, the authors propose that placental tissue may provide an opportunity to test future diagnostic and therapeutic targets for SARS-CoV-2.	The authors characterize the localization and abundance of the SARS-CoV-2 spike glycoprotein (CoV2 SP), ACE2, and transmembrane serine protease 2 (TMPRSS2) in the placentas of COVID-19 positive maternal-fetal dyads compared to non-infected controls. In the placental tissue from COVID-19 positive pregnancies, CoV SP2 and ACE2 were both localized to syncytiotrophoblasts at the maternal-fetal interface, while TMPRSS2 was not expressed.	Taglauer E, Benarroch Y, Rop K, et al. Consistent localization of SARS-CoV-2 spike glycoprotein and ACE2 over TMPRSS2 predominance in placental villi of 15 COVID-19 positive maternal-fetal dyads [published online ahead of print, 2020 Aug 25]. Placenta. 2020;100:69-74. doi:10.1016/j.placenta.2020.08.015
Intrauterine vertical transmission, pregnant, neonatal infection, viremia	25-Aug-20	Letter to the editor: "Clinical characteristics and intrauterine vertical transmission potential of COVID-19 infection in nine pregnant women: a retrospective review of medical records"	American Journal of Obstetrics and Gynecology	Letter to the Editor	Although Chen et al. report that there is currently no evidence for intra-uterine infection caused by vertical transmission in women who develop COVID-19 pneumonia in late pregnancy, the authors believe that there is not enough existing data to support this conclusion. The authors hypothesize that COVID-19 is able to target placenta directly by forming viremia to infect the fetus through maternal-fetal vertical transmission. In order to confirm the assumption of no intra-uterine vertical transmission of COVID-19 infection, researchers should first confirm the existence of viremia caused by COVID-19, and then quantify the load of virus in blood. The authors support the use of both RNA-based molecular tests and IgM-capture ELISA to diagnose infection in cord blood, gastric swab, rectal swab, and throat swab after the neonatal were born.	The authors note a lack of data to support the conclusion that SARS-CoV-2 cannot be transmitted from mother-to-fetus by intra-uterine infection. The authors argue that combining IgM-capture ELISA and RNA-based molecular tests may improve the accuracy to confirm neonatal infection.	Li P, Xie M, Zhang W. Letter to the editor: "Clinical characteristics and intrauterine vertical transmission potential of COVID-19 infection in nine pregnant women: a retrospective review of medical records" [published online 2020 Aug 25]. Am J Obstet Gynecol. 2020;S0002-9378(20)30908-X.
Equity, states, schools	25-Aug-20	Reopening K-12 Schools in the	The Journal of Pediatrics	Review	Using online searches, the authors collected state-level documents from all 50 states in the USA and the District of	The lack of correlation between income	Li A, Harries M, Ross LF. Reopening K-12 Schools in the

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		Era of COVID-19: Review of State-level Guidance Addressing Equity Concerns			Columbia discussing reopening plans for Kindergarten to grade 12 (K-12) schools in the 2020-2021 academic year, examining whether these documents mentioned equity as a concern. Forty-four of 51 states (86%) explicitly mentioned equity as a concern or guiding principle, with at least 90% of states offering guidance for 7 equity issues. Nevertheless, wide variability exists in state-level guidance to help K-12 schools develop reopening plans that protect those who are most vulnerable to learning loss or reduced access to basic needs. As such, the authors conclude that interpretation and implementation by local educational agencies will need to be assessed.	inequality, educational attainment, health scores, or poverty rates and the degree of equity guidance suggests that state-level planning committees in the USA may be crafting K-12 school equity guidelines independently of state-level measures of inequity.	Era of COVID-19: Review of State-level Guidance Addressing Equity Concerns [published online ahead of print, 2020 Aug 28]. <i>J Pediatr.</i> 2020;50022-3476(20)31105-7. doi:10.1016/j.jpeds.2020.08.069
Cesarean, vaginal, delivery, obstetric	25-Aug-20	SARS-CoV-2 possible contamination of genital area: implications for sexual and vertical transmission routes	Journal of the European Academy of Dermatology and Venereology	Letter to the Editor	The authors voice concern over the possible transmission of COVID-19 during vaginal birth. They review that a rectal swab can be positive for SARS-CoV-2, even when a nasopharyngeal swab from the same patient is negative. The vaginal canal could become contaminated with virus from the rectum. The authors therefore recommend routine nasopharyngeal, vaginal, and rectal testing for SARS-CoV-2 on each pregnant patient, even if asymptomatic and without COVID-19 positive contacts. They suggest cesarean delivery if either the vaginal or rectal swab is positive for SARS-CoV-2, to prevent transmission to the neonate at birth.	These authors recommend routine nasopharyngeal, vaginal, and rectal testing for SARS-CoV-2 on all pregnant patients. They suggest cesarean delivery if either the vaginal or rectal swab is positive for SARS-CoV-2, to prevent transmission to the neonate at birth.	Delfino M, Guida M, Patri A, Spirito L, Gallo L, Fabbrocini G. SARS-CoV-2 possible contamination of genital area: implications for sexual and vertical transmission routes. <i>J Eur Acad Dermatol Venereol.</i> 2020;34(8):e364-e365. doi:10.1111/jdv.16591
Anxiety, India, perinatal, postpartum, pregnancy, women	25-Aug-20	COVID-19-related anxiety and concerns expressed by pregnant and postpartum women-a survey among obstetricians	Archives of Women's Mental Health	Short Report	Infectious disease epidemics cause anxiety in pregnant women about several aspects of childbirth including disrupted expectations related to pre-l and postnatal care. The authors conducted an online survey among obstetricians in India to understand the nature of concerns about COVID-19 that pregnant and postpartum women Tthe survey also asked about what methods they used to handle psychological distress and their need for resources. Of the 118 obstetricians who responded, most had been contacted for concerns about hospital visits (72.65%), methods of protection (60.17%), the safety of the infant (52.14%), anxieties related to social media messages (40.68%) and contracting the infection (39.83%). Obstetricians mentioned using the following methods to handle COVID-19 related anxiety among pregnant and postpartum women: 88.89% provided reassurance, 80.34% educated women about COVID-19, 40.17% recommended meditation and relaxation techniques, 24.79% sent reading material and website links, 12.82% used distraction techniques and 1.71% prescribed anti-anxiety medications. The authors determined that there is an urgent need to train obstetricians and midwives in managing psychological distress during the ongoing pandemic.	This paper from India describes anxieties that pregnant and postpartum women reported to obstetricians during the COVID-19 pandemic. Obstetricians were contacted most about concerns about hospital visits (72.65%), methods of protection (60.17%), the safety of the infant (52.14%), anxieties related to social media messages (40.68%) and contracting the infection (39.83%).	Nanjundaswamy MH, Shiva L, Desai G, et al. COVID-19-related anxiety and concerns expressed by pregnant and postpartum women-a survey among obstetricians [published online ahead of print, 2020 Aug 25]. <i>Arch Womens Ment Health.</i> 2020. doi:10.1007/s00737-020-01060-w
Pregnancy stress, prenatal maternal	25-Aug-20	Psychometric properties of the	Journal of Psychosomati	Original Article	Pregnant women are facing numerous COVID-19 related burdens including social isolation, financial insecurity, uncertainty about	The authors conducted an online questionnaire and	Preis H, Mahaffey B, Lobel M. Psychometric properties of the

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stress, psychometrics, United States		Pandemic-Related Pregnancy Stress Scale (PREPS) [Free Access to Abstract Only]	c Obstetrics and Gynaecology		the impact of the virus on fetal development, and prenatal care restrictions. The authors sought to test the psychometric properties of the Pandemic-Related Pregnancy Stress Scale (PREPS). The authors recruited via social media 4,451 pregnant women from across the USA who completed an online questionnaire in April-May 2020 to assess the extent and types of pandemic-related stress experienced by pregnant women. The questionnaire included measures of psychological, sociodemographic, and obstetric factors and PREPS. Confirmatory factor analyses of the PREPS showed excellent model fit. Three factors - Perinatal Infection Stress, Preparedness Stress, and Positive Appraisal - converged and diverged with expected psychological factors, and scales created from these factors demonstrated acceptable to good reliability (α 's 0.68-0.86). In addition, mean PREPS scores were associated with perceived risk of infection, and with financial and vocational COVID-19 related burdens. The authors found that PREPS is a robust instrument to assess multidimensional COVID-19 pandemic prenatal stress.	found that PREPS is a robust instrument to assess multidimensional COVID-19 pandemic prenatal stress. Additionally, the authors determined that mean PREPS scores were associated with perceived risk of infection, and with financial and vocational COVID-19 related burdens.	Pandemic-Related Pregnancy Stress Scale (PREPS). J Psychosom Obstet Gynaecol. 2020;41(3):191-197. doi:10.1080/0167482X.2020.1801625
Italy, neonate, breastmilk, breast feeding	25-Aug-20	An Uninfected Preterm Newborn Inadvertently Fed SARS-CoV-2-Positive Breast Milk	Pediatrics	Case Report	Variable recommendations exist for the breastfeeding and management of neonates born to mothers with asymptomatic or pauci-symptomatic COVID-19. SARS-CoV-2 is rarely detected in breast milk, and the risk of disease transmission through breastmilk still remains hypothetical. The authors report the case of a healthy preterm neonate inadvertently fed SARS-CoV-2 positive breast milk in Modena, Italy. The neonate was born at 32 weeks' gestation by emergency C-section and was intubated at birth and received surface for respiratory distress syndrome. The newborn was fed donor human or expressed breast milk and reached full enteral feeding on Day 9 of life. On postpartum Day 3, the mother was discharged home where she developed a sore throat and asthenia. She returned to the hospital on postpartum Day 9 and brought breast milk expressed at home without precautions for SARS-CoV-2 infected mothers. The fresh breast milk was given to the neonate (8 feedings of 28 mL each). On postpartum Day 9, the mother was febrile and tested positive for SARS-CoV-2. The fresh expressed breast milk that was given to the newborn tested positive for SARS-CoV-2 by RT-PCR and this breast milk was discontinued. Additionally, a second breast milk sample collected using sterile precautions on postpartum Day 9 also tested positive for SARS-CoV-2. The infant did not develop COVID-19 symptoms and had a normal chest X-ray, blood gases, as well as negative nasopharyngeal and stool sample swabs for the virus on Days 8, 10, and 18 of life. Sera samples from the neonate tested negative for viral IgG and IgM antibodies on Day 25 of life. This case may demonstrate the possible protective	The authors document the case of a preterm neonate who was fed SARS-CoV-2 positive breast milk and did not become infected with the virus. This case demonstrates the potential protective benefits of fresh breast milk. Furthermore, it provides support for the continuation of breastfeeding in most cases of maternal SARS-CoV-2 infection since infection transmission through breast milk is rare.	Lugli L, Bedetti L, Lucaccioni L, et al. An Uninfected Preterm Newborn Inadvertently Fed SARS-CoV-2-Positive Breast Milk [published online ahead of print, 2020 Aug 25]. Pediatrics. 2020;e2020004960. doi:10.1542/peds.2020-004960

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Children, families, food insecurity, intimate partner violence, lockdowns, Bangladesh	25-Aug-20	Immediate impact of stay-at-home orders to control COVID-19 transmission on socioeconomic conditions, food insecurity, mental health, and intimate partner violence in Bangladeshi women and their families: an interrupted time series	The Lancet Global Health	Original research	This interrupted time series aimed to determine the immediate impact of COVID-19 lockdown orders on women and their families in rural Bangladesh. The authors collected data from families in Rupganj upazila, rural Bangladesh, 1 and 2 years prior to the COVID-19 pandemic, as well as during the lockdown. 3,016 mothers of children enrolled in a prior study were randomly selected, and 2,424 consented to participate in this study. 2,414 (99.9%, 95% CI 99.6–99.9) of 2,417 mothers were aware of, and adhering to, the stay-at-home advice. 2,321 (96.0%, 95.2–96.7) of 2,417 mothers reported a reduction in paid work for the family. Median monthly family income fell from US\$212 at baseline to \$59 during lockdown, and the proportion of families earning less than \$1.90 per day rose from 5 (0.2%, 0.0–0.5) of 2,422 to 992 (47.3%, 45.2–49.5) of 2,096 ($p < 0.0001$ comparing baseline with lockdown period). Before the pandemic, 136 (5.6%, 4.7–6.6) of 2,420 and 65 (2.7%, 2.1–3.4) of 2,420 families experienced moderate and severe food insecurity, respectively. This increased to 881 (36.5%, 34.5–38.4) of 2,417 and 371 (15.3%, 13.9–16.8) of 2,417 during the lockdown; the number of families experiencing any level of food insecurity increased by 51.7% (48.1–55.4; $p < 0.0001$). Mothers' depression and anxiety symptoms increased during the lockdown. Among women experiencing emotional or moderate physical intimate partner violence, over half reported it had increased since the lockdown. COVID-19 lockdowns present significant economic, psycho-social, and physical risks to the wellbeing of women and their families across economic strata in rural Bangladesh, and support is needed for all affected families.	This study presents data showing the degree to which rural families in Bangladesh have experienced decreased family income and increased food security, mothers' depression and anxiety symptoms, and intimate partner violence during the COVID-19 lockdowns.	Hamadani JD, Hasan MI, Baldi AJ, et al. Immediate impact of stay-at-home orders to control COVID-19 transmission on socioeconomic conditions, food insecurity, mental health, and intimate partner violence in Bangladeshi women and their families: an interrupted time series [published online 2020 Aug 25]. Lancet Glob Health. 2020. doi:10.1016/S2214-109X(20)30366-1
Children, testing, nasopharyngeal swab, nasopharyngeal aspirate, Italy	25-Aug-20	Diagnosis of SARS-CoV-2 in children: accuracy of nasopharyngeal swab compared to nasopharyngeal aspirate	medRxiv	Preprint (not peer-reviewed)	This study evaluated the diagnostic performance of nasopharyngeal swab (NS) compared to nasopharyngeal aspirate (NPA) for the detection of SARS-CoV-2 in children. 300 paired specimens (NS and NPA) were collected from 136 patients, 134 hospitalized and 2 outpatients. Of the 600 total specimens, there were 43 positive and 257 negative NPA, and 31 positive and 269 negative NS. The NS has a low sensitivity (about 58%) in detecting SARS-CoV-2 in children when referred to NPA; the NS specificity was found to be about 98%, suggesting the NS was more suitable to rule-in positive NPA patients than rule-out negative NPA patients. The influence of age was not statistically significant. However, among the records for subjects < 6 years old, the mismatch for negative values of NS to positive results of NPA was less than the results for the same analysis for all subjects and for subjects ≥ 6 years old. In children under 6 years of age, these results suggest preferring the collection of NS whenever possible,	The authors summarize a comparison of testing children with nasopharyngeal swabs and nasopharyngeal aspirate for SARS-CoV-2. They conclude that, with a specificity of about 98%, testing with nasopharyngeal swabs would be preferable for children < 6 years old.	Di Pietro GM, Capecci E, Luconi E, et al. Diagnosis of SARS-CoV-2 in children: accuracy of nasopharyngeal swab compared to nasopharyngeal aspirate [published online 2020 Aug 25]. medRxiv. 2020. doi:10.1101/2020.08.20.20178012

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					due to its high specificity. Further analysis is needed to transfer these findings to clinical practice.		
Pediatrics, prevalence	25-Aug-20	Prevalence of SARS-CoV-2 Infection in Children Without Symptoms of Coronavirus Disease	JAMA Pediatrics	Research Letter	The authors report the prevalence of positive SARS-CoV-2 test results in children without symptoms at 28 children's hospitals across the US. Out of 33,041 children (age 0-18 years) presented for non-COVID-19-related medical care through 29 May 2020, 250 children tested positive for SARS-CoV-2 via RT PCR. Prevalence of pediatric SARS-CoV-2 within combined statistical areas ranged from 0%-2.2% (pooled 0.65%) and was significantly associated with weekly incidence of COVID-19 in the general population. These data indicate low pooled prevalence of asymptomatic SARS-CoV-2 cases and suggest that site-specific prevalence data have greater utility than regional pooled prevalence for local decision-making. The strong association between prevalence of SARS-CoV-2 in asymptomatic children and weekly incidence of COVID-19 in the general population provides a means for institutions to estimate local pediatric asymptomatic prevalence from the publicly available Johns Hopkins University database. This prevalence can be used to guide policy on institutional settings for children within that community and estimate pretest probability for SARS-CoV-2 screening.	Prevalence of SARS-CoV-2 in asymptomatic children is significantly associated with community incidence of COVID-19. Institutions can use COVID-19 incidence reports publicly available from Johns Hopkins University to estimate local pediatric prevalence and guide policy decisions.	Sola AM, David AP, Rosbe KW, et al. Prevalence of SARS-CoV-2 Infection in Children Without Symptoms of Coronavirus Disease 2019. JAMA Pediatr. 25 Aug, 2020. doi:10.1001/jamapediatrics.2020.4095
Lockdown, youth, lifestyle.	25-Aug-20	Impact of COVID-19 Pandemic Led Lockdown on the Lifestyle of Adolescents and Young Adults	MedRxiv	Pre-print (not peer-reviewed)	To study the effect of the COVID-19 pandemic on young adult and adolescent lifestyles, the authors conducted an online questionnaire-based survey in approximately 1000 respondents between the ages of 13-25 years. Results suggested a mean increase in sleep duration from 6.85 hours to 8.17 hours and an average screen time increase from 3.5 hours to 5.12 hours. 51.9% subjects reported increased stress levels, 76.4% subjects reported increased food intake, and 38.6% subjects reported decreased levels of physical activity as per self-monitoring. The authors conclude that the COVID-19 pandemic could have long lasting effects on the physical, mental and social health of young adults and adolescents.	Counteractive measures may be needed to help young people lead a healthy lifestyle during the COVID-19 pandemic and beyond.	Shubhajeet R, Sunita Tiwari, Shweta Kanchan, et al., Impact of COVID-19 Pandemic Led Lockdown on the Lifestyle of Adolescents and Young Adults, MedRxiv, DOI:https://doi.org/10.1101/2020.08.22.20180000
Rheumatology, auto-immune, screening, pregnancy, Italy	24-Aug-20	Efficacy of a screening strategy for the detection of rheumatic diseases in early pregnancy during COVID-19 pandemic	Lupus	Letter	Given the overlap in symptoms described in COVID-19 pregnant women, such as arthralgia and fever, and those present in systemic auto-immune rheumatic diseases, the authors describe the use of a screening strategy for auto-immune connective tissue diseases (CTD) in Northern Italy during the pandemic. The screening is based on a 2-step strategy: all pregnant women during the 1st trimester complete a questionnaire; the positivity of the questionnaire [not defined] is followed by auto-antibody testing and rheumatologic evaluation. To assess the influence of the pandemic on the screening strategy, the author compared the results obtained in a 3-month period in 2019 (February-April) with those obtained in the same period in 2020 during the	The authors compared the use of a screening strategy for auto-immune connective tissue disease in pregnant women in Northern Italy during the pandemic to prior to the pandemic. They found that the number of questionnaires administered, percentage of positive symptoms, and	Ramoni VL, Xoxi B, Beneventi F, Bellingeri C, Montecucco C, Spinillo A. Efficacy of a screening strategy for the detection of rheumatic diseases in early pregnancy during COVID-19 pandemic. Lupus. 2020 Nov;29(13):1821-1823. doi: 10.1177/0961203320952848.

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					<p>pandemic. The number of questionnaires administered was not different (134 in 2019 vs 130 in 2020) and the percentage of positive symptoms was similar between the two time periods (17.9% vs 23.1%). The number of women refusing to perform additional tests and rheumatological visits was slightly higher during the pandemic. However, the percentage of positive tests for auto-antibodies was similar in 2019 and 2020 (26.7% vs 33.3%). The authors conclude that this screening strategy has confirmed its accuracy and efficacy even in a pandemic.</p>	percentage of positive auto-antibody tests did not change significantly between the two time periods.	
<p>Psychosocial oncology, adverse childhood experience, anxiety symptom, sleep quality, suicide ideation, China</p>	24-Aug-20	<p>The Effect and Mechanism of Adverse Childhood Experience on Suicide Ideation in Young Cancer Patients During Coronavirus Disease 2019 (COVID-19) Pandemic</p>	<p>Risk Management and Healthcare Policy</p>	<p>Original Research</p>	<p>This study explores the effect of adverse childhood experiences (ACEs) on suicide ideation in young cancer patients in China during the COVID-19 pandemic. Self-reported questionnaires analyzed the mediating effects of sleep quality, anxiety symptoms, and inflammatory conditions on ACEs and suicide ideation. From January - May 2020, 197 young cancer patients were recruited by online recruitment and snowball sampling. The average age of participants was 36.5 years (range 18-40 years). ACEs were positively related to anxiety symptoms, serum C-reactive protein (CRP) levels, and suicide ideation, and negatively related to sleep quality ($p < 0.01$). Anxiety symptoms ($p < 0.001$) and CRP levels ($p = 0.011$) were positively related to suicide ideation, while sleep quality was negatively related to suicide ideation ($p < 0.01$). Anxiety symptoms were positively related to CRP levels but negatively related to sleep quality ($p < 0.01$). From these results, the authors found ACEs affected suicide ideation directly and were mediated by roles of sleep quality, anxiety symptom, and CRP. ACEs not only directly affected suicide ideation but also affected suicide ideation through sleep quality, anxiety symptoms, and inflammatory conditions in young cancer patients during the pandemic. Targeted intervention and help for cancer patients taking ACEs into account should be put into practice.</p>	<p>This cross-sectional study in China found that in young cancer patients, adverse childhood experiences not only affected suicide ideation directly but also affected suicide ideation by affecting sleep quality, anxiety symptoms, and inflammatory conditions during the COVID-19 pandemic.</p>	<p>Yang G, Xiao C, Li S, Yang N. The Effect and Mechanism of Adverse Childhood Experience on Suicide Ideation in Young Cancer Patients During Coronavirus Disease 2019 (COVID-19) Pandemic. Risk Manag Healthc Policy. 2020;13:1293-1300 https://doi.org/10.2147/RMHP.S266269</p>
<p>Schools, school re-opening, primary school, secondary school, England</p>	24-Aug-20	<p>SARS-CoV-2 infection and transmission in educational settings: cross-sectional analysis of clusters and outbreaks in England</p>	<p>British Medical Journal (BMJ)</p>	<p>Original Research</p>	<p>The present study investigated the transmission of COVID-19 within educational settings in England during the summer mini-term of 2020. Public Health England engaged in enhanced national surveillance during the mini-term beginning June 1, 2020, through July 31, 2020. They monitored COVID-19 outbreaks and calculated the infection and outbreak rates for staff and students at the early educational settings, predominantly primary and secondary schools. They found that COVID-19 cases were uncommon. They monitored 67 single confirmed cases and 30 outbreaks during June 2020. These outbreaks were significantly related to regional COVID-19 incidence. Staff members had increased risk of infection compared to students, with 15 of the 30 confirmed outbreaks assumed to be transmitted staff to staff,</p>	<p>The present study investigated the transmission of COVID-19 within educational settings in England during the summer mini-term of 2020. Researchers found that COVID-19 cases were uncommon, and that they correlated with community incidence rates. Most transmission</p>	<p>Ismail, S. A., Saliba, V., Bernal, J. A., et al. SARS-CoV-2 infection and transmission in educational settings: Cross-sectional analysis of clusters and outbreaks in England. 2020. doi:10.1101/2020.08.21.20178574</p>

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					and only 2 transmitted from student to student. This study highlighted the need to reduce community transmission in order to reduce the threat to transmission in schools, and suggests that interventions should focus on reducing transmission among educational staff.	occurred among staff members.	
Remdesivir, third-trimester pregnancy, United States	24-Aug-20	Remdesivir Treatment for Severe COVID-19 in Third-Trimester Pregnancy: Case Report and Management Discussion	Open Forum Infectious Diseases	Brief Report	The authors report a case of 39-year-old woman in third trimester pregnancy with COVID-19 who required ICU care and received remdesivir in the United States. The patient, a healthcare worker who works with COVID-19 patients, arrived at Labor and Delivery triage following dry cough and dyspnea for 8 days, with associated mild anorexia and decreased oral intake. Upon symptom onset, she isolated at home and tested positive for SARS-CoV-2 via nasopharyngeal swab. She was afebrile on presentation and without supplemental oxygen requirement. She received an IV fluid bolus and was discharged. Two days later, the patient returned with significant worsening of dyspnea on exertion. She was found to be hypoxic and tachypneic, and chest x-ray showed bilateral hazy opacities suspicious for COVID-19 pneumonia. She was admitted to the obstetrics service and over the next 12 hours, the supplemental oxygen requirement increased from nasal cannula to nonrebreather and the ratio of oxygen saturation to fraction of inspired oxygen worsened significantly. She was transferred to medical ICU and remdesivir was initiated on day 2 as compassionate use. Fetal status was evaluated twice daily with a nonstress test and remained reassuring through her ICU course. Her supplemental oxygen requirement decreased steadily, and she was discharged on day 9 after having completed 8 of a planned 10 days of remdesivir. The patient reported ongoing cough and dyspnea on exertion but with significant improvement 10 days after discharge. Upon full recovery, she had an uncomplicated vaginal delivery at term.	The authors report a case of COVID-19 in third-trimester pregnancy in the United States, who required ICU support and received remdesivir. After discharge, she had an uncomplicated vaginal delivery at term. These observations suggest that COVID-19 in pregnancy may be managed without emergent delivery.	Maldarelli GA, Savage M, Mazur S. Remdesivir treatment for severe COVID-19 in third-trimester pregnancy: Case report and management discussion. Open Forum Infectious Diseases. 2020;7(9). doi: 10.1093/ofid/ofaa345
Race, ethnicity, racism, equity, health disparities, food insecurity, schools, children, USA	24-Aug-20	Converging Pandemics Impact on Students, Schools, and Communities: COVID-19 and Racism	National Association of School Nurses (NASN) School Nurse	Research Article	The consequences of COVID-19 have both illuminated and exacerbated racial, educational, and health disparities for school-aged children in the US. This article summarizes the inequities experienced by school-aged children and adolescents in racial/ethnic minority groups in the context of the COVID-19 pandemic and highlights the role of school nurses in combating these disparities. The author provides specific examples of structural and systemic barriers that lead to health disparities (food insecurity and limited access to physical and mental health care services) and educational disparities (segregation, underfunded districts, lack of access to high-level courses, and racially-biased disciplinary practices). They also highlight resources for school nurses and staff to better recognize and	This article summarizes the racial, educational, and health disparities experienced by school-aged children and adolescents in the context of the COVID-19 pandemic and highlights the role of school nurses in combating these disparities. In particular, they provide resources to better recognize and respond to personally-mediated and	Combe LG. Converging Pandemics Impact on Students, Schools, and Communities: COVID-19 and Racism [published online, 2020 Aug 24]. NASN Sch Nurse. 2020;35(5):246-249. doi:10.1177/1942602X20945324

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					respond to racial bias and promote equity for the students they serve.	institutionalized racism in US schools.	
School closure, pandemic, logic model, conceptual framework, evidence synthesis, novel coronavirus	24-Aug-20	School closure in response to epidemic outbreaks: Systems-based logic model of downstream impacts	F1000 Research	Research Article	School closures have been recommended during the COVID-19 pandemic, but this intervention is likely to have far-reaching impacts. The authors searched for literature on school closures related to epidemics, from the 1918-19 flu outbreak through COVID-19. They ultimately used policy documents and 177 research studies to develop a systems-based logic model. The model demonstrates that school closures impact children's health, children's education, school staff, the school organization, families, public health, and the economy. The authors discuss potential moderating factors that might change the impact of school closures, such as viral infectivity and the length of closure. Finally, they briefly address ethical considerations on the topic of school closures. The authors urge decision-makers to use this information when considering future school closure policy and possible mitigation strategies.	The authors used existing literature on epidemic-related school closures, including those during the COVID-19 pandemic, to develop a systems-based logic model showing the impacts of such closures.	Kneale D, O'Mara-Eves A, Rees R and Thomas J. School closure in response to epidemic outbreaks: Systems-based logic model of downstream impacts [version 1; peer review: 2 approved]. F1000Research 2020, 9:352 (https://doi.org/10.12688/f1000research.23631.1)
Telerehabilitation, pediatrics	24-Aug-20	Potentials of Telerehabilitation for Families of Children With Special Healthcare Needs During the Coronavirus Disease 2019 Emergency—Reply	JAMA Pediatrics	Response to comment	In this reply, the authors respond to comments from Provenzi and Borgatti who offered their perspectives on telerehabilitation solutions during the COVID-19 pandemic. The authors agree that a specialized approach to tailoring the delivery of pediatric care is needed. They encourage innovation for pediatric care because children and their families will require novel approaches to medical management and engagement. Looking forward, the authors explain the importance of being mindful of the unintended consequences of the pandemic, including delayed care, worsening care for those with medical needs, and widespread mental and economic harms. For children, the diversion of resources and distraction away from non-COVID-19 illness may have severe consequences. Additionally, continued well child care and the use of telemedicine are encouraged.	The authors reply to comments and discuss the importance of mitigating the unintended consequences of the COVID-19 pandemic on children's health through innovation of pediatric care, continued well visits, and the use of telemedicine.	Thompson L, Rasmussen S. Potentials of Telerehabilitation for Families of Children With Special Healthcare Needs During the Coronavirus Disease 2019 Emergency—Reply. JAMA Pediatr. 2020. doi:10.1001/jamapediatrics.2020.2357
Functional food, lifestyle prevention, exercise, viral infection, immune system	24-Aug-20	Antiviral Functional Foods and Exercise Lifestyle Prevention of Coronavirus	Nutrients	Review	In this review the authors present key evidence on how functional foods and physical activity can optimize the immune system response to viral infection, especially respiratory tract infections and COVID-19. Exercise enhances innate and adaptive immune systems through acute, transient, and long-term adaptations to physical activity in a dose-response relationship. Moderate intensity exercise can be adopted by the large population including high-risk groups with non-communicable diseases to reduce viral risk and enhance sleep quality, in combination with appropriate dietary habits and functional foods. Functional foods may provide a further effective diverse antiviral approach and could have a joint prevention of both non-communicable diseases and communicable diseases among diverse populations. Dietary intake of foods rich in vitamins and	In this review the author present key evidence on how functional foods and physical activity can optimize the immune system response to viral infection, especially respiratory tract infections and COVID-19. The author also makes specific and practical evidence-based recommendations for the use of antiviral functional	Alkhatib A. Antiviral Functional Foods and Exercise Lifestyle Prevention of Coronavirus. Nutrients. 2020;12(9):E2633. Published 2020 Aug 28. doi:10.3390/nu12092633

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					minerals can be increased to provide an immune boost, especially in individuals with deficiency in these micronutrients. Increased intake of probiotics, omega-3 from fish, protein peptides from chicken and fish, and olive-based products are also recommended to optimize immune function. The author concludes that exercise together and an enhanced dietary intake of functional compounds may be preventative against emerging viral infections.	foods and lifestyle approaches.	
Pregnancy, symptoms, laboratory findings, clinical outcomes, Wuhan, China	24-Aug-20	Clinical Characteristics and Outcomes of Childbearing-Age Women With COVID-19 in Wuhan: Retrospective, Single-Center Study	Journal of Medical Internet Research	Original Research	In this retrospective study, the authors describe the clinical, laboratory, imaging findings, and clinical outcomes of 43 childbearing-age women (17 pregnant and 26 non-pregnant women) in Wuhan, China infected with SARS-CoV-2 from January 19 to March 2, 2020. Among the 17 pregnant women, 1 was in the 1st trimester, 3 were in the 2nd, and 13 were in the 3rd trimester. Pregnant women had a markedly higher proportion of exposure to hospitals within 2 weeks before onset compared to non-pregnant women (9/17, 53% vs 5/26, 19%, P=.02) and a lower proportion of other family members affected (4/17, 24% vs 19/26, 73%, P=.004). Fever (47% vs 69%) and cough (53% vs 46%) were common initial symptoms. Abdominal pain (24%), vaginal bleeding (6%), reduced fetal movement (6%), and increased fetal movement (13%) were observed in the pregnant patients. Higher neutrophil and lower lymphocyte percent were observed in the pregnant group compared to the non-pregnant group (79% vs 56%, P<0.001; 15% vs 33%, P<0.001, respectively). Concentrations of alkaline phosphatase and D-dimer in the pregnant group were significantly higher than those of the non-pregnant group (119.0 vs 48.0 U/L, P<0.001; 2.1 vs 0.3µg/mL, P<0.001, respectively). None of the patients developed critical illness and there was no significant difference in the length of hospitalization between the two groups.	This study assessed the epidemiological, clinical, laboratory, and imaging findings of 17 pregnant women compared with 26 non-pregnant women of childbearing age infected with COVID-19 in Wuhan, China. Although some differences in epidemiology and clinical presentation were observed, there was no significant difference in severe or adverse outcomes between the two groups.	Wei L, Gao X, Chen S, et al. Clinical Characteristics and Outcomes of Childbearing-Age Women With COVID-19 in Wuhan: Retrospective, Single-Center Study. J Med Internet Res. 2020;22(8):e19642. Published 2020 Aug 24. doi:10.2196/19642
Adolescents, children, lockdown, mental health	24-Aug-20	Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations	Psychiatry Research	Review	In this systematic review, the authors analyze and categorize articles on mental health impacts on children and adolescents during the COVID-19 pandemic and lockdown. They used PubMed, Cochrane Library, Science-direct and Google Scholar databases from January - June 2020. The authors categorize vulnerability factors like developmental age, educational status, pre-existing mental health condition, being economically under-privileged, and being quarantined due to infection or fear of infection, which all determine the quality and magnitude of COVID-19-related impacts on pediatric mental health. The authors provide specific recommendations in these categories for parents, pediatricians, teachers, school counselors, and mental healthcare providers. The authors also suggest that collaborative networks of stakeholders use evidence-based strategies to	This review breaks down COVID-19-related pediatric mental health impacts by various vulnerability factors. The authors provide specific recommendations for stakeholders and suggest planning longitudinal and developmental studies to understand the full impact of the pandemic on children's mental health.	Singh S, Roy D, Sinha K, et al. Impact of COVID-19 and lockdown on mental health of children and adolescents: A narrative review with recommendations. Psychiatry Res. 2020;293:113429. doi:10.1016/j.psychres.2020.113429

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					mobilize and cater to the mental health needs of vulnerable children and adolescents during and after the pandemic. The authors conclude that there is a crucial requirement for planning longitudinal and developmental studies examining long-term effects of the pandemic on children's and adolescent's mental health.		
Children, pediatric outpatient visits, infectious diseases, transmission, China	24-Aug-20	Assessment of Pediatric Outpatient Visits for Notifiable Infectious Diseases in a University Hospital in Beijing During COVID-19	JAMA Network Open	Research Letter	The authors performed a cross-sectional study to determine changes in pediatric outpatient visits for infectious diseases acquired through droplet transmission, contact transmission, or both during COVID-19 outbreak in Beijing. The authors identified all pediatric outpatient visits during the COVID-19 outbreak (January 19–April 15, 2020) and a matched control period in the previous year (January 19–April 16, 2019) and collected demographic and diagnostic information. A total of 2420 pediatric outpatient visits (median patient age, 4 [interquartile range, 2–6] years; 1325 [55%] male) were identified during the COVID-19 outbreak, an 83% decrease from 2019. Thirty-four patients with notifiable infectious diseases were reported during the outbreak, a 91% decrease from 2019. The proportion of patients with notifiable infectious diseases in pediatric outpatient visits (difference, –1.2%; 95% CI, –1.7% to –0.6%; P < 0.001), especially the proportion with influenza (difference, –1.3%; 95% CI, –1.8% to –0.8%; P < 0.001), was significantly lower during the outbreak than in 2019. The authors argue that strict implementation of public health control measures in response to COVID-19 might have inhibited droplet and contact transmission of common infectious viruses.	The authors performed a cross-sectional study and found an 83% decrease in pediatric outpatient visits for notifiable infectious diseases in a university hospital in Beijing, China during the COVID-19 outbreak. The authors argue that strict implementation of public health control measures in response to COVID-19 might have inhibited droplet and contact transmission of common infectious viruses.	Luo Z, Li S, Li N, et al. Assessment of Pediatric Outpatient Visits for Notifiable Infectious Diseases in a University Hospital in Beijing During COVID-19. JAMA Netw Open. 2020;3(8). doi:10.1001/jamanetworkopen.2020.19224
Neonates, protocols, ICU, delivery rooms, isolation	24-Aug-20	Role of a Neonatal Intensive Care Unit during the COVID-19 Pandemia: recommendations from the neonatology discipline	Revista da Associação Médica Brasileira	Clinical Perspective	This article describes the expansion and restructuring of a neonatal ICU in São Paulo, Brazil to meet the anticipated needs of neonates with expected or confirmed COVID-19. It describes the initial set-up of the NICU medical team and equipment, the procedures for transporting a neonate from the delivery room to the unit, and care of the neonate during hospitalization including testing, isolation, breastfeeding, and routine care. The authors describe specific procedures regarding breastfeeding, stating that in the delivery room skin-to-skin contact and breastfeeding in the first hour are suspended during the pandemic. The authors also outline their protocol for evaluating neonates identified in the outpatient setting as having a flu-like illness or who have a caregiver with flu-like illness, including but not limited to COVID-19. When hospitalized, visits from the asymptomatic mother will be allowed in the afternoon, with a human milk collection room available for extraction of breast milk to offer to the child during the mother's absence.	This article describes a protocol developed in São Paulo, Brazil to meet the new demand for hospital care of neonates with suspected or confirmed COVID-19. The authors recommend that in the delivery room skin-to-skin contact and breastfeeding in the first hour are should be suspended for the duration of the pandemic.	Carvalho WB, Gibelli MABC, Krebs VLJ, Tragante CR, Perondi MBM. Role of a Neonatal Intensive Care Unit during the COVID-19 Pandemia: recommendations from the neonatology discipline. Rev Assoc Med Bras (1992). 2020;66(7):894-897. doi:10.1590/1806-9282.66.7.894

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Pediatric, MIS-C, Evans syndrome, hemolytic anemia, immune thrombocytopenia	24-Aug-20	Immune dysregulation and Multisystem Inflammatory Syndrome in Children (MIS-C) in individuals with haploinsufficiency of SOCS1	Journal of Allergy and Clinical Immunology	Original Article	The authors present two unrelated patients with immune thrombocytopenia and auto-immune hemolytic anemia in the setting of acute infections. One patient developed MIS-C with a SARS-CoV-2 infection. They performed whole exome sequencing on both patients. Each patient was found to have a unique heterozygous truncation variant in Suppressor of Cytokine Signaling 1 (SOCS1), which is an essential negative regulator of type I and type II interferon (IFN) signaling. The patients showed increased levels of STAT1 phosphorylation and a transcriptional signature characterized by increased expression of type I and type II interferon stimulated genes and pro-apoptotic genes. The enhanced IFN signature exhibited parallels the hyperinflammatory state associated with MIS-C, suggesting the contribution of SOCS1 in regulating the inflammatory response characteristic of MIS-C. The authors conclude that heterozygous loss-of-function SOCS1 mutations are associated with enhanced interferon signaling and increased immune cell activation, thereby predisposing to infection-associated auto-immune cytopenias.	This study details two unrelated patients with SOCS1 haplo-insufficiency and Evans syndrome. The authors suggest that these cases highlight the utility of whole-exome sequencing for identifying genetically susceptible individuals at risk for developing auto-immune complications of SARS-CoV-2, including MIS-C.	Lee PY, Platt CD, Weeks S, et al. Immune dysregulation and Multisystem Inflammatory Syndrome in Children (MIS-C) in individuals with haploinsufficiency of SOCS1 [published online, 2020 Aug 24]. J Allergy Clin Immunol. doi:10.1016/j.jaci.2020.07.033
Canada, ACE2, TMPRSS2, preeclampsia, preterm birth	24-Aug-20	Expression of SARS-CoV-2 cell entry genes, ACE2 and TMPRSS2, in the placenta across gestation and at the maternal-fetal interface in pregnancies complicated by preterm birth or preeclampsia	American Journal of Obstetrics and Gynecology	Original Research	While there is some evidence that SARS-CoV-2 can invade the human placenta, limited data exist on the gestational-age dependent expression profile of the SARS-CoV-2 cell entry mediators, ACE2 and TMPRSS2, at the human maternal-fetal interface, and whether expression of these are altered in pregnancies complicated by pre-eclampsia (PE) or preterm birth (PTB). This cross-sectional study assessed expression patterns of ACE2 and TMPRSS2 in 2 separate cohorts with a total of 87 pregnant women at a hospital in Toronto, Canada. The 1st cohort comprised of placentae from 1st, 2nd, and 3rd-trimester preterm, and 3rd trimester term pregnancies (n=5 per group). The 2nd cohort included matched decidua and placentae from pregnancies from term, uncomplicated pregnancies (n=14) as well as pregnancies complicated by PTB (n=11) or PE (n=42). In the 1st cohort, there were increased mRNA levels of ACE2 and TMPRSS2 in the 1st trimester compared to 2nd trimester, PTB and term placentae (p<0.05), and the mRNA levels exhibited a negative correlation with gestational age (p<0.05). In the 2nd cohort, very low/undetectable levels of ACE2 were seen in PTB, PE, and term placentae, but TMPRSS2 was expressed in both decidua and placental samples and did not change in pregnancies complicated by either PTB or PE. The authors state that these findings suggest there may be differential susceptibility to placental entry of SARS-CoV-2 across pregnancy.	The authors observed increased expression of ACE2 and TMPRSS2 in the placenta during the first trimester in comparison to later stages of pregnancy, suggesting possible differential susceptibility to placental entry of SARS-CoV-2 across pregnancy.	Bloise E, Zhang J, Nakpu J, et al. Expression of SARS-CoV-2 cell entry genes, ACE2 and TMPRSS2, in the placenta across gestation and at the maternal-fetal interface in pregnancies complicated by preterm birth or preeclampsia [published online 2020 Aug 24]. Am J Obstet Gynecol. 2020; doi:10.1016/j.ajog.2020.08.055

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Turkey, children, favipiravir, immigrant	24-Aug-20	Characteristics and Management of Children With COVID-19 in Turkey	Balkan Medican Journal	Report	The authors conducted a retrospective review of pediatric patients < 18 years who were diagnosed with COVID-19 and admitted to hospitals in Turkey between March 11, and June 23, 2020. 220 patients were evaluated, of which 48.2% were male, with a median age of 10 years, and 9.5% had underlying diseases. Patients were classified according to severity, with the percentages of asymptomatic, mild, moderate, and critical/severe cases determined to be 25.5%, 45%, 26.8%, and 2.7%, respectively. Extracorporeal membrane oxygenation was required for 2 patients (0.9%) and mechanic ventilation was required for 3 patients (1.4%). Targeted therapies were used in 6 patients (2.7%), with hydroxychloroquine being the most commonly used agent either alone (1 patient) or in combination with favipiravir (5 patients). Two patients (0.9%) had died and 9 (4.1%) were still hospitalized during the study period. Based on preliminary observations, the authors suggest that pediatric treatment strategies consist primarily of supportive care.	Although the disease course of COVID-19 seems to be mild in children, critical illness is significant. Increased data associated with the disease course in children and the outcomes of the patients under targeted therapies will guide experts in the accurate management of future cases.	Cura Yayla BC, Ozsurekci Y, Aykac K, et al. Characteristics and Management of Children With COVID-19 in Turkey [published online ahead of print, 2020 Aug 31]. <i>Balkan Med J.</i> 2020;10.4274/balkanmedj.galenos.2020.2020.7.52. doi:10.4274/balkanmedj.galenos.2020.2020.7.52
Children, poverty	24-Aug-20	COVID-19 apocalypse for children: Predictable, preventable?	Journal of Paediatrics and Child Health	Brief Communication	The author argues that children and young people can be predicted to face a preventable apocalypse from the downstream economic effects of the pandemic. To summarize the impact of a possible prolonged world-wide recession, the author lists associations of severe childhood poverty, including things children could be deprived of and the potential permanent harms due to that deprivation. The author argues that a new cooperative globalization that redefines the roles of all people via economic strategies could prevent or at least reduce the direst consequences. The author further argues that pediatricians can be advocates and activists for children as efforts to mitigate the effects of poverty are made.	The author describes the possible economic impact of the COVID-19 pandemic on children and young people, and calls on pediatricians to be advocates for children as strategies to mitigate the effects of poverty are developed.	Kilham HA. COVID-19 apocalypse for children: Predictable, preventable? [published online 2020 Aug 24]. <i>J Paediatr Child Health.</i> 2020;56(8):1311-1312. doi:10.1111/jpc.15039
Adolescent, child, health anxiety, review	24-Aug-20	Practitioner Review: Health Anxiety in Children and Young People in the Context of the COVID-19 Pandemic	Behavioural and Cognitive Psychotherapy	Review Article	Some degree of health-related fear is a common and normal response in the face of the global pandemic of COVID-19, but for a minority of children and adolescents, this health-related fear can become distressing. If this fear substantially interferes with functioning over time, it is recognized as health anxiety (HA). This practitioner review provides an overview of the assessment and treatment of HA in children and adolescents in the context of the COVID-19 pandemic. This review is based on the limited existing evidence in children and young adults as well as the more substantial evidence in adults for the treatment of HA. The authors recommend adopting a multi-informant approach to assessment to establish the extent of HA, including cognitive, behavioral and emotional components, existing HA scales, and clinical interviews. The authors present the adaptations needed to ensure interventions are developmentally appropriate considering cognitive ability, emotional literacy, intergenerational	This review provides an overview of the assessment and treatment of health anxiety in children and adolescents in the context of the COVID-19 pandemic. The authors present adaptations to existing assessments and treatments for adults to be developmentally appropriate for children and adolescents.	Haig-Ferguson A, Cooper K, Cartwright E, Loades ME, Daniels J. Practitioner Review: Health Anxiety in Children and Young People in the Context of the COVID-19 Pandemic [published online ahead of print, 2020 Aug 24]. <i>Behav Cogn Psychother.</i> 2020;1-34. doi:10.1017/S1352465820000636

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					transmission of beliefs and parental modelling or reinforcement of behaviors.		
Mental health, children, adolescents, researchers	24-Aug-20	Child and adolescent psychiatry research during the COVID-19 pandemic	Lancet Psychiatry	Correspondence	The authors describe the challenges and opportunities from the perspectives of trainee psychiatrists, psychologists, and doctoral or post-doctoral scholars in child and adolescent mental health. As new research prioritizes COVID-19, allocation of funds by different grant agencies to research projects for COVID-19 could further impede the already under-resourced research in child and adolescent mental health for a long period. However, priority research questions, including understanding the mental health effects of physical distancing, identifying risk and resilience factors, and establishing preventive methods to prevent long-term psychological consequences of COVID-19 are being formulated and addressed.	The COVID-19 pandemic has posed a variety of substantial challenges for child mental health researchers including preferential funding allocations to research projects for COVID-19.	Gnanavel S, Orri M, Mohammed M, et al. Child and adolescent psychiatry research during the COVID-19 pandemic. Lancet Psychiatry. 2020;7(9):735. doi:10.1016/S2215-0366(20)30314-X
Pediatric, cardiac surgery, congenital heart disease, Turkey	24-Aug-20	Management of Congenital Cardiac Surgery during COVID-19 pandemic	Cardiology in the Young	Original Article	The Turkish Ministry of Health has taken immediate precautions during the COVID-19 pandemic to postpone elective surgeries in order to reduce the burden to the healthcare system which might be challenged. In pediatric cardiovascular surgery, it is not completely possible to suspend operative procedures due to the severity and urgency of congenital heart disease patients requiring operation. The authors report their experience in 29 urgent congenital cardiac surgery cases (age ≤ 18 years old) during the COVID-19 pandemic in Turkey. They retrospectively analyzed the cases for the pre-operative evaluation, the decision for an emergency operation, and the strategies taken for intra-operative and post-operative management. Among the study population, 16 (55.1%) patients were emergent and 13 (44.95%) had a semi-emergent status. Four patients died (13.8%). Further, the authors describe the crucial precautions that was applied in their pediatric cardiovascular surgery department during the COVID-19 pandemic. They conclude that appropriate selection of emergency surgery cases is critical.	The authors describe their experience managing of emergency congenital cardiac surgeries during the COVID-19 pandemic. Their high mortality rate (13.8%) could be explained because they only performed emergency and urgent operations due to reduced resources in the context of the pandemic.	Atalay A, Soran Türkcan B, Taşoğlu İ, et al. MANAGEMENT OF CONGENITAL CARDIAC SURGERY DURING COVID-19 PANDEMIC [published online, 2020 Aug 24]. Cardiol Young. 2020;1-20. doi:10.1017/S1047951120002760
D-Dimer, cesarean section, coagulopathy, Manhattan, USA	24-Aug-20	Intraoperative Coagulopathy During Cesarean Section as an Unsuspected Initial Presentation of COVID-19: A Case Report	BMC Pregnancy and Childbirth	Case Report	The authors describe an asymptomatic 26-year-old primigravida who presented to a large hospital in New York City, USA, at 37 weeks 6 days gestation for a scheduled external cephalic version. On admission, a C-section was recommended due to oligohydramnios and a confirmed frank breech fetal presentation. However, her C-section was performed before obtaining her SARS-CoV-2 test results due to regular contractions. Per hospital protocol, she was treated as a “person under investigation” (PUI), and healthcare personnel took the recommended precautions during the procedure. Although she had more bleeding than expected during the C- section, her total estimated blood loss was 1000 ml. Nonetheless, at approximately eight hours after her surgery, nasopharyngeal testing by PCR	This case presents the important finding of an unexpected initial presentation of COVID-19, and suggests that there may be a higher risk for intrapartum bleeding in the pregnant, COVID-positive patient who displays more aberrant COVID-19 laboratory values.	Kinsey KE, Ganz E, Khalil S, Brustman L. Intraoperative coagulopathy during cesarean section as an unsuspected initial presentation of COVID-19: a case report. BMC Pregnancy Childbirth. 2020;20(1):481. Published 2020 Aug 24. doi:10.1186/s12884-020-03140-2

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					returned positive for SARS-CoV-2. Upon further questioning, the patient reported experiencing a mild cough for several days before admission. Although her preoperative labs were reported as normal, her postoperative laboratory values revealed elevated D-Dimer, LDH, and CRP, but normal PT/INR and fibrinogen values. Of note, her postoperative D-Dimer was 19.1 µg/mL, which was significantly higher than observed in the population referenced at the time of this publication (2–6 µg/mL). She was ultimately discharged on postoperative day 2 in excellent condition, and at the postpartum evaluation by telehealth several days after discharge, the patient reported that she was recovering well without concerns.		
Telehealth, children, consultations, technology, pediatrics	24-Aug-20	Fifteen-minute consultation: A practical approach to remote consultations for paediatric patients during the COVID-19 pandemic	Archives of Disease in Childhood - Education and Practice	Review	While routine face-to-face consultations have been reduced to limit the spread of SARS-CoV-2, clinicians still need to provide ongoing care, particularly for more complex patients. This article uses a standardized case (a 14-year-old asthma clinic patient due for a clinic review) to offer clinicians a framework for video and telephone interactions with children and families accessing healthcare during the COVID-19 pandemic. The framework addresses steps of the telehealth consultation in detail, including preparation, introduction, setting the context, taking a history, clinical assessment, conclusion/management plan, and follow-up. Practical tips are also provided for avoiding and addressing common challenges and adverse outcomes related to telehealth.	This article uses a standardized case to offer clinicians a framework for video and telephone interactions with children and families accessing healthcare during the COVID-19 pandemic.	Galway N, Stewart G, Maskery J, et al. Fifteen-minute consultation: A practical approach to remote consultations for paediatric patients during the COVID-19 pandemic. [published online, 2020 Aug 24]. Arch Dis Child Educ Pract Ed. 2020;edpract-2020-320000. doi:10.1136/archdischild-2020-320000
Pregnancy, outcomes, maternal health, mental health, family planning	24-Aug-20	Will COVID-19 impact upon pregnancy, childhood and adult outcomes? A call to establish national longitudinal datasets	Journal of Psychosomatic Obstetrics & Gynecology	Editorial	Data on pregnancy outcomes directly and indirectly affected by COVID-19 are limited. There is limited evidence to suggest that pregnancy complicates COVID-19, but more evidence to suggest that COVID-19 can negatively impact pregnancy outcomes. An early systematic review of 79 pregnant women with coronavirus spectrum infections (with 41 affected by COVID-19), found a preterm birth rate of 41% and perinatal death rate of 7.0%. Concerns around health, safety, and economic security have caused many couples to delay pregnancy. Psychological stress experienced by pregnant women may have adverse health effects on both mothers and infants and failure to address maternal mental health could have long term consequences. The authors recommend establishment of national datasets worldwide and longitudinal follow-up of the COVID-19 birth cohort to monitor health outcomes and enable early interventions.	This editorial calls for the establishment of national datasets and longitudinal follow-up of the COVID-19 birth cohort to monitor adverse health outcomes related to maternal COVID-19 infection, psychological stress, and reduced healthcare access.	Quinlivan J, Lambregtse-van den Berg M. Will COVID-19 impact upon pregnancy, childhood and adult outcomes? A call to establish national longitudinal datasets. [published online, 2020 Aug 24]. J Psychosom Obstet Gynaecol. 2020;41(3):165-166. doi:10.1080/0167482X.2020.1775925
Children, telerehabilitation, neurodevelopmental conditions, health disparities	24-Aug-20	Potentials of Telerehabilitation for Families of Children With Special Health	JAMA Pediatrics	Comment & Response	In this response to Thompson and Rasmussen (2020), the authors lend further support to the importance of focusing on the effects of the COVID-19 pandemic on children with special healthcare needs. Necessary mitigation strategies to limit viral spread include the reduction or the complete closing of rehabilitation	The authors argue that investment and improvement of telerehabilitation services for neurodevelopmental	Provenzi L, Borgatti R. Potentials of Telerehabilitation for Families of Children With Special Health Care Needs During the Coronavirus Disease 2019

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		Care Needs During the Coronavirus Disease 2019 Emergency			units and centers. As a consequence, children with severe neurodevelopmental conditions and their parents are at risk of being without supervised rehabilitation support. The authors put forth a call of action for investment into telerehabilitation solutions. They argue that healthcare professionals can rely on telerehabilitation approaches to grant continuity of care and adequate support to children and their families. Further, they believe that the efforts directed in promoting and improving telerehabilitation services may still be beneficial even after the COVID-19 pandemic. They conclude that the investment in telerehabilitation solutions holds the potential to reduce disparities in healthcare access and to promote smarter and inclusive rehabilitation communities worldwide.	pediatric patients is necessary to mitigate potential harms from the COVID-19 pandemic.	Emergency. [published online, 2020 Aug 24]. AMA Pediatr. doi:10.1001/jamapediatrics.2020.2351
United Kingdom, vertical transmission, placenta, pathology	23-Aug-20	A structured review of placental morphology and histopathological lesions associated with SARS-CoV-2 infection	Placenta	Review Article	This review aimed to summarize all studies that examined the placenta or neonates following infection with SARS-CoV-2, or the closely related highly pathogenic coronavirus (SARS-CoV-1, or the Middle East respiratory syndrome coronavirus (MERS-CoV)). Of the 50 studies that met inclusion criteria, 20 reported a total of 150 cases of placental histopathology findings in third trimester placentas following maternal SARS-CoV-2 infection. The Amsterdam Consensus criteria was used to categorize the histopathology results, showing 35% of cases had evidence fetal vascular mal-perfusion, 46% had evidence of maternal vascular mal-perfusion, and a total of 19% had some sort of inflammation in the placenta. Despite this data, only 2% of neonates born tested positive for SARS-CoV-2. SARS-CoV-2 pathologies were consistent when compared to the placental pathologies of SARS-CoV-1. The authors stress that due to the limited amount of evidence, it is difficult to draw concrete conclusions about the effect of SARS-CoV-2 on placental pathology.	This article reviews the literature on placental pathology due to SARS-CoV-2. Despite the presence of placental lesions and inflammation, only 2% of neonates were born positive for SARS-CoV-2, which the authors state is not definitive evidence for vertical transmission of the virus.	Sharps MC, Hayes DJL, Lee S, et al. A structured review of placental morphology and histopathological lesions associated with SARS-CoV-2 infection. Placenta. 2020;101:13-29. doi: https://doi.org/10.1016/j.placenta.2020.08.018 .
Suicide, mental health, children, adolescents, school closure, Japan	23-Aug-20	Do suicide rates in children and adolescents change during school closure in Japan? The acute effect of the first wave of COVID-19 pandemic on child and adolescent mental health	Child Abuse & Neglect	Report	This report investigated the effect of the first wave of the COVID-19 pandemic on suicide among children and adolescents during a period of school closures in Japan. The Japanese government mandated the closing of all elementary, junior high, and high schools before a state of emergency was declared in April 2020. The authors obtained the total number of suicides per month among children and adolescents (<20 years-old) during the same periods in 2018-2020 (January-May). The findings suggested no significant differences in suicide rates during the period of school closures (March-May) comparing the same periods in 2018, 2019, and 2020 (incidence rate ratio (IRR)=1.15, 95% CI: 0.81-1.64). Additionally, suicides significantly increased in May months compared to March months for all years 2018-2020 (IRR=1.34, 95% CI: 1.01-1.78). However, the authors conclude by suggesting the findings did not present evidence that the first wave of the	The authors compared the number of suicides during the school periods in 2018-2020 in Japan. The authors conclude that school closures due to the COVID-19 pandemic did not significantly affect suicide rates among children and adolescents in Japan.	Isumi A, Doi S, Yamaoka Y, et al. Do suicide rates in children and adolescents change during school closure in Japan? The acute effect of the first wave of COVID-19 pandemic on child and adolescent mental health [published online ahead of print, 2020 Aug 23]. Child Abuse Negl. 2020;104680. doi:10.1016/j.chiabu.2020.104680

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					COVID-19 pandemic significantly affected suicide rates among children and adolescents in Japan during school closures due to COVID-19 compared to previous years.		
Italy, anxiety, distress, infertility, ART therapy	23-Aug-20	Influence of COVID-19 pandemic and the psychological status of infertile couples	European Journal of Obstetrics & Gynecology and Reproductive Biology	Original Research	The authors sought to evaluate the impact of the COVID-19 pandemic on infertile couples' emotions, anxiety, and future plans. An online survey assessing the psychological impact of COVID-19 was answered by 627 patients undergoing assisted reproductive technology (ART) treatment in Italy. Results indicated that the lockdown had a moderate/severe psychological impact on infertile parents, and that women were significantly more emotionally distressed, anxious, and depressed than men (p = 0.03). Furthermore, as a result of the economic crisis due to the pandemic, 11.5% of the surveyed patients decided to give up their ART treatment, as they suddenly felt unable to start their family due to financial problems. The authors assert that the psychological consequences of the COVID-19 pandemic on infertile patients should not be under-estimated, and specific psychological support should be planned.	Patients undergoing assisted reproductive technology therapy in Italy were assessed for the psychological impact of the COVID-19 pandemic. The authors report that the pandemic resulted in emotional and economic consequences for infertile patients that affected their treatment.	Esposito V, Rania E, Lico D, et al. Influence of COVID-19 pandemic on the psychological status of infertile couples. Eur J Obstet Gynecol Reprod Biol. 2020; doi:10.1016/j.ejogrb.2020.08.025
BCG, regression discontinuity, Sweden	23-Aug-20	BCG vaccination in infancy does not protect against COVID-19. Evidence from a natural experiment in Sweden	Clinical Infectious Diseases	Original Article	The Bacille Calmette-Guérin (BCG) tuberculosis vaccine has immunity benefits against respiratory infections and has been hypothesized to have a protective effect against COVID-19. In Sweden in 1975, discontinuation of newborns BCG vaccination allowed the authors to investigate the link between BCG vaccination in infancy and COVID-19 cases, hospitalizations and deaths, using a regression discontinuity approach. Numbers of COVID-19 cases and hospitalizations were recorded for birth cohorts born just before and just after 1975, representing 1,026,304 and 1,018,544 individuals, respectively. The odds ratio for COVID-19 cases and COVID-19 related hospitalizations were 1.0005 (CI 95%: [0.8130-1.1881]) and 1.2046 (CI 95%: [0.7532-1.6560]), allowing the authors to reject effects of universal BCG vaccination. The authors provide evidence that receiving the BCG vaccine at birth does not have a protective effect against COVID-19 among middle-aged individuals.	The authors provide evidence that receiving the Bacille Calmette-Guérin (BCG) tuberculosis vaccine at birth does not have a protective effect against COVID-19 among middle-aged individuals in Sweden.	de Chaisemartin C, de Chaisemartin L. BCG vaccination in infancy does not protect against COVID-19. Evidence from a natural experiment in Sweden [published online ahead of print, 2020 Aug 23]. Clin Infect Dis. 2020. doi:10.1093/cid/ciaa1223
Spain, ongoing study, pregnancy, children	23-Aug-20	COVID-19 in a cohort of pregnant women and their descendants. Cohort profile in the MOACC-19 study	medRxiv	Preprint (not peer-reviewed)	The Mother and Child Covid-19 study (MOACC-19) is a cohort project striving to recruit 1000 pregnant women and their children in Cantabria, North of Spain, during the COVID-19 pandemic. This article reports the cohort profile and preliminary results as recruitment is still open. Current participants include sub-cohort 1, 2, and 3 which could have been exposed to COVID-19 in their third trimester (giving birth 23rd March through 25th May), second and third trimesters (giving birth from 26th May onwards), and their entire pregnancies (recruited 26th May on). All enrolled women are tested for SARS-CoV-2 infection, and all neonates are tested for presence of antibodies. Children will be	An ongoing study in Spain is recruiting pregnant women in all terms of pregnancy in order to better understand the effects of COVID-19 on both mother and child, as well as the changes in pregnancy healthcare during the SARS-CoV-2 pandemic and their	Llorca J, Lechosa-Muniz C, Gortazar P, Fernandez-Ortiz M, Jubete Y, Cabero-Perez MJ. COVID-19 in a cohort of pregnant women and their descendants. cohort profile in the MOACC-19 study. medRxiv. 2020:2020.08.20.20178657. http://medrxiv.org/content/early/2020/08/23/2020.08.20.201786

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					followed up for one year to analyze the effects of COVID-19 on their development. As of 29th July 2020, 477 women have been recruited (212, 132, and 133 for sub-cohorts 1, 2 and 3, respectively), 8 of whom tested positive for SARS-CoV-2 RNA, and 7 of whom had given birth to infants all negative for SARS-CoV-2. A total of 344 children have currently been born to women recruited in MOACC-19. Results so far show that few women were infected at delivery and no children have been affected. The authors hope this study will allow researchers to better understand the impact COVID-19 has on mother and child, as well as ascertain what changes have occurred in pregnancy healthcare during the pandemic and what effects those changes could have.	effects. Enrolled children will be monitored for a year to determine effects on development.	57.abstract. doi: 10.1101/2020.08.20.20178657.
COVID-19; antenatal care; pregnancy; lockdown; depression; anxiety	22-Aug-20	Impact of the COVID-19 lockdown on antenatal mental health in Greece	Psychiatry and Clinical Neurosciences	Original Research	The authors investigated anxiety and depressive symptoms in 269 pregnant women living under the 6-week COVID-19 lockdown and attending a university clinic in Greece in late March 2020. [Sample age and gestational age characteristics not given.] The State-Trait Anxiety Inventory (STAI) and Edinburgh Postnatal Depression Scale (EPDS) questionnaires were used. 37.5% of participants reported State-anxiety (S-anxiety), while 13.0% reported lifetime anxiety (T-anxiety). The authors noted higher median S-anxiety scores than median T-anxiety scores [42 (range: 24-67) vs 35 (range: 22-67), respectively, p<0.001], indicating a significant increase in anxiety during the lockdown. The authors also found a moderate association between S- and T-anxiety scores (r=0.549, p<0.001). The authors identified the 1st week after lockdown as an independent risk factor for S-anxiety (OR: 2.425; 95% CI: 1.299-4.529). Additionally, they found the 3rd trimester to be an independent risk factor for anxiety (OR: 1.913; 95% CI: 1.037-3.529). 32/215 women who completed the EPDS were identified as depressed. Antenatal depression was associated with S-anxiety (OR: 2.570, 95% CI: 1.199-5.508; p=0.015) and smoking was identified as an independent risk factor for antenatal depression during the lockdown (OR: 2.889, 95% CI: 1.028-8.118).	The authors found that in pregnant women in Greece experiencing the COVID-19 lockdown, there was a higher median S-anxiety (state-anxiety) score compared to the T-anxiety (lifetime anxiety) score, indicating a significant increase in stress during the lockdown period. The 1st week after lockdown and 3rd trimester were independent risk factors for anxiety, while smoking was identified as an independent risk factor for antenatal depression during the lockdown.	Dagklis T, Tsakiridis I, Mamopoulos A, et al. Impact of the COVID-19 lockdown on antenatal mental health in Greece. Psychiatry Clin Neurosci. 2020 Nov;74(11):616-617. doi: 10.1111/pcn.13135. Epub 2020 Sep 12. PMID: 32827345; PMCID: PMC7461275.
Pediatric, autism, viral load, viral shedding, Italy	22-Aug-20	Exceptionally high COVID-19 viral load and very long duration of shedding in a young pauci-symptomatic child with autism resident in an	Journal of Infection	Case Report	This brief report relays the case of a 9-year-old male with autism and severe intellectual disability in Italy. He presented with a cough, nasal discharge, and fever 20-22 April 2020. After this time he was asymptomatic, although lab analyses repeatedly showed neutropenia and low CD4 helper lymphocytes. RT-PCR testing of a nasopharyngeal swab was positive for SARS-CoV-2 on 24 April, and he had five subsequently positive tests in the months following. In this case, researchers considered any Cycle Threshold (CT) <34 to indicate infectivity. Viral loads in this patient corresponded to CT values of 6, 30, 26, 36, 26, and 34.	These authors share the case of a 9-year-old male who had COVID-19 symptoms for two days, and then had SARS-CoV-2 viral loads meeting or surpassing the level of infectivity for 82 days after his first positive test. They conclude that children	Grossi E, Terruzzi V. Exceptionally high COVID-19 viral load and very long duration of shedding in a young pauci-symptomatic child with autism resident in an Italian nursing home [published online ahead of print, 2020 Aug 22]. J Infect. 2020;S0163-4453(20)30560-0. doi:10.1016/j.jinf.2020.08.026

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		Italian nursing home			Testing was first negative on 4 August. The authors conclude that children with few or no symptoms can maintain a prolonged high SARS-CoV-2 viral load, and thus may be infective for a long period.	with few or no symptoms may be infective for a long period.	
Pregnancy, ACE2, pre-eclampsia, inflammation, Italy, angiotensin	22-Aug-20	COVID-19 infection: ACE2, pregnancy and preeclampsia	European Journal of Obstetrics & Gynecology and Reproductive Biology	Correspondence	The authors briefly discuss why pregnant women have been observed to experience mild to moderate COVID-19 disease. The authors present data from an Italian surveillance system suggesting evidence of an imbalance of COVID-19 lethality between men and women. The median lethality rate in women of reproductive age (20-39 years-old) is lower at 0.1% (0.05-0.16%) compared to the median lethality rate in men at 0.4% (0.30-0.47). Additionally, the authors suggest that during pregnancy ACE2, that helps to generate angiotensin 1-7 (Ang-1-7) and which plays a role in vasodilation during the third trimester, is upregulated. Further, Ang-1-7 levels are lower in pregnancies complicated by pre-eclampsia. Pre-eclampsia presents as hypertension and proteinuria after 20 weeks of gestational age but is widely classified as an exaggerated inflammatory response. Likewise, COVID-19 presentation is largely classified as an excessive inflammatory response. The authors conclude that expanding research in explaining the pathogenesis of these inflammatory responses is critical in developing new treatment strategies for pre-eclampsia and COVID-19 in pregnant cohorts.	Exaggerated inflammatory responses are present in both pre-eclampsia and COVID-19; research on the pathogenesis of these inflammatory responses may help develop treatments in pregnant populations.	Todros T, Masturzo B, De Francia S. COVID-19 infection: ACE2, pregnancy and preeclampsia [published online ahead of print, 2020 Aug 22]. Eur J Obstet Gynecol Reprod Biol. 2020;S0301-2115(20)30519-4. doi:10.1016/j.ejogrb.2020.08.007
Immune response, infant, transmission, China	22-Aug-20	Coronavirus Disease-2019 (COVID-19) Infection in a 3-Month-Old Infant: Clinical Features, Treatment and Probable Route of Transmission	ID Cases	Case Report	In this case study, clinical and epidemiological data of a 3-month-old patient with COVID-19 were collected, including general status, clinical results, laboratory tests, imaging characteristics, and epidemiological reports. Abnormal findings included elevated interleukin (IL)-17A, IL-17 F, and tumor necrosis factor (TNF)- α , as well as pulmonary patchy shadows on CT scan. Throat and urine samples showed negative PCR results, but anal swabs continued to show positive PCR up to 40 days after illness onset. The authors hypothesize that while infants infected with COVID-19 may have relatively mild symptoms or clinical signs, IL-17A, IL-17 F, and TNF- α could be involved in the immune response to COVID-19. They also suggest that SARS-CoV-2 infection may shed through the gastro-intestinal tract, supporting the idea that convalescent carriers may exist among infant patients. The authors indicate that they cannot rule out the possibility that infants may acquire SARS-CoV-2 infection from breastfeeding. Intensive care and nutritional support are recommended for infant patients even if they present with mild symptoms.	An infant in China was documented to show increased levels of interleukin (IL)-17A, IL-17 F, and TNF- α , as well as positive PCR from anal swab samples up to 40 days post-onset of infection. The authors hypothesize that these proteins could be part of the infant immune response to SARS-CoV-2, and infants may be convalescent carriers.	Wei Y, Liu X, Yuan J, et al. Coronavirus Disease-2019 (COVID-19) Infection in a 3-Month-Old Infant: Clinical Features, Treatment and Probable Route of Transmission. IDCases. 2020; doi:10.1016/j.idcr.2020.e00937
Abortion, reproductive autonomy, access, Texas	22-Aug-20	Protecting Access To Abortion During The COVID-19	Health Affairs (Project Hope)	Narrative	In this personal narrative, the author calls to attention the impact of the COVID-19 pandemic on reproductive autonomy and the barriers posed as a result of executive orders in the United States that banned abortions during the crisis. She shares personal	The author shares a personal narrative highlighting changes in access and provision of	Sackeim MG. Protecting Access To Abortion During The COVID-19 Pandemic. Health Aff (Millwood).

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		Pandemic [Free Access to Abstract only]			experiences providing abortion care to women in Texas during the crisis and the challenges associated. The author also describes the innovation in medical care for abortion encouraged by the COVID-19 pandemic, such as the option to complete follow-up after an abortion remotely. The author concludes with a call to action to change the abortion narrative to one that conveys understanding and protects women’s reproductive autonomy.	abortion care in Texas, USA during the pandemic.	2020;39(8):1456-1458. doi:10.1377/hlthaff.2020.00565
Seroprevalence, children, adult, herd immunity, Austria	22-Aug-20	High SARS-CoV-2 Seroprevalence in Children and Adults in the Austrian Ski Resort Ischgl	medRxiv	Preprint (not peer-reviewed)	A COVID-19 outbreak occurred in ski resort Ischgl in Austria in early March 2020 and initiated the spread of SARS-CoV-2 throughout Austria and Northern Europe. This cross-sectional epidemiologic study was performed between April 21st and 27th, 2020 targeting the full population of Ischgl (n= 1867). 1473 individuals living in 478 households including all age groups were tested for antibodies to SARS-CoV-2 and SARS-CoV-2 RNA in nasopharyngeal swabs, including 101 children <10 years and 113 participants aged 10-17 years. A mathematical model was used to help understand the influence of the determined seroprevalence on virus transmission. The findings showed that seroprevalence was 42.4% (95% CI 39.8-44.7). Individuals <18 years showed a significantly lower seroprevalence of 27.1% (95% CI 21.3-33.6) than adults (45%; 95% CI 42.2-47.7; OR = 0.455, 95% CI 0.356-0.682, p<0.001). Of the seropositive individuals, 83.7% had no previous diagnosis of SARS-CoV-2 infection. Over the previous two months, two COVID-19-related deaths had been recorded. The prevalence of individuals newly infected with SARS-CoV-2 dropped from 19% in the first week of April to 0.5% during this study. Mathematical modeling revealed that the number of seropositive individuals in Ischgl was still substantially lower than the herd immunity threshold, thus, suggesting that the installed non-pharmaceutical interventions (NPI) contributed to the virus control. The authors argued that a significant immunization of the Ischgl population also played a role in the virus control. [Note: the paper did not mention what immunization was meant (MV)]	This cross-sectional study in a COVID-19 outbreak spot in Austria showed a high local SARS-CoV-2 seroprevalence of 42.4%, which was lower in individuals < 18 years than in adults and suggested a drastic decline of newly infected individuals, which might occur due to the dual impact from the non-pharmacological interventions and a significant immunization of the Ischgl population	Knabl L, Mitra T, Kimpel J, et al. High SARS-CoV-2 Seroprevalence in Children and Adults in the Austrian Ski Resort Ischgl [published online 2020 Aug 22]. medRxiv. doi:10.1101/2020.08.20.20178533
Extracorporeal membrane oxygenation, acute respiratory distress symptoms, pregnancy, pregnant women, mechanical ventilation	21-Aug-20	First successful treatment of a COVID-19 pregnant woman with severe ARDS by combining early mechanical ventilation and ECMO	Heart & Lung	Case Report	The authors report the case of a 31-year-old pregnant woman in China infected by COVID-19 at 35 weeks of gestation. She developed sore throat and cough on January 27, 2020 and went to the hospital on February 1 due to fever and difficulty breathing. Chest CT revealed infection in left lower lung and she tested positive for SARS-CoV-2 via oropharyngeal swab. On day 6 after admission, the chest X-ray revealed an increase in diffuse ground-glass opacity. Extra-corporeal membrane oxygenation (ECMO) and mechanical ventilation were performed. On day 27, the chest X-ray revealed reduced ground-glass opacities in both	The authors report the case of a 31-year-old pregnant woman infected by COVID-19, who suffered from fever, difficulty breathing, and rapid acute respiratory distress symptoms (ARDS). Among COVID-19 patients with ARDS who are	Hou L, Li M, Guo K, et al. First successful treatment of a COVID-19 pregnant woman with severe ARDS by combining early mechanical ventilation and ECMO. Heart Lung. 2020;doi:10.1016/j.hrtlng.2020.08.015

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					lungs, and the ECMO was successfully withdrawn. After pulmonary improvement, the ventilator parameters and dose of sedative drugs were gradually reduced. On day 38 after admission, the patient was successfully weaned from the ventilator. On day 56, the chest CT revealed no fibrosis lesions. The patient remained in good health at the one-month follow-up visit after hospital discharge. Among COVID-19 patients with acute respiratory distress symptoms who become unresponsive to conventional treatment, the use of ECMO, which temporarily replaces pulmonary function, can represent a life-saving alternative.	unresponsive to treatment, the use of ECMO can represent a life-saving alternative.	
Surgical care, children, post-COVID care	21-Aug-20	Continuing and ensuring surgical care for children during COVID and post-COVID crisis	Journal of Pediatric Surgery	Letter to the Editor	The authors of this commentary describe how the COVID-19 pandemic has radically altered medical and surgical care delivery around the globe. The cancellation of elective surgeries has given rise to a significant backlog of surgical cases. At a not-for-profit tertiary care hospital in Karachi, Pakistan, similar measures were taken as elective and semi-elective procedures were cancelled and the pediatric surgery department saw only 1/3 of their normal volume from April - June 2020. An effective way to ensure that patients still feel comfortable coming to the hospital during the COVID-19 pandemic is to ensure that they are adequately informed through various channels such as mass and social media. The countries with a sustained reduction of cases for a longer duration of time should start devising strategies to ensure resumption of their normal hospital and surgical services. Continuous development of guidelines and frameworks to overcome the burden from the COVID-19 pandemic will strengthen and better equip the healthcare system during the post-pandemic phase and also ensure quality of pediatric patient care and adequate training of young trainees and doctors.	The authors describe the need to continue and ensure surgical care, especially for children, during, and after, the COVID-19 pandemic. They recommend that countries with a sustained reduction in cases should start planning strategies to resumption their normal hospital and surgical services.	Qazi SH, Dogar SA, Hamid LR, Pirzada AN, Saleem A, Das JK. Continuing and ensuring surgical care for children during COVID and post-COVID crisis [published online ahead of print, 2020 Aug 21]. J Pediatr Surg. 2020;S0022-3468(20)30590-X. doi:10.1016/j.jpedsurg.2020.08.012
Spain, pediatric, respiratory symptoms, critical care	21-Aug-20	Children in Critical Care Due to Severe Acute Respiratory Syndrome Coronavirus 2 Infection: Experience in a Spanish Hospital	Pediatric Critical Care Medicine	Observational Study	This article describes 7 SARS-CoV-2-positive pediatric cases (median age of 8 years and range of newborn-13.5 years old) admitted to a pediatric ICU (PICU), March 1 to April 15, 2020. The authors performed a prospective observational study based on epidemiological features, history, support therapy needed, imaging tests, laboratory tests on admission, and pharmacologic therapy data from patient medical records on patterns with confirmed SARS-CoV-2 diagnoses and admittance to the PICU facility. D-dimer and ferritin levels were elevated in all patients, and fever and respiratory symptoms were prevalent. Despite all patients requiring oxygen therapy through a nasal cannula, 5 of which required high-flow nasal cannula therapy and 2 which required mechanical ventilation, none of the patients died. The	This study describes the data gathered from 7 pediatric patients, highlighting the need for respiratory treatments in all 7 patients. Additional observations included elevated D-dimer and ferritin levels, as well as fever in all patients.	García-Salido A, Leoz-Gordillo I, Martínez de Azagra-Garde A, et al. Children in Critical Care Due to Severe Acute Respiratory Syndrome Coronavirus 2 Infection: Experience in a Spanish Hospital. Pediatr Crit Care Med. 2020; doi:10.1097/PCC.0000000000002475

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					authors conclude that close monitoring of pediatric patients positive for SARS-CoV-2 is necessary in order to effectively treat these patients.		
Children, school closure, child abuse, child maltreatment, underreporting, USA	21-Aug-20	Suffering in silence: How COVID-19 school closures inhibit the reporting of child maltreatment	Journal of Public Economics	Original Article	To combat the spread of SARS-CoV-2, many schools in the USA moved instruction online in March 2020. This study examined an unexplored consequence of COVID-19-related school closures: the broken link between child maltreatment victims and school personnel, who are the most common source of reported maltreatment allegations. Using current data from Florida, the authors estimated a counterfactual distribution of child maltreatment allegations for March and April 2020. They found that the actual number of reported allegations was approximately 15,000 lower (27%) than expected. Using a detailed dataset of school district staffing and spending, the authors showed that the observed decline in allegations was largely driven by school closures. They conclude the article by discussing policy implications of their findings on school re-openings and by suggesting responses that may mitigate this hidden cost of school closures.	The authors sought to explore the association between school closures in the USA during the COVID-19 pandemic and a reduction in child maltreatment allegations. They found that reports were 27% lower than expected for March to April 2020.	Baron EJ, Goldstein EG, Wallace CT. Suffering in silence: How COVID-19 school closures inhibit the reporting of child maltreatment. [published online, 2020 Aug 21]. J Public Econ. doi:10.1016/j.jpubecon.2020.104258
Chloroquine, pregnancy	21-Aug-20	COVID-19 pandemic and pregnancy - posology and cardiometabolic pathology	American Journal of Obstetrics and Gynecology	Letter to the Editor	This letter addresses the novel use of chloroquine phosphate and hydroxychloroquine in the management of COVID-19. A double-masked, randomized phase IIb clinical trial from Brazil in adults with severe COVID-19 demonstrated that high-dose chloroquine is associated with greater toxicity and mortality. Although these results are not generalizable across the COVID-19 disease spectrum, the authors caution against the use of high-dose regimens and advise providers to consult their institutional protocols when considering these drugs as a treatment option in pregnancy.	The authors caution against the use of high-dose chloroquine in the clinical management of COVID-19.	Dashraath P., Wong JLL., Su LL., COVID-19 pandemic and pregnancy - posology and cardiometabolic pathology, AJOG, Published: August 21, 2020, DOI:https://doi.org/10.1016/j.ajog.2020.08.046
Rhode Island, childcare, secondary transmission, quarantine, USA	21-Aug-20	Limited Secondary Transmission of SARS-CoV-2 in Child Care Programs – Rhode Island, June 1-July 31, 2020	Morbidity and Mortality Weekly Report	Report	With a decline of COVID-19 cases in Rhode Island (RI), USA during the beginning of June 2020, childcare centers (n=666) reopened under strict guidelines of reduced enrollment, mask-wearing, cleaning requirements, and symptom screening. High compliance with requirements was observed during 127 unannounced program monitoring visits. From June 1 to July 31, 2020, there were a total of 33 positive and 19 probable childcare-associated COVID-19 cases identified (30 children and 22 adults) among 29 programs in RI. This resulted in closures of 89 classes as well as quarantine of 687 children and 166 staff members, including contacts. Possible secondary transmission was found in four (0.6%) childcare programs. The apparent absence of secondary transmission in the vast majority of child care programs was likely the result of efforts to contain transmission and adherence to infection control requirements; however, despite limited secondary transmission, childcare services were disrupted by	Reopening of childcare centers in Rhode Island, USA in June-July 2020 suggested evidence of limited secondary transmission of SARS-CoV-2. CDC recommendations to safely reopen childcare facilities should be adhered to in order to sustain these programs.	Link-Gelles R, DellaGrotta AI, Molina C, et al. Limited Secondary Transmission of SARS-CoV-2 in Child Care Programs – Rhode Island, June 1-July 31, 2020. MMWR Morb Mortal Wkly Rep. 2020;69. ePub 2020 Aug 21. doi: 10.15585/mmwr.mm6934e2

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					quarantine efforts. Timely public health action, including case investigation and contact tracing, is critical to minimizing outbreaks in child care programs.		
Teachers, living with children, risk factors, health survey, US	21-Aug-20	Risk for Severe COVID-19 Illness Among Teachers and Adults Living With School-Aged Children	Annals of Internal Medicine	Letter	A topic of consideration in reopening schools is identifying the prevalence of risk factors for severe COVID-19 infection among teachers and adults living with school-aged children (5-17 years-old). The authors analyzed a US-based national health survey from 2018 to identify the proportion of definite or probable risk factors for severe COVID-19 infection among teachers and adults living with school-aged children in the US. Among teachers, 39.8% had definite and 50.6% had definite or possible risk factors for severe COVID-19 illness. Similarly, among adults living with school-aged children, 41.0% had definite and 54.0% had definite or possible risk factors. Therefore, teachers' risk seems similar to that of other working adults. Additionally, the findings suggested that adults living with children in low-income settings as well as those living with Black children were more likely to be at risk of severe illness. The authors conclude by suggesting that the risk of severe COVID-19 among teachers and adults living with school-aged children should be considered during discussions of reopening schools and child care programs.	The authors explore the prevalence of risk factors for severe COVID-19 among teachers and adults living with school-aged children in the US. The findings suggested adults (teacher or non-teacher) living in low-income households and those living with Black children are at higher risk of severe COVID-19.	Gaffney AW, Himmelstein D, Woolhandler S. Risk for Severe COVID-19 Illness Among Teachers and Adults Living With School-Aged Children. 2020 Aug 21. <i>Ann Intern Med.</i> 2020;10.7326/M20-5413. doi:10.7326/M20-5413
Child abuse, prevention, public health nurses, Japan	21-Aug-20	Child Abuse and Neglect Prevention by Public Health Nurses during the COVID-19 Pandemic in Japan	Journal of Advanced Nursing	Editorial	The authors discuss strategies for public health nurses (PHNs) to prevent child abuse and neglect during the COVID-19 pandemic in Japan. PHNs play a crucial role in preventing child abuse and neglect by providing family healthcare services in each municipality in Japan. However, given the suggested COVID-19 preventive measures, municipalities in Japan have stopped providing public healthcare services. As a result, PHNs have faced difficulties in preventing and early detection of child abuse and neglect during the COVID-19 pandemic. In light of this, the Japanese government has made a supplementary budget for capital investment in online services such as the infant home visitation program, parent education classes, and health classes to prevent infection. As an example of a new strategy, several municipalities launched a consultation service for childcare concerns using the so-called Line app. Also, some municipalities have combined infection prevention with face-to-face opportunities by requiring full appointments at designated times, limiting the number of people to one parent or guardian per child, or canceling group education and giving individualized instructions by phone later. However, additional strategies need to be developed to detect and follow up on families at risk of abuse and neglect during the COVID-19 pandemic, to link them to the next level of support.	The authors propose that public health nurses develop new strategies to continue their abuse prevention activities with infection prevention measures, while utilizing the existing mechanisms that they have built up.	Honda C, Yoshioka-Maeda K, Iwasaki-Motegi R. Child Abuse and Neglect Prevention by Public Health Nurses during the COVID-19 Pandemic in Japan [published online ahead of print, 2020 Aug 21]. <i>J Adv Nurs.</i> 2020;10.1111/jan.14526. doi:10.1111/jan.14526

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Pregnancy, mental health, anxiety, depression	21-Aug-20	REPERCUSSIONS OF THE COVID-19 PANDEMIC ON THE MENTAL HEALTH OF PREGNANT AND PUERPERAL WOMEN: A SYSTEMATIC REVIEW	medRxiv	Pre-print (not peer-reviewed)	The authors sought to synthesize the scientific evidence on the repercussions of the COVID-19 pandemic on the mental health of pregnant and puerperal women. This systematic review found 18 studies that met the inclusion criteria. Anxiety and depression were the main outcomes found for the impact of the COVID-19 pandemic on the mental health of pregnant and puerperal women, being found in 15 and 11 studies, respectively. Other outcomes found in more than one study were loneliness, stress and fear. The authors conclude that the COVID-19 pandemic has impacted the mental health of pregnant and puerperal women, with depression and anxiety being the most frequent changes. The social detachment, media pressure, fear of contracting the infection, the economic scenario and the rupture of family rituals are all thought to contribute to the mental health changes of these women.	This systematic review found that anxiety and depression were the most common result of the impact of the COVID-19 pandemic on the mental health of pregnant and puerperal women.	Vieira LG, Camargo ELS, Schneider G, et al. REPERCUSSIONS OF THE COVID-19 PANDEMIC ON THE MENTAL HEALTH OF PREGNANT AND PUERPERAL WOMEN: A SYSTEMATIC REVIEW [published online 2020 Aug 21]. medRxiv. 2020. doi:10.1101/2020.08.17.20176560
Children, contact tracing, transmission	21-Aug-20	Susceptibility to and transmission of COVID-19 amongst children and adolescents compared with adults: a systematic review and meta-analysis	medRxiv	Pre-print (not peer-reviewed)	This rapid systematic review sought to examine the susceptibility to and transmission of SARS-CoV-2 by children and adolescents compared to adults. 32 studies met inclusion criteria, 18 studies of contact tracing and 14 studies of population screening. In contact tracing studies, the pooled odds ratio of children having a secondary infection compared with adults was 0.56 (95% CI 0.37-0.85) with substantial heterogeneity. 3 school contact tracing studies found minimal transmission by child or teacher index cases. Findings from population-screening studies were heterogeneous and were not suitable for meta-analysis. The majority of studies were consistent with lower seroprevalence in children < 10 years old compared with adults, although seroprevalence in adolescents appeared similar to adults. The authors conclude that there is preliminary evidence that children and young people have lower susceptibility to SARS-CoV-2, with a 43% lower odds of being an infected contact. There is weak evidence that children and young people play a lesser role in transmission of SARS-CoV-2 at a population level. This study provides no information on the infectivity of children.	This systematic review found that children have a lower odd of secondary infection than adults (0.56 OR). Seroprevalence among children younger than 10 years old was lower than adults, with adolescents having a similar seroprevalence to adults.	Viner RM Mytton OT, Bonell C, et al. Susceptibility to and transmission of COVID-19 amongst children and adolescents compared with adults: a systematic review and meta-analysis [published online 2020 Aug 21]. medRxiv. 2020. doi:10.1101/2020.05.20.20108126
Health policy, household transmission, lockdown, school closure, southern Italy	21-Aug-20	SARS-CoV-2 Infection in Children in Southern Italy: A Descriptive Case Series	International Journal of Environmental Research and Public Health	Case Series	The authors analyzed the frequency of SARS-CoV-2 infection among all children aged <18 years in the Apulia region of southern Italy and the infected children's characteristics. Clinical and demographic data were collected through the national platform for COVID-19 surveillance. Of the 166 infected children in the Apulia region, 104 (62.6%) were asymptomatic, 37 (22.3%) had mild infections, 22 (13.3%) had moderate infections, and 3 (1.8%) had severe infections. Only ten children (6.0%) were hospitalized, but none required intensive care support, and none died. Because of school closure during the lockdown, the infection was unlikely to have been transmitted among children.	This study on SARS-CoV-2 infected children and adolescents in the Apulia region of Italy confirmed that children were less affected by the current pandemic and showed that household exposure is an important factor in the transmission of infection. Therefore, the authors	Loconsole D, Caselli D, Centrone F, et al. SARS-CoV-2 Infection in Children in Southern Italy: A Descriptive Case Series. Int J Environ Res Public Health. 2020;17(17):E6080. Published 2020 Aug 21. doi:10.3390/ijerph17176080

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					Moreover, contact tracing in 99 of these children showed that 98 acquired the infection from a family member. These findings indicate that household contacts were the most frequent source of SARS-CoV-2 infection in Apulia, and most children remained asymptomatic. This study also found that pediatric COVID-19 did not represent a significant clinical problem for the public health system, since none of the 166 infected subjects died or required ICU admission.	believe that adults, not children, should be the primary targets for strict social distancing based on current knowledge.	
Children, MIS-C, South Africa	21-Aug-20	Multisystem inflammatory syndrome in children in South Africa	The Lancet Child and Adolescent Health	Correspondence	The authors summarize the first 23 cases of MIS-C treated in two children's hospitals in Cape Town, South Africa, from June 4-July 24, 2020. The mean age was 6.59 years (95% CI 4.75-8.43). Most cases had no confirmed or suspected SARS-CoV-2 infection, but all met clinical diagnostic criteria; the authors argue that an inability to prove previous COVID-19 disease should not prevent the diagnosis of MIS-C after exclusion of other conditions, in regions with evidence of SARS-CoV-2 community spread. Black children were over-represented in the cohort. The presenting features of MIS-C (persistent fever, rash and abdominal pain) were non-specific. 12 children were admitted to the ICU, most commonly because of myocardial dysfunction. All 23 received intravenous immunoglobulin, with 15 requiring additional drugs. All children have so far survived with no discernable irreversible disease sequelae.	The authors present a summary of 23 MIS-C cases, with an emphasis on the diagnostic challenges in settings with restricted SARS-CoV-2 community testing. The mean age was 6.59 years old, 12 of 23 children were admitted to the ICU, and all survived.	Webb K, Abraham DR, Faleye A, et al. Multisystem inflammatory syndrome in children in South Africa [published online 2020 Aug 21]. Lancet Child Adolesc. 2020. doi:10.1016/S2352-4642(20)30272-8
Netherlands, breastmilk, antibodies	21-Aug-20	Breastmilk; a source of SARS-CoV-2 specific IgA antibodies	bioRxiv (<u>not peer-reviewed</u>)	Original Research	The authors aimed to determine the presence and neutralization capacity of antibodies against SARS-CoV-2 in breastmilk of mothers who have recovered from COVID-19. Serum and breastmilk samples were collected from 51 lactating mothers recovered from COVID-19, suspected of COVID-19, and healthy controls and tested for SARS-CoV-2-related proteins and IgG and IgA antibodies. Breastmilk contained antibodies against SARS-CoV-2 in 24 out of 29 (83%) proven cases, in six out of nine (67%) suspected cases and in none of the 13 controls. Additionally, there was not a difference in the levels of IgA antibodies when the breastmilk was pasteurized. In vitro neutralization of SARS-CoV-2 clinical isolate virus strain was successful in a subset of serum (13%) and milk samples (26%). The authors suggest that antibodies in breastmilk could be used for preventative strategies as pasturing the milk makes it a safe product that can be widely distributed.	Significant amounts of IgA antibodies for SARS-CoV-2 were found in breastmilk of mothers recovered from SARS-CoV-2 infection and were still present after pasteurization. The authors hypothesize that breastmilk containing antibodies could be used as a preventative measure.	van Keulen BJ, Romijn M, Bondt A, et al. Breastmilk; a source of SARS-CoV-2 specific IgA antibodies. medRxiv. 2020:2020.08.18.20176743. http://medrxiv.org/content/early/2020/08/21/2020.08.18.20176743.abstract . doi: 10.1101/2020.08.18.20176743

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Children, neonates, adults, immune system, immune response	21-Aug-20	Neonatal and Children's Immune System and COVID-19: Biased Immune Tolerance versus Resistance Strategy [Free Access to Abstract Only]	The Journal of Immunology	Review	Infection with SARS-CoV-2 and other coronaviruses in neonates and children has been widely asymptomatic and mild on presentation. Consistency in these observations suggest differences in immune system behavior between adults and children/neonates. Recent findings demonstrate that neonates respond to micro-organisms through biased immune tolerance as opposed to resistance mechanisms. Additionally, frequent vaccination in children may give rise to enhanced trained immunity. These fundamental differences found in the regulated immune systems of children and neonates give rise to increased immunosuppressive cells and trained immunity, which may play a role in the immune reaction to SARS-CoV-2 infection in younger cohorts.	Variability in COVID-19 presentation between adults and children/neonates may be due to differences in fundamental immune system behavior such as an increase in immunosuppressive cells and trained immunity in younger cohorts.	Elahi S. Neonatal and Children's Immune System and COVID-19: Biased Immune Tolerance versus Resistance Strategy. 2020 Aug 21. J Immunol. 2020;ji2000710. doi:10.4049/jimmunol.2000710
Risk factors, clinical manifestations, viral load, children, pediatric, USA	21-Aug-20	SARS-CoV-2 Infections Among Children in the Biospecimens from Respiratory Virus-Exposed Kids (BRAVE Kids) Study	medRxiv	Preprint (not peer-reviewed)	In this prospective cohort study, the authors described risk factors, clinical manifestations, and nasopharyngeal viral loads of SARS-CoV-2 infection among children enrolled between April 7th and July 16th, 2020 who had a SARS-CoV-2-infected close contact in central North Carolina, USA. Of 382 children (median age 9.7 years; IQR age 4.8-15.9 years), 293 (77%) were SARS-CoV-2-infected. SARS-CoV-2-infected children were more likely to be Hispanic (p<0.0001), less likely to have asthma (p=0.005), and more likely to have an infected sibling contact (p=0.001) than uninfected children. Children aged 6-13 years were frequently asymptomatic (39%) and had respiratory symptoms less often than younger children (29% vs. 48%; p=0.01) or adolescents (29% vs. 60%; p<0.0001). Compared to children aged 6-13 years, adolescents more frequently reported influenza-like (61% vs. 39%; p<0.0001), gastrointestinal (27% vs. 9%; p=0.002), and sensory symptoms (42% vs. 9%; p<0.0001), and had more prolonged illnesses [median (IQR) duration: 7 (4, 12) vs. 4 (3, 8) days; p=0.01]. Despite the age-related variability in symptoms, they found no differences in nasopharyngeal viral load by age or between symptomatic and asymptomatic children. The authors argued that Hispanic ethnicity and an infected sibling close contact are associated with increased SARS-CoV-2 infection risk among children, while asthma is associated with decreased risk. Age-related differences in the clinical manifestations of SARS-CoV-2 infection must be considered when evaluating children for COVID-19 and in developing screening strategies for schools and childcare settings.	This was the largest non-hospitalized pediatric cohort to the authors' knowledge. It suggested that Hispanic ethnicity and an infected sibling close contact are associated with increased SARS-CoV-2 infection risk among children, while asthma is associated with decreased risk. Age-related differences in the clinical manifestations of SARS-CoV-2 infection must be considered when evaluating children for COVID-19 and in developing screening strategies for schools and childcare settings.	Hurst JH, Heston SM, Chambers HN, et al. SARS-CoV-2 Infections Among Children in the Biospecimens from Respiratory Virus-Exposed Kids (BRAVE Kids) Study [published online 2020 Aug 21]. medRxiv. doi:10.1101/2020.08.18.20166835
Virus, pregnancy, vertical transmission, fetal death, miscarriage,	21-Aug-20	Persistence of SARS-CoV-2 in the first trimester placenta leading	medRxiv	Pre-print (not peer-reviewed)	This study discusses the case of an Indian pregnant woman in her late twenties. Her nasopharyngeal swab was positive for COVID-19 at 8 weeks of pregnancy, although she was asymptomatic. Five weeks later, an ultrasound showed fetal demise, with hydrops fetalis. At this time, a repeat nasopharyngeal swab was negative	The authors claim that this case demonstrates congenitally transmitted SARS-CoV-2 infection, and that such infection can	Shende P, Gaikwad P, Gandhewar M, et al. Persistence of SARS-CoV-2 in the first trimester placenta leading to vertical transmission and fetal demise from an

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abortion, first trimester, hydrops fetalis, congenital, placenta, fetal membrane, mother to child transmission, India		to vertical transmission and fetal demise from an asymptomatic mother			for COVID-19. The patient's serum was negative for anti-phospholipid antibodies, anti-nuclear antibodies, and anti-cardiolipin antibodies. IgM testing for toxoplasmosis, rubella, cytomegalovirus, and herpes simplex (TORCH) was negative, although IgG levels were above the reference range. The patient's blood type was O Positive. The patient underwent dilation and curettage, and products of conception were tested. Fetal chromosome analysis displayed disomy of chromosomes 13, 18, 21, and X. SARS-CoV-2 RNA was present in the amniotic fluid, fetal membranes, and placenta, and placental tissues demonstrated extensive inflammation. The authors emphasize the presence of SARS-CoV-2 in placental tissues, even after the virus is cleared from the respiratory system. The authors state that this case demonstrates congenitally transmitted SARS-CoV-2 infection, and that such infection can result in fetal hydrops and demise.	result in fetal hydrops and demise.	asymptomatic mother [published online 2020 Aug 21]. medRxiv. doi:10.1101/2020.08.18.20177121
camera; communication; neonatal; stress; telehealth; telemedicine; COVID-19	20-Aug-20	Parent Stress in Relation to Use of Bedside Telehealth, an Initiative to Improve Family-Centeredness of Care in the Neonatal Intensive Care Unit	Journal of Patient Experience	Original Research	This paper describes the impact of bedside web cameras on stress levels of parents in the neonatal ICU (NICU) to determine telehealth interventions that might improve family-centered care, especially in the setting of the COVID-19 pandemic. The authors distributed a survey from April-July 2018, the Parental Stress Scale NICU, which is a 52-item scale encompassing 4 separate domains (sights and sounds, appearance of infant, relationships, and staff communications and behaviors) to 114 parents of infants in the NICU of a children's hospital in Philadelphia, USA on days 7-10 of hospitalization. Parents reported high levels of stress associated with being separated from their babies, with their babies appearing to be in pain, and with feeling helpless to help their babies. Parents were also asked if they used the available AngelEye Camera while their baby was hospitalized. Parents who reported using the bedside camera reported lower levels of stress related to the sights and sounds of the unit (p=0.0265), the appearance of the baby (p=0.0246), and their relationship with the infant and parental role (p=0.0184). 22% of parents who used the bedside camera reported that separation from their baby was very or extremely stressful, in comparison to 63% of parents who did not use the camera (p=0.005). The authors conclude that bedside web camera interventions may hold potential for reducing parent stress related to separation from their babies, especially in the setting of a global pandemic.	This paper describes the impact of bedside web cameras on stress levels of parents in the neonatal ICU (NICU) to determine telehealth interventions that might improve family-centered care. Bedside web camera interventions may reduce parent stress related to separation from their babies, especially in the setting of the COVID-19 pandemic.	Guttman K, Patterson C, Haines T, et al. Parent Stress in Relation to Use of Bedside Telehealth, an Initiative to Improve Family-Centeredness of Care in the Neonatal Intensive Care Unit. J Patient Exp. 2020;7(6):1378-1383. doi:10.1177/2374373520950927
lymphopenia, screening, pregnancy, COVID-19, SARS-	20-Aug-20	Lymphopenia and Severe Acute Respiratory	Obstetrics and Gynecology	Research Letter	The authors sought to examine whether lymphopenia identified asymptomatic SARS-CoV-2 infection and to assess whether lymphopenia could discriminate the presence of infection in symptomatic patients under investigation for COVID-19. From	Findings from this study showed that lymphopenia was an uncommon finding among obstetric inpatients	Duffy CR, Hart JM, Modest AM, et al. Lymphopenia and Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)

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CoV-2, hospitalized		Syndrome Coronavirus 2 (SARS-CoV-2) Infection Among Hospitalized Obstetric Patients			April 1 through April 14, 2020, there were 213 admissions to obstetric services. Nine patients had lymphopenia; 6 of these had suspected or known COVID-19. The remaining three patients were asymptomatic and tested negative for SARS-CoV-2. Additionally, from March 10 through April 14, 2020, 37 symptomatic patients with known or suspected COVID-19 infection presented for inpatient evaluation or admission and had an absolute lymphocyte count performed. There was no difference in median absolute lymphocyte count in symptomatic patients with and without COVID-19 infection. Lymphopenia (defined as absolute lymphocyte count less than 0.83103/microliter) was an uncommon finding among obstetric inpatients and was not a useful screening strategy for identifying asymptomatic SARS-CoV-2 infection. Moreover, absolute lymphocyte count did not meaningfully discriminate between those with and without SARS-CoV-2 infection among patients under investigation.	and was not a useful screening strategy for identifying asymptomatic SARS-CoV-2 infection. Moreover, absolute lymphocyte count did not meaningfully discriminate between those with and without infection among patients under investigation.	Infection Among Hospitalized Obstetric Patients. <i>Obstet Gynecol.</i> 2020;136(2):229-231. doi:10.1097/AOG.0000000000003984
COVID-19; children	20-Aug-20	COVID-19 and Children: Many Questions Yet To Be Answered	Annals of the Academy of Medicine, Singapore	Editorial	The authors discuss the health impact of COVID-19 on children and their role in the transmission chain of SARS-CoV-2. Compared to adults, the absolute number, severity, and mortality of confirmed pediatric COVID-19 cases remain low, with only a small proportion of infected children becoming critically ill. The authors report that about half of infected children have no fever or respiratory symptoms. Gastro-intestinal symptoms may occur early in the disease process, and may be mistaken for other acute abdominal diseases, such as appendicitis. Younger age, obesity, and presence of comorbidities are risk factors for severe pediatric COVID-19. The Kawasaki-like disease MIS-C is a rare severe condition that can manifest 2–4 weeks after the onset of COVID-19 in children and adolescents. Children with MIS-C often display shock with cardiac involvement, gastro-intestinal symptoms, and increased inflammatory markers, with positive laboratory results for SARS-CoV-2 or antibodies. Many children infected with SARS-CoV-2 may not be identified because they are asymptomatic. Asymptomatic children can potentially spread the virus; however, their importance in the transmission chain remains unclear. Accurately establishing children’s role in the pandemic is crucial to making appropriate public health decisions, such as priority of school re-opening among larger societal re-openings during the pandemic.	The authors discuss the health impact of COVID-19 on children and their role in the transmission chain of SARS-CoV-2. Compared to adults, only a small proportion of children become critically ill. Many children may not be identified as infected due to being asymptomatic but may have the potential to transmit the virus.	de Souza TH, Lanziotti VS, Lee JH. COVID-19 and Children: Many Questions Yet To Be Answered. <i>Ann Acad Med Singap.</i> 2020;49(8):527-529. PMID: 33164021.
Italy; COVID-19; seroprevalence; SARS-CoV-2; healthcare workers	20-Aug-20	Low seroprevalence of SARS-CoV-2 infection among healthcare	Infection Control & Hospital Epidemiology	Research Brief	The authors conducted a cross-sectional study to determine the prevalence of SARS-CoV-2 antibodies in healthcare workers (HCWs) at the Buzzi Hospital in Milan, with serum samples collected on April 15, 2020. Samples were obtained from 663 employees (108 males; median age: 44 years [range not given]),	In this cross-sectional study, the authors determined that the seroprevalence of SARS-CoV-2 IgG in healthcare	Amendola A, Tanzi E, Folgori L, et al. Low seroprevalence of SARS-CoV-2 infection among healthcare workers of the largest children hospital in Milan during

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		workers of the largest children hospital in Milan during the pandemic wave			of which 547 were HCWs and the remaining non-HCWs. None of the participants displayed COVID-19 symptoms at the time of serum collection; however, 304/547 (55.6%) of HCWs had > 1 known contact with someone diagnosed with COVID-19. The prevalence of SARS-CoV-2 IgG was 5.13% among participants, with almost identical seroprevalence among HCWs and non-HCWs (5.12% vs 5.17% respectively, p=0.95). Approximately 41% of subjects reported symptoms during the weeks preceding sampling, but none had undergone nasopharyngeal swab testing for SARS-CoV-2 RNA. Workers in the pediatric intensive care and surgery wards showed a higher frequency of antibodies than others (22.2% vs 4%, p<0.01, and 14.3% vs 4.5% p<0.01, respectively). The prevalence of seroconversion in HCWs was 6.58% in those in contact with confirmed COVID-19 patients, and 3.29% in those without contact (p=0.08). Seroconversion prevalence was higher in HCWs with PPE-free contact with COVID-19 patients (21.6%) compared to those using appropriate PPE (4.5%). The authors determined that the prevalence of SARS-CoV-2 IgG among HCWs using PPE was similar to that in the community, and thus there was no increased risk for COVID-19 among staff in hospitals providing the appropriate PPE.	workers at a pediatric hospital in Milan was 5.13%, comparable to that in the general population. They identified that PPE can help reduce the risk for COVID-19 transmission.	the pandemic wave. Infect Control Hosp Epidemiol. 2020 Dec;41(12):1468-1469. doi: 10.1017/ice.2020.401. Epub 2020 Aug 6. PMID: 32758311; PMCID: PMC7438626.
COVID-19, Pediatric, Pandemic, Singapore	20-Aug-20	Comparative Analysis of Symptomatic and Asymptomatic SARS-CoV-2 Infection in Children	Annals of the Academy of Medicine, Singapore	Original Research	The authors compared clinical, epidemiological, and laboratory parameters between symptomatic and asymptomatic children with SARS-CoV-2 infection in children aged 0-16 years in Singapore. They analyzed laboratory-confirmed SARS-CoV-2 infection admitted to the hospital from January to May 2020. Of the 39 COVID-19 children included, 38.5% were asymptomatic. The mean ages of symptomatic and asymptomatic cases were 7.8 and 8.3 years, respectively (P = 0.67). Comorbidities, such as asthma, epilepsy, and hypothyroidism, were more likely to be present in symptomatic COVID-19 cases (37.5% vs. 6.7%, P = 0.06). Household transmission accounted for 95% of cases. The presenting symptoms of symptomatic children were low-grade fever (54.2%), rhinorrhea (45.8%), sore throat (25%), diarrhea (12.5%), and acute olfactory dysfunction (5.4%). Children of Chinese ethnicity (37.5% vs. 6.7%), complete blood count (45.8% vs. 6.7%), and liver enzyme abnormalities (25% vs. 7.7%) were more common in symptomatic children than asymptomatic children. All children had a mild disease course, with a mean length of stay of 15 days (standard deviation 6.5 days, range 3–30 days), and none required oxygen supplementation or intensive care. The high proportion of asymptomatic infected children coupled with household transmission as the primary source of pediatric COVID-19 infection underscores the importance of early	The authors compared clinical, epidemiological, and laboratory parameters between symptomatic and asymptomatic children with SARS-CoV-2 infection in Singapore. Although all children had a mild disease course, the high proportion of asymptomatic children emphasizes the importance of early screening and isolation of children upon detecting an index case of COVID-19 in a household.	Li J, Thoon KC, Chong CY, et al. Comparative Analysis of Symptomatic and Asymptomatic SARS-CoV-2 Infection in Children. Ann Acad Med Singap. 2020;49(8):530-537.

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					screening and isolation of children upon detecting an index case of COVID-19 in a household.		
Children, Kawasaki disease, Multisystem inflammatory syndrome	20-Aug-20	Syndrome resembling Kawasaki disease in COVID-19 asymptomatic children	Journal of Infection and Public Health	Review Article	These authors review the literature about MIS-C, available at the time of their writing in June 2020. Although this hyper-inflammatory syndrome resembles Kawasaki disease (KD), the classical symptoms of KD, like bilateral conjunctival injection and strawberry tongue, are not always present. They describe MIS-C as characterized by high fever, rash, hypotension, gastro-intestinal symptoms, and organ dysfunction. Patients may develop vaso-plegic shock unresponsive to volume resuscitation. Other common features include small pleural pericardial and ascitic effusions, suggestive of a wide-spread inflammatory process. Patients generally demonstrate either positive RT-PCR or positive antibodies to SARS-COV-2. MIS-C patients have higher levels of C-reactive protein, D-dimer, ferritin, and cardiac enzymes, and lower lymphocyte counts, than those with KD. The age of children with MIS-C tends to be higher than KD patients. The authors also report that African children are more prone to MIS-C, while KD is more common in children of Asian ancestry. MIS-C seems to present with more gastro-intestinal symptoms than KD. Also, in various studies it has been found that MIS-C presents with low platelet count, while KD presents with increased platelets. Finally, the authors report that some children may be genetically pre-disposed to MIS-C susceptibility.	These authors briefly review the literature about MIS-C, available at the time of their writing in June 2020. They especially highlight the similarities and differences between MIS-C and Kawasaki Disease.	Rehman S, Majeed T, Ansari MA, Al-Suhaimi EA. Syndrome resembling Kawasaki disease in COVID-19 asymptomatic children. J Infect Public Health. 2020 Aug 20:S1876-0341(20)30601-8. doi: 10.1016/j.jiph.2020.08.003. Epub ahead of print. PMID: 32919931; PMCID: PMC7439985.
India, anesthesia, labor analgesia, guidelines	20-Aug-20	Management of pregnant laboring women during COVID-19 pandemic	Journal of Anaesthesiology Clinical Pharmacology	Review Article	This article highlights the unique needs of pregnant women that should be kept in mind while making treatment policies and preparing response plans during the current COVID-19 pandemic. Management of COVID-19 laboring women requires a multidisciplinary approach consisting of a team of anesthesiologists, obstetricians, neonatologists, nursing staff, critical care experts, infectious disease, and infection control experts. The authors give guidelines for the testing of pregnant women for COVID-19, how to prepare healthcare centers for COVID-19-positive laboring women, and the general principles for management of confirmed/suspected COVID-19 pregnant women. Additionally, the authors provide a framework for labor analgesia in patients with active COVID-19, anesthesia for cesarean delivery in COVID-positive individuals, and guidelines in the event of cardiopulmonary resuscitation. The authors stressed the need to ensure personal protection of anesthesiologists, isolation of the patient—during labor and operative delivery, and simulation-based rehearsal of the procedures commonly carried out in the labor room and the operating theaters.	This article summarizes the guidelines for the management of COVID-19 positive laboring women, including facility preparation and treatment plans in specific cases	Jain K, Bhatia N, Grewal A, et al. Management of pregnant laboring women during COVID-19 pandemic. J Anaesthesiol Clin Pharmacol. 2020 Aug;36(Suppl 1):S91-S96. doi: 10.4103/joacp.JOACP_258_20.
Pediatric, nephrotic	20-Aug-20	New-Onset Nephrotic	Frontiers in Pediatrics	Case Report	This case report describes an 8-year-old boy with new-onset nephrotic syndrome associated with COVID-19. The child	This case study describes a young boy diagnosed with	Shah SA, Carter HP. New-onset nephrotic syndrome in a child

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syndrome, treatment		Syndrome in a Child Associated with COVID-19 Infection			presented with bilateral eyelid and facial swelling shortly after his parents were diagnosed with COVID-19. One week later, the boy tested positive for SARS-CoV-2, and was also diagnosed with nephrotic syndrome due to significant proteinuria, hypoalbuminemia, and hyper-cholesteremia. He responded well to standard-dose prednisone treatment for nephrotic syndrome, and went into clinical remission after one week of treatment. The authors report no complications related to clot formation or secondary infections. The authors caution that COVID-19 can be associated with new-onset nephrotic syndrome in children, but are optimistic in the success of treatment.	new-onset nephrotic syndrome secondary to COVID-19. Standard prednisone treatment was successful in treating the nephrotic syndrome.	associated with COVID-19 infection. <i>Frontiers in pediatrics</i> . 2020; doi: 10.3389/fped.2020.00471.
Preterm, vertical transmission, antibody response, neonate, USA	20-Aug-20	Coronavirus Disease 2019 in a Premature Infant: Vertical Transmission and Antibody Response or Lack Thereof	American Journal of Perinatology Reports	Case Report	The authors present the case of a preterm neonate (33 weeks of gestational age) born in New York, USA to a critically ill mother with SARS-CoV-2. Maternal medical history included obesity, poorly controlled type 2 diabetes, asthma, and hypertension. Laboratory results for the mother and neonate are reported. The neonate displayed early evidence of infection with a positive RT-PCR on day 1. Lack of parental contact prior to testing and strict adherence to recommended airborne precautions suggest vertical transmission of infection. Critical maternal illness and medications may have contributed to the need for extensive resuscitation at birth and highlight the importance of close fetal monitoring. While this infant did have respiratory symptoms necessitating intubation and mechanical ventilation, the authors suggest this could be a result of respiratory distress syndrome and is unlikely to be a COVID-19 pneumonia. Infant lacked immunoglobulin G antibody response by 3 weeks, which the authors attribute to a mild clinical course and prematurity.	The case of a preterm neonate born to a SARS-CoV-2 positive mother suggests vertical transmission of SARS-CoV-2 is possible. Whether severity of maternal illness and comorbidities contributed to presumed transmission of this infection to the infant remains unclear.	Rivera-Hernandez P, Nair J, Islam S, et al. Coronavirus Disease 2019 in a Premature Infant: Vertical Transmission and Antibody Response or Lack Thereof. <i>American Journal of Perinatology Reports</i> . DOI: 10.1055/s-0040-1715176
Children, school, non-academic, policy, mental health, well-being, USA	20-Aug-20	Addressing the Consequences of School Closure Due to COVID-19 on Children's Physical and Mental Well-Being	World Medical & Health Policy	Commentary	Despite children being at low risk for COVID-19-associated morbidities and mortalities, they have experienced significant disruptions in their daily lives. One of the most disruptive forces to occur during the COVID-19 pandemic has been prolonged school closures in the US. Distance learning methods have been adopted by educators, families, and students. Schools also provide non-academic supports for health and mental health services, food assistance programs, obesity prevention, and intervention in homelessness and maltreatment cases. The authors outline the physical and emotional toll school closures have had on students concerning the withdrawal of these non-academic supports. The authors suggest that the current pandemic has highlighted the importance of non-academic supports for meeting the diverse needs of children. The authors conclude by suggesting that despite the negative impacts brought about by the pandemic, there is currently an opportunity among state and federal policy-makers to re-assess current programs	The authors outline the importance of non-academic supports in US schools such as health and mental health services, food assistance, obesity prevention, and intervention in homelessness and maltreatment cases. The COVID-19 pandemic gives an opportunity to re-visit and strengthen these policies and programs.	Hoffman JA, Miller EA. Addressing the Consequences of School Closure Due to COVID-19 on Children's Physical and Mental Well-Being [published online ahead of print, 2020 Aug 20]. <i>World Med Health Policy</i> . 2020;10.1002/wmh3.365. doi:10.1002/wmh3.365

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					and make necessary policy changes that improve non-academic services and support for America's youth.		
Italy, Type 1 diabetes, children, adolescents	20-Aug-20	Caring for children and adolescents with type 1 diabetes mellitus: Italian Society for Pediatric Endocrinology and Diabetology (ISPED) statements during COVID-19 pandemic	Diabetes Research and Clinical Practice	Review Article	This study reviewed the impact of the COVID-19 pandemic in children and adolescents with type 1 diabetes mellitus, and analyzed the clinical characteristics of the infection, and proposed clinical practice recommendations from the Italian Society for Pediatric Endocrinology and Diabetology (ISPED). A literature search was carried out in the guideline databases, Medline and Embase, as well as Diabetes Societies websites, until May 21st 2020 for guidelines and recommendations on type 1 diabetes mellitus management during COVID-19 pandemic. Results indicated that COVID-19 infection in pediatric patients seems to be clinically less severe than in adults; children have so far accounted for 1-5% of diagnosed cases, with a median age of 6.7 years (age range: 1 day-15 years) and better prognosis. There is currently no evidence suggesting a higher risk of COVID-19 infection in children with diabetes than unaffected peers. The authors outline the adaptation of treatment regimens and give ISPED recommended practices, and stress the need for continued sharing of clinical experiences.	This review proposed that there is currently no known increased risk for COVID-19 due to type 1 diabetes mellitus. Based on this finding, the authors also outline adaptation of treatments, as well as recommended practices for treatment of pediatric type 1 diabetes and COVID-19.	d'Annunzio G, Maffei C, Cherubini V, et al. Caring for children and adolescents with type 1 diabetes mellitus: Italian Society for Pediatric Endocrinology and Diabetology (ISPED) statements during COVID-19 pandemic. Diabetes Res Clin Pract. 2020; doi:10.1016/j.diabres.2020.108372
Italy, antibody, pregnancy	20-Aug-20	Coronavirus disease 2019 antibody testing in pregnancy	American Journal of Obstetrics & Gynecology MFM	Clinical Perspective	SARS-CoV-2 infection has been associated with maternal and perinatal morbidity and mortality. Almost all patients with COVID-19 have a positive result for anti-viral immunoglobulin G (IgG) within approximately 10–20 days after symptom onset. However, the clinical value of antibody testing has not yet been completely elucidated. Testing pregnant women for an antibody response to COVID-19 may have different advantages, such as identifying (1) possibly recovered women (eg, IgG positive) who were never tested with the PCR assay (2) women who are still at risk for COVID-19 infection (eg, IgM and IgG negative). The authors state that the use of the point-of-care rapid combined antibody test can be of paramount importance in obstetrical healthcare settings. They further express that if rapid antibody testing and personnel are available, algorithms for testing pregnant women could be implemented. The authors recommend that pregnant women be tested for an antibody response to SARS-CoV-2 before receiving care in both inpatient and outpatient settings, as this will allow for effective preventative guidelines to be followed.	This clinical perspective from a hospital in Naples, Italy, highlights the importance and general use of antibody testing in pregnant women. They outline an algorithm for rapid combined antibody testing for general hospital practice.	Zullo F, Di Mascio D, Saccone G. Coronavirus disease 2019 antibody testing in pregnancy. American Journal of Obstetrics & Gynecology MFM. 2020; doi: https://doi.org/10.1016/j.ajogmf.2020.100142.
PPE, labor and delivery, obstetrics	20-Aug-20	Labor and delivery guidance for coronavirus disease 2019	American Journal of Obstetrics & Gynecology MFM	Letter to the editor	This letter serves to highlight a portion of the paper "Labor and delivery guidance for coronavirus disease 2019" by Boelig et al that the authors believe contradicts recommendations of other infection prevention experts, including the Centers for Disease Control and Prevention (CDC). The recommendation in question suggests that N95 masks be used by healthcare providers in the	This letter to the editor highlights a guideline recommendation that is inconsistent with current CDC guidelines. The authors suggest that	Lagrew DC, Shields LE. Labor and delivery guidance for coronavirus disease 2019. American Journal of Obstetrics & Gynecology MFM. 2020;

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					second stage of labor because of aerosolization of COVID-19, but the original paper does not provide references to support this claim. The authors of this letter state that, the claim of aerosolization seems to be based on opinion. This guideline would limit the number of N95 masks available to other hospital personnel. The authors suggest that N95 masks should be conserved if not necessary and that surgical masks and face shields be used instead during the second stage of labor. They offer evidence to support this claim. The authors stress the need to share PPE with non-obstetrical colleagues, as there is a shortage of N95 masks.	surgical face masks and face shields are sufficient PPE for healthcare providers to use in the second stage of labor instead of N95 masks.	doi: https://doi.org/10.1016/j.ajogmf.2020.100157 .
Adverse childhood experiences, adolescents, anxiety, maltreatment, posttraumatic stress symptoms, China	20-Aug-20	Is the psychological impact of exposure to COVID-19 stronger in adolescents with pre-pandemic maltreatment experiences? A survey of rural Chinese adolescents	Child Abuse & Neglect	Original Article	Adverse childhood experiences (AdCEs) including maltreatment experiences have been found to predict adolescents' mental health outcomes in trauma contexts, including increased risk of anxiety and posttraumatic stress disorder. The aims of this study were to examine whether exposure to COVID-19 predicts elevated levels of anxiety and post-traumatic stress symptoms (PTSS) and whether pre-pandemic maltreatment experiences exacerbate this impact on mental health in Chinese rural adolescents. An online survey was conducted from February 8-27, 2020 and completed by 6196 adolescents aged 11-18 years old. The largest variance in PTSS and anxiety problems was explained by AdCEs, with more pre-pandemic maltreatment experiences predicting more PTSS (effect size beta = 0.16~0.27), and more anxiety (effect size beta = 0.32~0.47). Experienced or subjective fear of exposure to COVID-19 predicted statistically significant variance in PTSS and anxiety, and standardized betas ranged from 0.04 to 0.09. Participants who had adverse childhood experiences and had experienced exposure to COVID-19 showed elevated PTSS and anxiety.	This study examined the associations between pre-pandemic adverse childhood experiences (AdCEs), exposure to COVID-19, and mental health among Chinese rural adolescents. The authors found that a larger number of AdCEs and exposure to COVID-19 predicted higher levels of posttraumatic stress symptoms and anxiety.	Guo J, Fu M, Liu D, Zhang B, Wang X, van IJendoorn MH. Is the psychological impact of exposure to COVID-19 stronger in adolescents with pre-pandemic maltreatment experiences? A survey of rural Chinese adolescents [published online 2020 Aug 20]. Child Abuse Negl. 2020. doi:10.1016/j.chiabu.2020.104667
Epidemic, midwives, nurses, psychological responses, support, family, stigma	20-Aug-20	Lessons from past epidemics and pandemics and a way forward for pregnant women, midwives and nurses during COVID-19 and beyond: A meta-synthesis	Midwifery	Review	The authors conducted a qualitative systematic review and meta-synthesis to consolidate qualitative research studies that examined the experiences and needs of pregnant women, midwives, and nurses of maternity units to provide a way forward for future research and practices during the current pandemic and future epidemics and pandemics. Qualitative studies with samples of pregnant women, midwives, and/or nurses of maternity units who experienced epidemics and/or pandemics were searched from 1 January to 4 April 2020 by using PubMed, Scopus, PsycINFO, and CINAHL. 8 studies were included in this review. 4 themes emerged from the synthesis: psychological responses, challenges faced, coping strategies, and sources of support and support needs. Pregnant women, midwives, and nurses experienced negative psychological responses during epidemics and pandemics. Challenges, such as limited available	This review consolidated the evidence on the perspectives of pregnant women, midwives, and nurses of maternity units to gain an insight into their experiences during past epidemics and pandemics, including psychological responses, challenges faced, coping strategies, and sources of support and support needs.	Shorey S, Chan V. Lessons from past epidemics and pandemics and a way forward for pregnant women, midwives and nurses during COVID-19 and beyond: A meta-synthesis [published online, 2020 Aug 20]. Midwifery. 2020;90:102821. doi:10.1016/j.midw.2020.102821

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					information and public stigma, were faced. Various coping strategies, such as actively looking for more information and seeking solace in religions, were practiced by pregnant women, midwives, and nurses. Families were both sources of support and stress and they expressed needs for more informational, emotional, and financial support during pandemics.		
Child maltreatment, pandemic, parenting, stress	20-Aug-20	Stress and parenting during the global COVID-19 pandemic	Child Abuse & Neglect	Original Article	Stress and compromised parenting often place children at risk of abuse and neglect. This study examined the risk and protective impacts of the COVID-19 pandemic in relation to parental perceived stress and child abuse potential among families in the western USA. A survey was conducted from April 20-May 9, 2020 in the Rocky Mountain region of USA, and 183 parents with a child completed the survey. The authors found that greater COVID-19 related stressors and high anxiety and depressive symptoms were associated with higher parental perceived stress. Receipt of financial assistance and high anxiety and depressive symptoms were associated with higher child abuse potential. Conversely, greater parental support and perceived control during the pandemic were associated with lower perceived stress and child abuse potential. Results indicated racial and ethnic differences in COVID-19 related stressors, but not in mental health risk, protective factors, perceived stress, or child abuse potential. These findings show the important associations of COVID-19 related stressors and mental health risk with parental perceived stress and child abuse potential and the role that protective factors may play in mitigating these adverse associations.	The authors conducted a survey of parents in the Rocky Mountain region of USA to determine the impacts of the COVID-19 pandemic in relation to parental perceived stress and child abuse potential. An accumulation of stressors due to COVID-19 is a key risk factor implicated in higher parent-perceived stress whereas anxiety and depression are associated with both higher parent-perceived stress and child abuse potential.	Brown SM, Doom JR, Lechuga-Peña S, et al. Stress and parenting during the global COVID-19 pandemic [published online 2020 Aug 20]. Child Abuse Negl. 2020. doi:10.1016/j.chiabu.2020.104699
Children, Chron's Disease, MIS-C, TNF- α , inflammatory bowel disease	20-Aug-20	Chron's Disease and Multisystem Inflammatory Syndrome in Children (MIS-C) and COVID-19 Treated with Infliximab	Journal Pediatric Gastroenterology and Nutrition	Case Report	Coronavirus disease 2019 (COVID-19) may lead to a severe inflammatory response referred to as a cytokine storm. The authors describe a case of severe SARS-CoV-2 infection in a recently diagnosed pediatric Crohn's disease patient successfully treated with tumor necrosis factor-alpha (TNF- α) blockade. Cytokine profile revealed rising levels of interleukin (IL)-6, IL-8, and TNF- α , higher than those described in either inflammatory bowel disease or severe COVID-19 alone. The patient was treated with infliximab for TNF- α blockade to address both moderately to severely active Crohn's disease and MIS-C, and within hours of treatment presented with resolved fever, tachycardia, and hypotension, respectively. This case supports a role for TNF- α blockade in the treatment of COVID-19 inflammatory cascade, but the role of anti-TNF agents in patients with MIS-C requires further investigation.	Increased TNF- α levels are seen in cytokine storm due to COVID-19 and in active inflammatory bowel disease. Treatment with infliximab, known to be effective for children with Crohn's disease, was also effective in halting the inflammatory response due to SARS-CoV-2 infection.	Dolinger MT, Person H, Smith R, et al. Pediatric Crohn Disease and Multisystem Inflammatory Syndrome in Children (MIS-C) and COVID-19 Treated With Infliximab. J Pediatr Gastroenterol Nutr. 2020;71(2):153-155. doi:10.1097/MPG.0000000000002809
Mental health, pregnancy, psychology, China	20-Aug-20	Psychological responses and lifestyle changes	International Journal of	Original Research	A cross-sectional study was conducted online via WeChat (a Chinese social media platform) between February and March 2020 in Liaoning Province, China to assess the attitude towards	According to this study, many Chinese pregnant women in Liaoning	Zhang Y, Ma ZF. Psychological responses and lifestyle changes among pregnant women with

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		among pregnant women with respect to the early stages of COVID-19 pandemic [Free Access to Abstract Only]	Social Psychology		COVID-19 and the psychological impact of the pandemic among 560 pregnant women. A modified validated IES Impact of Event Scale (IES) questionnaire in Chinese language with a Cronbach's alpha of .8 (measurement of internal consistency) was used to measure the psychological impact with an overall IES score of ≥ 26 used to indicate a moderate-to-severe impact. More than half of 79.8% of respondents (79.8%) were in 1st and 2nd first and second trimesters of pregnancy and none were positive for the COVID-19 at the time of the study. The overall mean IES in pregnant women was 31.4 ± 13.7 . 67.1% of respondents had an IES of at least 26. Psychological impact seemed to be more severe in women in the 2nd second trimester of pregnancy (the highest IES) ($p = .016$). The majority of pregnant women reported increased financial stress (69.3%), increased stress from work (62.9%) and home (59.6%). The authors conclude that Chinese pregnant women during the early stages of the COVID-19 pandemic experienced moderate-to-severe stressful impact, and measures should be taken to address maternal mental health.	Province experienced moderate to severe psychological impact as a result of the COVID-19 pandemic. The authors advocate for attention to maternal mental health as a result.	respect to the early stages of COVID-19 pandemic [published 2020 Aug 20]. Int J Soc Psychiatry. 2020; doi:10.1177/0020764020952116
Pediatrics, intimate partner violence, telehealth, support, social distancing, maternal health	20-Aug-20	Supporting Intimate Partner Violence Survivors and Their Children During the COVID-19 Pandemic [Free Access to Abstract Only]	Pediatrics	Perspective	During the COVID-19 pandemic, physical distancing, school and childcare closures, and unemployment are contributing to additional stressors within households, associated with worsening intimate partner violence (IPV). Physical distancing may limit a survivor's access to support groups and individual counseling. Children exposed to IPV may experience similar isolation and stress and have less access to their usual sources of support, particularly trusted adults, such as teachers, after-school workers, and coaches. The authors offer recommendations to support IPV survivors and their children during the current pandemic, including assessing privacy during telehealth visits, using the Confidentiality, Universal Education and Empowerment, and Support (CUES) framework adapted for a virtual setting, increasing awareness of state-mandated reporting laws, and collaborating with IPV agencies on ways to connect with clients virtually.	The COVID-19 pandemic may be increasing intimate partner violence (IPV) and posing challenges for physicians during virtual health visits. The authors provide recommendations for supporting IPV survivors and their children during the pandemic.	Ragavan MI, Garcia R, Berger RP, Miller E. Supporting Intimate Partner Violence Survivors and Their Children During the COVID-19 Pandemic [published 2020 Aug 20]. Pediatrics. 2020;10.1542/peds.2020-1276
Cytotoxic lesion, corpus callosum, MIS-C	20-Aug-20	Cytotoxic Lesion of the Corpus Callosum in an Adolescent with Multisystem Inflammatory Syndrome and SARS-CoV-2 Infection	American Journal of Neuroradiology	Case Report	The extent of the clinical picture of MIS-C is actively evolving and has yet to be fully elucidated - reports of neurologic manifestations of SARS-CoV-2 are still limited in pediatric patients. This report details a case study of an adolescent patient diagnosed with MIS-C and acute encephalopathy causing delirium. A cytotoxic lesion was discovered on the patient's corpus callosum, and the patient displayed severe COVID-19 symptoms. Cytotoxic lesions can occur in a wide range of conditions, including infection, seizures, and Kawasaki disease, and are typically reversible. The authors hypothesized the cytotoxic lesion of the corpus callosum was secondary to the	This case study details a patient with a cytotoxic lesion on the corpus callosum secondary to SARS-CoV-2 infection and highlights the potential of MR imaging abnormalities in patients positive for SARS-CoV-2. The authors stress that neurologic manifestations of SARS-	Lin J, Lawson EC, Verma S, Peterson RB, Sidhu R. Cytotoxic Lesion of the Corpus Callosum in an Adolescent with Multisystem Inflammatory Syndrome and SARS-CoV-2 Infection [published online, 2020 Aug 20]. AJNR Am J Neuroradiol. doi:10.3174/ajnr.A6755

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					systemic inflammation due to SARS-CoV-2 infection, which resulted in MIS-C. Based on this report, the authors caution that there should be careful consideration of possible neurologic complications of SARS-CoV-2 infections.	CoV-2 infection require increased attention.	
Developmental disabilities, inequity, children, mental health, health care access	20-Aug-20	Including Children with Developmental Disabilities in the Equation During this COVID-19 Pandemic	Journal of Autism and Developmental Disorders	Commentary	Amidst the ongoing COVID-19 pandemic, children with developmental disabilities warrant specific attention to minimize disproportionate consequences. These children are especially vulnerable to the effects of the pandemic and its disruption of services due to greater healthcare needs, dependence on community-based services, and mental health concerns. The authors recommend interdisciplinary collaboration to maintain access to outpatient diagnostic and intervention services, ensure effective e-learning and tele-therapy, and protect the mental well-being of children and caregivers.	This commentary highlights the disproportionate consequences of disrupted services on children with developmental disabilities and provides recommendations for mitigating the negative impact on health care, education, behavioral health, and mental health.	Aishworiya R, Kang YQ. Including Children with Developmental Disabilities in the Equation During this COVID-19 Pandemic [published online, 2020 Aug 20]. J Autism Dev Disord. 2020;1-4. doi:10.1007/s10803-020-04670-6
Type 1 Diabetes, pediatrics, lockdown, Germany	20-Aug-20	Did the COVID-19 Lockdown Affect the Incidence of Pediatric Type 1 Diabetes in Germany?	Diabetes Care	Letter	The authors aimed to assess a change in pediatric type 1 diabetes incidence during the COVID-19 lockdown in Germany. They analyzed pediatric type 1 diabetes patients aged six months to 18 years diagnosed between 13 March and 13 May of each year from 2011 to 2020, corresponding to the country's lockdown period in 2020. Information about type 1 diabetes cases was obtained from 216 German pediatric diabetes centers participating in the Diabetes- Prospective Follow-up registry (DPV). The authors predicted the type 1 diabetes incidence for 2020 based on data from 2011 to 2019 and compared these with the observed incidence. Overall, the results showed that the type 1 diabetes incidence increased from 16.4 in 2011 to 22.2 in 2019. Furthermore, the incidence in 2020 was 23.4 [95% CI 21.5–25.5], which did not differ significantly from the predicted incidence (22.1) [95% CI 20.4–23.9]. The authors also found no significant differences between the observed and estimated incidence of pediatric type 1 diabetes in 2020 after stratifying by age-group or sex.	Findings from this study showed that Germany's COVID-19 lockdown did not strongly influence the trends in pediatric type 1 diabetes incidence in the short-term. However, weak effects cannot be excluded, given the relatively low COVID-19 infection rate in Germany.	Tittel SR, Rosenbauer J, Kamrath C, et al. Did the COVID-19 Lockdown Affect the Incidence of Pediatric Type 1 Diabetes in Germany? [published online 2020 Aug 21]. Diabetes Care. 2020;dc201633. doi:10.2337/dc20-1633
MIS-C, Brazil, cardiac, autopsy	20-Aug-20	SARS-CoV-2 in cardiac tissue of a child with COVID-19-related multisystem inflammatory syndrome	The Lancet Child and Adolescent Health	Case Report	The authors report the case of an 11-year-old girl with multisystem inflammatory syndrome in children (MIS-C) related to SARS-CoV-2 infection in Sao Paulo, Brazil. The previously healthy child of African descent developed cardiac failure and was admitted to the pediatric ICU with cardiovascular shock and a persistent fever. She was placed on mechanical ventilation and received antibiotic treatment with ceftriaxone and azithromycin. An echo-cardiography showed diffuse left-ventricular hypokinesia and a decreased ejection fraction (31%). A chest CT revealed multiple ground-glass pulmonary opacities, and her laboratory results showed elevated markers of systemic inflammation and	This case report describes the presentation, disease course, and autopsy of MIS-C in an 11-year old female. The pathological observations from this case support the hypothesis that SARS-CoV-2 infection present in cardiac tissue may be a major contributing factor	Dolhnikoff M, Ferreira Ferranti J, de Almeida Monteiro RA, et al. SARS-CoV-2 in cardiac tissue of a child with COVID-19-related multisystem inflammatory syndrome [published online ahead of print, 2020 Aug 20]. Lancet Child Adolesc Health. 2020;S2352-4642(20)30257-1. doi:10.1016/S2352-4642(20)30257-1

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					myocardial injury (C-reactive protein, interleukin-6, ferritin, triglycerides, D-dimer, troponin, and creatine kinase myocardial band). Sinus tachycardia was observed throughout her hospitalization. She died after 28 hours of hospitalization when she developed ventricular fibrillation. Ultrasound-guided minimally invasive autopsy and postmortem CT angiography were performed. Histopathological examination of the heart showed evidence of myocarditis, pericarditis, and endocarditis with inflammatory cell infiltration. SARS-CoV-2 RNA was detected in the cardiac and pulmonary tissues. Furthermore, whole exome sequence revealed no evidence of genetic variants associated with immunological dysfunction.	to the development of myocarditis and heart failure in MIS-C.	
Neurology, CNS, pediatric, MIS-C	20-Aug-20	COVID-19-Associated Cytotoxic Lesions of the Corpus Callosum	American Journal of Neuroradiology	Case Report	Little is known about potential neurological complications of COVID-19 in children. Cytotoxic lesions of the corpus callosum (CLOCC) are associated with some viral infections. This article reports on neurologic CLOCC presentations in COVID-19 pediatric patients (n=2, male, ages 9 and 12 years) and suggests that these cases may reflect a new presentation of MIS-C. Both patients exhibited neurological symptoms, lethargy, fever, and lymphopenia, with evidence of a systematic inflammatory response. No causative agents other than SARS-CoV-2 were identified. MRI showed abnormal T2-weighted hyperintense signal and restricted diffusion in the corpus callosum. Post-infection imaging was performed in one patient and showed almost complete resolution of abnormal signal, and both patients recovered quickly after receiving immunotherapy treatment for COVID-19. The authors state that these cases mirror clinical and radiological features reported in 15 children with CLOCC, of which 83% were presumed to be related to various infections. Further investigation of COVID-19 related central nervous system pathology in children and the potential role of immunotherapy is required for better treating pediatric patients during the pandemic.	This article details two case reports of cytotoxic lesions of the corpus callosum (CLOCC) in COVID-19 pediatric patients and relates them to other cases of CLOCC presumed to be related to infections. The authors suggest that CLOCC could be a new presentation of MIS-C and COVID-19 infection in children.	Gaur P, Dixon L, Jones B, et al. COVID-19-Associated Cytotoxic Lesions of the Corpus Callosum. AJNR Am J Neuroradiol. 2020. doi:10.3174/ajnr.A6713
Placenta, vertical transmission, ACE2, TMPRSS2, sequencing, receptors	19-Aug-20	Single-Cell RNA-seq Identifies Cell Subsets in Human Placenta That Highly Expresses Factors Driving Pathogenesis of SARS-CoV-2	Frontiers in Cell and Developmental Biology	Original Research	In this study, the authors surveyed publicly available single-cell RNA sequencing (scRNA-seq) data of human placentas for the expression of the SARS-CoV-2 receptors ACE2 and BSG/CD147, along with the S protein proteases TMPRSS2 and CTSL. They also surveyed placental cells for the expression of DPP4 and ANPEP, utilized by MERS-CoV and CoV-229E, respectively. The human placenta is characterized by 4 cell lineages: extravillous trophoblasts (EVT), cytotrophoblasts (CTB), syncytiotrophoblasts (STB), and villous stromal cells (STR). ACE2 and TMPRSS2 were found to be co-expressed by a subset of syncytiotrophoblasts (STB) in the first trimester and extravillous trophoblasts (EVT) in the second trimester human placenta. The non-canonical	In this study, the authors surveyed publicly available single-cell RNA sequencing (scRNA-seq) data of human placenta for the expression of the SARS-CoV-2 receptors. They found that various subsets of placental cells expressed both ACE2 and TMPRSS2 in each of the trimesters of pregnancy,	Ashary N, Bhide A, Chakraborty P, et al. Single-Cell RNA-seq Identifies Cell Subsets in Human Placenta That Highly Expresses Factors Driving Pathogenesis of SARS-CoV-2. Front Cell Dev Biol. 2020;8:783. Published 2020 Aug 19. doi:10.3389/fcell.2020.00783

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					receptor BSG/CD147 and other proteases (CTSL, CTSB, and FURIN) were detected in most of the placental cells. Other receptors (ANPEP and DPP4) were also expressed in the 1st and 2nd trimester placental cells. Additionally, the term placenta expressed ACE2, DPP4, and ANPEP along with the viral S protein proteases. The ACE2- and TMPRSS2-positive (ACE2 + TMPRSS2 +) placental subsets expressed mRNA for proteins involved in viral budding and replication. These cells also had the mRNA for proteins that physically interact with SARS-CoV-2 in host cells. The authors concluded the cellular targets for SARS-CoV-2 entry are present in the developing human placenta.	along with other proteases (CTSL, CTSB, and FURIN). The authors concluded that the cellular targets for SARS-CoV-2 entry are present in the developing human placenta.	
SARS-CoV-2; platelet graft; COVID-19; transmission	19-Aug-20	Lack of transmission of SARS-CoV-2 by platelet transfusion from a COVID-19-positive donor in a hematopoietic stem cell transplantation patient	Pediatric Blood and Cancer	Letter to the Editor	The authors report a 22-month old male in Riyadh, Saudi Arabia, with acute pre-B lymphoblastic leukemia who underwent a matched-donor hematopoietic stem cell transplant for persistent disease. On day 22 after transplantation, he developed a high fever, with laboratory tests indicating thrombocytopenia, transaminitis, minor elevation of bilirubin levels, serum LDH at 744U/L, and a low PCR copy number of cytomegalovirus (35 copies/mL). Abdomen/Liver Doppler ultrasound showed right portal vein reversal of flow and gall bladder thickening suggestive of veno-occlusive disease. After the first platelet (PLT) transfusion, the onset of high-grade fever led to the discovery that the platelet unit was from a COVID-19 positive donor who tested positive for SARS-CoV-2 5 days after transfusion. There was an eventual normalization of liver enzymes and negative blood cultures after introducing broad-spectrum antibiotics, diuretics, low-dose steroids, and defibrotide therapy. On day 14 post PLT transfusion, a negative SARS-CoV-2 test was confirmed from blood and nasopharyngeal samples; hence there was no laboratory evidence of acquiring SARS-CoV-2. Thus, the authors suggest that in light of current evidence, the transmission of SARS-CoV-2 by blood products is unlikely, but they recommend using robust donor screening methods and universal deactivating techniques to decrease the risk of viral transmission, especially during pandemics.	The authors reported the case of a 22-month old male with acute pre-B lymphoblastic leukemia who underwent a matched-donor hematopoietic stem cell transplant, with neutrophils and platelets engrafted. He displayed a high-grade fever after platelet transfusion, and it was discovered that his donor tested positive for SARS-CoV-2 5 days after donating platelets. However, the patient tested negative for SARS-CoV-2 by RT-PCR of both nasopharyngeal swabs and blood, leading the authors to conclude that SARS-CoV-2 transmission through blood products is unlikely.	Essa, M.F., Elbashir, E., Batarfi, K. and Alharbi, M. (2021), Lack of transmission of SARS-CoV-2 by platelet transfusion from a COVID-19-positive donor in a hematopoietic stem cell transplantation patient. <i>Pediatr Blood Cancer</i> , 68: e28658. https://doi.org/10.1002/pbc.28658
COVID-19; pediatric; otolaryngology; ear, nose and throat; United States	19-Aug-20	Pediatric Otolaryngology in the COVID-19 Era	Otolaryngologic Clinics of North America	Article	This article highlights the unique ramifications of the COVID-19 pandemic on pediatric otolaryngology, with a focus on the immediate and potential long-term shifts in practice in the United States. Due to the pandemic, families are afraid to leave their quarantined spaces and frequently delay needed care. System-based initiatives in hospitals have helped mitigate risks and improve patient experience; initiatives include telemedicine, screening/testing before surgical procedures, reduced clinic volumes, social distancing, and improved indoor air circulation.	This article highlights the unique ramifications of the COVID-19 pandemic on pediatric otolaryngology, with a focus on the immediate and potential long-term shifts in practice in the United States. Pediatric otolaryngology	Sobol SE, Preciado D, Rickert SM. <i>Pediatric Otolaryngology in the COVID-19 Era</i> . <i>Otolaryngol Clin North Am</i> . 2020;53(6):1171-1174. doi:10.1016/j.otc.2020.08.005.

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					Otolaryngology has a unique set of conditions that make providers particularly vulnerable to upper respiratory pathogens. Managing the care of children can also increase exposure risk to the provider, due to a high frequency of upper respiratory tract infections in this population, asymptomatic SARS-CoV-2 carriage (in which case pre-screening for illness symptoms would not help to mitigate potential risk), and poor patient compliance with routine examination. Pediatric otolaryngology practices have been disproportionately affected by the financial fallout from COVID-19 due to the specialty's elective nature and delays in receiving government financial relief. Although the post-pandemic framework of pediatric otolaryngology practice is unknown, it is highly likely that it will incorporate telemedicine, enhanced safety protocols, new indications for direct patient contact, and reduced patient volumes. A sustained contraction of general pediatric otolaryngology practice nationwide may also result.	practices have been disproportionately affected by the financial fallout from COVID-19 due to the specialty's elective nature and delays in receiving government financial relief. Future framework of practice will likely incorporate telemedicine, enhanced safety protocols, new indications for direct patient contact, and reduced patient volumes.	
ACE2, pediatrics, transmission, multisystem inflammatory syndrome	19-Aug-20	SARS-CoV-2 in children: spectrum of disease, transmission and immunopathological underpinnings	The Journal of the Royal College of Pathologists of Australia	Original Article	As the SARS-CoV-2 pandemic unfolds across the globe, consistent themes are emerging with regard to aspects of SARS-CoV-2 infection and its associated disease entities in children. Overall, children appear to be less frequently infected and affected by SARS-CoV-2 virus and the clinical disease COVID-19. Large epidemiological studies have revealed children represent < 2% of the total confirmed COVID-19 cases, of whom the majority experience minimal or mild disease not requiring hospitalization. Children do not appear to be major drivers of SARS-CoV-2 transmission, with minimal secondary virus transmission demonstrated within families, schools and community settings. There are several postulated theories regarding the relatively low SARS-CoV-2 morbidity and mortality seen in children. These largely relate to differences in immune responses compared to adults, as well as differences in ACE2 distribution limiting viral entry and subsequent inflammation, hypoxia and tissue injury. The recent emergence of a multisystem inflammatory syndrome bearing temporal and serological plausibility for an immune-mediated SARS-CoV-2-related disease entity is currently under investigation. The authors of this article summarize the current available data regarding SARS-CoV-2 and the pediatric population, including the spectrum of disease in children, the role of children in virus transmission, and host-virus factors that underpin the unique aspects of SARS-CoV-2 pathogenicity in children.	The authors of this article provide a summary of available data regarding COVID-19 and the pediatric population. They suggest the need to collect epidemiological and clinical data describing clinical comorbidities and co-infections in children with more precision.	Williams PCM, Howard-Jones AR, Hsu P, et al. SARS-CoV-2 in children: spectrum of disease, transmission and immunopathological underpinnings [published online ahead of print, 2020 Aug 19]. Pathology. 2020;S0031-3025(20)30884-9. doi:10.1016/j.pathol.2020.08.001
Schools, reopening, in-person, USA	19-Aug-20	Safely Reopening Schools—	Infectious Diseases of Poverty	Editor's Comment	In the US, seven states and the District of Columbia have ordered statewide closures of in-person Kindergarten-12th grade school classes this fall. There has been an abundance of research from	The authors present various articles arguing for schools to reopen safely	Buntin MB, Gavulic KA. Safely Reopening Schools— Learning Amid a Pandemic. JAMA Health

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		Learning Amid a Pandemic			accredited journals that have suggest compelling evidence to resume in-person classes to ensure mental health, academic progress, and access to nutrition and health services. The authors present two articles by Auger et al. and Heal-Sargent et al. that highlight the role schools and children play in community transmission of COVID-19. The authors suggest public schools devote efforts towards mask requirements, cohorting (keeping small groups of students together to limit exposures), and revising attendance and scheduling policies. Forming committees of administrators, parents, and student-leaders is important in promoting the implementation of these initiatives. Districts should offer in-person options to accommodate students who would not be as successful in a virtual learning environment. The authors conclude by suggesting engagement between policymakers, stakeholders in education, and public health/social service professionals to ensure schools are reopening safely.	fall 2020. They suggest school districts offer an in-person option but should prioritize safety measures such as mask requirements, cohorting, and revised attendance/scheduling policies.	Forum. Published online August 19, 2020. doi:10.1001/jamahealthforum.2020.1054
Breastfeeding, International Code of Marketing Breast-milk Substitutes, Infant and Young Child Feeding	19-Aug-20	Protecting and Supporting the WHO International Code During COVID-19	Journal of Human Lactation	Editorial	Postpartum families have decreased support and lactation care during the COVID-19 pandemic. The author is hopeful that this experience is teaching care providers how to better care for vulnerable populations during adversity. She goes on to discuss the World Health Organization International Code of Marketing Breast-Milk Substitutes (IC). IC compliance has always been a struggle, especially during crises. Compliance is monitored and promoted by international and national groups, as well as by individuals. The World Health Assembly has issued a statement during the COVID-19 pandemic, reiterating the IC, that prohibits the donation of breast-milk substitutes in the health care system. The author urges supporters to be familiar with the IC; change their own practices, and advocate to others, to align with IC tenets; and bring violations of the IC to the attention of health officials.	Ensuring compliance with the World Health Organization International Code of Marketing Breast-Milk Substitutes (IC) has always been a struggle, especially during crises. The author discusses challenges to the IC during the COVID-19 pandemic.	Dodgson JE. Protecting and Supporting the WHO International Code During COVID-19. <i>J Hum Lact.</i> 2020;36(3):387-389. doi:10.1177/0890334420939554
US, breastfeeding, pasteurization, infant	19-Aug-20	Evaluation for SARS-CoV-2 in Breast Milk From 18 Infected Women	The Journal of the American Medical Association	Research Letter	While concerns exist about the transmission of SARS-CoV-2 to infants by breastfeeding, the virus has yet to be isolated from breastmilk. Given the known benefits of breastfeeding, identifying the risk of transmission is a critical issue. This study collected breast milk samples from breastfeeding women living in the US who tested positive for SARS-CoV-2 by RT-PCR. 18 women with confirmed infection were enrolled, and all but 1 woman had symptomatic disease. Women provided between 1 and 12 samples collected at varying time points before and after their positive test result. A quantitative RT-PCR assay was used to test the breast milk samples for SARS-CoV-2, and tissue culture was used to detect replication-competent SARS-CoV-2. One breast milk sample contained detectable SARS-CoV-2 RNA. This sample was collected on the day of symptom onset and the viral culture	This study suggests that SARS-CoV-2 RNA is not replication-competent virus and that breast milk may not be a source of infection for infants. These data provide reassurance for the continued benefits of breastfeeding and the integrity of human milk provided through milk banks that use Holder pasteurization techniques.	Chambers C, Krogstad P, Bertrand K, et al. Evaluation for SARS-CoV-2 in Breast Milk From 18 Infected Women [published online 19 Aug 2020]. <i>JAMA.</i> 2020. doi:10.1001/jama.2020.15580

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					for the sample was negative. Replication-competent virus was not detected in any of the breastmilk samples. Two control breastmilk samples collected prior to the pandemic were spiked with replication-competent SARS-CoV-2 and underwent Holder pasteurization. Viral RNA as well as culturable virus was not detected in either sample.		
ART, anxiety, infertility, DOR, Turkey	19-Aug-20	The level of anxiety in infertile women whose ART cycles are postponed due to the COVID-19 outbreak	Journal of Psychosomatic Obstetrics & Gynecology	Article	It is common for women to experience anxiety in response to infertility and the use of assisted reproductive technology (ART). This study in Turkey used an online survey to measure the anxiety levels of women whose ART cycles were delayed between April and May 2020 as a result of the COVID-19 outbreak. Anxiety was significantly higher in women above 35 years (45.0 ± 5.2 vs. 42.2 ± 4.5 , $p = 0.006$). Worrying about the possibility of not getting pregnant significantly affected state-anxiety levels more so than the possibility of COVID-19 infection ($p = 0.027$) and cycle postponement had a significant effect as well ($p = 0.032$). Diminished ovarian reserve and high duration of infertility were significantly associated with higher state-anxiety levels (OR = 2.5, $p < 0.05$).	This study in Turkey evaluated the level of fear and anxiety related to the COVID-19 outbreak, in infertile women whose ART cycles were delayed due to the pandemic. Diminished ovarian reserve, high duration of infertility, cycle postponement, higher age, and previous ART failures resulted in higher anxiety levels.	Tokgoz VY, Kaya Y, Tekin AB. The level of anxiety in infertile women whose ART cycles are postponed due to the COVID-19 outbreak [published online, 2020 Aug 19]. J Psychosom Obstet Gynaecol. 2020;1-8. doi:10.1080/0167482X.2020.1806819
Children, MIS-C, ACE2, viral load	19-Aug-20	Pediatric SARS-CoV-2: Clinical Presentation, Infectivity, and Immune Response	The Journal of Pediatrics	Original Research	Children and young adults aged 0-22 years with suspected/confirmed SARS-CoV-2 infection or MIS-C were offered enrollment in the MGH Massachusetts General Hospital Pediatric COVID-19 Biorepository. A total of 192 patients were enrolled in the study (n = 15 neonates, n= 143 children, and n= 87 adolescents). Gender was equally distributed between the patients. Enrolled patients provided nasopharyngeal, oropharyngeal, and/or blood specimens, and viral load, ACE2 RNA levels, and serology for SARS-CoV-2 were quantified. Nasopharyngeal viral load was highest in children in the first 2 days of symptoms, significantly higher than hospitalized adults with severe disease ($P = 0.002$). While age did not impact viral load, younger children did present with lower ACE2 expression ($P = 0.004$). IgM and IgG to the receptor-binding domain (RBD) of the SARS-CoV-2 spike protein were increased in severe MIS-C ($P < 0.001$). These findings show that although a low expression of ACE2 in younger children (<10 years of age) likely corresponds to reduced infection rates, children of all ages, once infected, can carry high SARS-CoV-2 viral loads. This suggests that despite milder disease presentation or lack of symptoms, children may be a potential source of contagion.	Despite showing little to no symptoms of SARS-CoV-2 infection, children possess extremely high viral loads, suggesting that they are a potential source of contagion. Additionally, the authors suggest that lower expression of ACE2 in children may correspond to the reduced infection rates in children.	Yonker LM, Neilan AM, Bartsch Y, et al. Pediatric SARS-CoV-2: Clinical presentation, infectivity, and immune responses. J Pediatr. . https://doi.org/10.1016/j.jpeds.2020.08.037 . doi: 10.1016/j.jpeds.2020.08.037.
Remdesivir, NICU, PICU, pediatric, Ebola	19-Aug-20	COVID-19 & Remdesivir in Pediatric Patients: The	Pediatric Research	Letter to the Editor	Despite the decreased severity of SARS-CoV-2 infection in children, parenteral remdesivir offers potential benefits for symptomatic pediatric patients; however, some limitations may appear in terms of administering and close monitoring of	Though parenteral remdesivir may be effective in treating pediatric SARS-CoV-2	Yalçın N, Demirkan K. COVID-19 and remdesivir in pediatric patients: the invisible part of the

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		Invisible Part of the Iceberg			remdesivir in NICU and PICU patients with severe disease. Accumulation of sulfolbutylether-beta-cyclodextrin sodium salt (SBECD), a drug delivery vehicle included in the remdesivir formulation, may cause kidney impairment. Remdesivir is therefore not recommended in pediatric patients with kidney impairment and receiving renal replacement therapies. For pediatric patients with hepatic impairment and hepatotoxicity, the authors recommend dose adjustments due to remdesivir's effect of increasing liver aminotransferase levels. Remdesivir may have complications with other treatments, such as ECMO, anti-epileptic drugs, and p-glycoprotein inhibitors. Infants are unlikely to absorb clinically important amounts of remdesivir through breastfeeding, so mothers receiving remdesivir do not need to avoid nursing. The authors conclude that a clear understanding of the clinical pharmacokinetics and clinical significance of potential treatment interactions for remdesivir are needed to provide patient-centered care for NICU and PICU patients in the ongoing pandemic.	infection, limitations exist in treating NICU and PICU patients with severe disease. A clear understanding of remdesivir's clinical pharmacokinetics and potential treatment interactions is needed to provide patient-centered care for NICU and PICU patients during the COVID-19 pandemic.	iceberg. <i>Pediatr Res.</i> 2020. doi:10.1038/s41390-020-01109-7
Pregnancy, disease severity, clinical symptoms, hospitalization	19-Aug-20	SARS-CoV-2 (COVID-19) infection in pregnant women: characterization of symptoms and syndromes predictive of disease and severity through real-time, remote participatory epidemiology.	medRxiv	Pre-print (not peer-reviewed)	The authors present findings from a prospective observational study using longitudinal (smartphone application) and cross-sectional (web-based survey) data through which 400,750 UK, Sweden and US women self-reported daily information about their overall health status. The authors included all pre-menopausal women aged 18 to 44 years who specified their pregnancy status, included symptom profiles, outcomes on testing for SARS-CoV-2, and hospitalization, and compared frequencies of symptoms and events between pregnant and non-pregnant women. Pregnant and non-pregnant women positive for SARS-CoV-2 infection were not different concerning COVID-19-related severity. Pregnant women were more likely to have received SARS-CoV-2 testing than non-pregnant, despite reporting fewer clinical symptoms. Pre-existing lung disease was most closely associated with the severity of symptoms in pregnant hospitalized women. Cough, chest pain and dyspnea showed much higher incidence in hospitalized pregnant women, indicating that cardiopulmonary symptoms are the major discriminant for hospitalization.	In this study, pregnant and non-pregnant women positive for SARS-CoV-2 did not differ in disease severity. Comorbidities such as lung disease and diabetes were associated with an increased risk of more severe SARS-CoV-2 infection during pregnancy.	Molteni E, Astley CM, Ma W, et al. SARS-CoV-2 (COVID-19) infection in pregnant women: characterization of symptoms and syndromes predictive of disease and severity through real-time, remote participatory epidemiology [published 2020 Aug 19]. <i>medRxiv.</i> 2020. doi: https://doi.org/10.1101/2020.08.17.20161760
Labor and delivery, environmental contamination, PPE, aerosol, droplets	19-Aug-20	Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Environmental Contamination and Childbirth	Obstetrics and Gynecology	Research Letter	The authors aimed to evaluate SARS-CoV-2 environmental contamination in the labor and delivery environment and on PPE at a single academic institution in Oregon USA, from March to June 2020. All patients admitted to the labor and delivery unit were tested for SARS-CoV-2 by RT-PCR. The authors collected environmental swabs from room surfaces and healthcare workers' face shields, in addition to passive and active air samples. Samples for two vaginal and two cesarean births (four	Findings from this study suggest that the risk of SARS-CoV-2 transmission from labor and delivery is higher than previously thought, and the extent of contamination varies by delivery type and other	Hermesch AC, Horve PF, Edelman A, et al. Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Environmental Contamination and Childbirth [published online, 2020 Aug 19]. <i>Obstet Gynecol.</i> 2020;

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					asymptomatic patients who tested positive for SARS-CoV-2) were analyzed. The four samples were designated as follows: vaginal birth 1, vaginal birth 2, cesarean birth 1, cesarean birth 2. Of note, patients were unable to consistently wear masks during vaginal birth 2 and cesarean birth 1. The results showed that the total proportion of positive samples increased from baseline (empty room samples) to after delivery for both room? surface swabs (6.7% to 17.8%) and passive air samples (4.3% to 21.7%). SARS-CoV-2 RNA was not detected on face shields after either cesarean birth. However, after vaginal birth 2, SARS-CoV-2 RNA was detected in active air samples, all face shields, and four of five passive air samples (three of which were located more than 6 feet from the patient's bed).	patient factors, such as mask-wearing. These results reinforce the importance of universal precautions to minimize exposure and contamination risk.	doi:10.1097/AOG.0000000000004112
Clinical recommendations, clinical research, pediatric age group, infectious disease, type 1 diabetes mellitus	19-Aug-20	Caring for children and adolescents with type 1 diabetes mellitus: italian society for pediatric and adolescent diabetes (ISPED) Statements during COVID-19 pandemic	Diabetes Research and Clinical Practice	Review Article	The authors conducted a literature search in the guideline databases, Medline and Embase and in Diabetes Societies websites until May 21, 2020 to review the impact of COVID-19 in children and adolescents with type 1 diabetes mellitus. COVID-19 infection in pediatric patients seems to be clinically less severe than in adults, and children have accounted for 1-5% of diagnosed cases, and a median age of 6.7 years (1 day-15 years) with better prognoses. Clinical manifestations include mild, moderate, severe disease up to critical illness. There is currently no evidence suggesting a higher risk of COVID-19 infection in children with diabetes than unaffected peers. In addition, contrary to adult patients with diabetes, there are no reports suggesting that diabetes is a comorbidity associated with poor outcomes in children and adolescents. The authors proposed clinical practice recommendations for pediatric patients with and without diabetes.	The authors determined that there is currently no evidence suggesting a higher risk of COVID-19 infection in children with diabetes than unaffected peers or that diabetes is a comorbidity associated with poor outcomes in children and adolescents.	d'Annunzio G, Maffei C, Cherubini V, et al. Caring for children and adolescents with type 1 diabetes mellitus: italian society for pediatric and adolescent diabetes (ISPED) Statements during COVID-19 pandemic [published online ahead of print, 2020 Aug 19]. Diabetes Res Clin Pract. 2020. doi:10.1016/j.diabres.2020.108372
Trauma treatment, child abuse, maltreatment, family violence, mental health, telemental health,	19-Aug-20	Telemental health for child trauma treatment during and post-COVID-19: Limitations and considerations	Child Abuse & Neglect	Article	Organizations providing trauma treatment to children and families have had to rapidly pivot to tele-mental health to maintain service delivery due to the COVID-19 pandemic and there is concern that exacerbated family violence may result in an influx of children and families in need of these services. While there are benefits of tele-mental health (reduced barriers to access and increased cost effectiveness) there are also unique limitations to its implementation with traumatized children. These include challenges with attention, emotional regulation skills, identifying dissociative symptoms, and increased time with perpetrators of abuse due to shelter in place orders. For the most marginalized children and families, barriers may include lack of access to reliable technology, lack of a private or confidential space, and reluctance to process trauma in the absence of a safe environment. The authors recommend triaging cases for socially distanced in-person treatment based on safety concerns, barriers	This article discusses both the benefits and barriers to tele-mental health in a child maltreatment population and offers considerations for child trauma service provision, program development, and policy during and post the COVID-19 pandemic.	Racine N, Hartwick C, Collin-Vézina D, et al. Telemental health for child trauma treatment during and post-COVID-19: Limitations and considerations. [published online, 2020 Aug 19]. Child Abuse Negl. 2020;104698. doi:10.1016/j.chiabu.2020.104698

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					to access, and appropriateness of treatment. Clinicians should consult emerging evidence and communities of practice regarding trauma-informed provision of tele-mental health treatment.		
Fetal intervention, Mayo Clinic, healthcare services	19-Aug-20	Fetal Surgery in the era of SARS-CoV-2 pandemic: A single institution review	Mayo Clinic Proceedings: Innovations, Quality and Outcomes	Review Article	The authors share the institutional framework for the management of anomalous fetuses requiring fetal intervention at the Mayo Clinic, Minnesota, USA in order to cope with the changing healthcare services in the era of SARS-CoV-2 pandemic. Up-to-date testing protocols were implemented on patients undergoing fetal intervention at the institution between March 1st and May 15th, 2020, which were compared to patients from same period a year before. A total of 17 pregnant patients with anomalous fetuses who met criteria for fetal intervention were included: 8 from 2019 and 9 from 2020. The authors report no statistically significant differences between the number of cases, indications, types of procedures, gestational age, and duration of procedures ($p > 0.05$) between pre-SARS-CoV-2 in 2019 and SARS-CoV-2 pandemic in 2020. This study demonstrates that the SARS-CoV-2 pandemic has minimally impacted the surgical outcomes and the capacity of the Mayo Clinic to offer complex fetal surgeries, supporting the suggestion that fetal interventions can still be successfully offered and performed during the SARS-CoV-2 pandemic.	This review outlines the framework for fetuses requiring fetal intervention used at the Mayo Clinic, USA and compares the outcomes from SARS-CoV-2 pandemic outcomes to outcomes of the same procedures pre-SARS-CoV-2. Results indicate that fetal interventions can successfully be performed in the SARS-CoV-2 pandemic environment.	Narang K, Elrefaei A, Wyatt MA, et al. Fetal Surgery in the era of SARS-CoV-2 pandemic: A single institution review [published online ahead of print, 2020 Aug 19]. Mayo Clin Proc Innov Qual Outcomes. doi:10.1016/j.mayocpiqo.2020.08.001
COVID-19, SARS-CoV-2, febrile status epilepticus, child	18-Aug-20	Coronavirus Disease 2019 (COVID-19) Associated With Febrile Status Epilepticus in a Child	Cureus	Case Report	This is a report of a 2-year-old girl who presented to pediatric ICU with new-onset febrile status epilepticus and COVID-19 in the United States. She presented with fever, reduced oral intake, and generalized tonic-clonic seizures. After 5 doses of lorazepam and levetiracetam, she had respiratory depression and oxygen desaturation. She was intubated and placed on a mechanical ventilator. Laboratory examination showed leukocytosis (white blood cell of $17.69 \times 10^9/\text{mcl}$), neutrophil predominance, microcytic anemia, C-reactive protein of 1.4 mg/dL, and lactic acid of 5 mmol/L. Chest X-ray showed bilateral patchy infiltrates. Her nasopharyngeal swab was positive for SARS-CoV-2 RT-PCR. 24-hour continuous electro-encephalogram showed generalized slowing without recurrence of seizures. She recovered fully and was discharged home after 3 days. The possible mechanisms of neurological manifestations in this case were direct viral invasion and the effect of inflammatory mediators. Some studies report that SARS-CoV-2-induced cytokine storms might cause neuronal excitability and seizures. HCoV-O43, -229E, and SARS-CoV are also shown to be neuro-invasive. This case demonstrates that COVID-19 can be associated with febrile seizure and febrile status epilepticus in children.	This is a report of a 2-year-old girl who presented to pediatric ICU with new-onset febrile status epilepticus and SARS-CoV-2 infection in the United States. Neurological manifestations might be caused by direct virus invasion and inflammatory mediators.	Chegondi M, Kothari H, Chacham S, et al. Coronavirus Disease 2019 (COVID-19) Associated With Febrile Status Epilepticus in a Child. Cureus. 2020;12(8):e9840. Published 2020 Aug 18. doi:10.7759/cureus.9840

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COVID-19; Gastrointestinal symptoms; Children; Outcomes	18-Aug-20	Gastrointestinal manifestations of COVID-19 in children: a systematic review and meta-analysis	Frontline Gastroenterology	Review Article	The authors conducted a systematic review and meta-analysis to summarize the published evidence on the gastro-intestinal (GI) manifestations of COVID-19 in children and to determine the prevalence of GI symptoms. Reported GI symptoms in children with COVID-19 included diarrhea, vomiting and abdominal pain. In a meta-analysis comprising 280 children, the pooled prevalence of gastro-intestinal symptoms was 22.8% (95% CI 12.7-37.6%) with a moderate degree of heterogeneity (I ² =59%). Prevalence of diarrhea was 12.4% (95% CI 7.8-19.2%) with I ² =19.6%. Prevalence of vomiting was 10.3% (95% CI 4.9-20.3%) with I ² =45%. Prevalence of abdominal pain was 5.4% (95% CI 2.2-12.7%) with I ² =19.9%. The results of pooled analyses show that GI symptoms are common in children with COVID-19 with nearly a quarter of patients exhibiting at least one GI symptom.	This systematic review found that gastro-intestinal symptoms are common in children with COVID-19 with 22.8% of patients developing such symptoms. Diarrhea, vomiting and abdominal pain were the main gastrointestinal symptoms.	Akobeng AK, Grafton-Clarke C, Abdelgadir I, et al. Gastrointestinal manifestations of COVID-19 in children: a systematic review and meta-analysis. <i>Frontline Gastroenterology</i> . Published 2020 Aug 18. doi: 10.1136/flgastro-2020-101529
Immunophenotypes, MIS-c, SARS-CoV-2, COVID-19, Kawasaki's disease	18-Aug-20	Peripheral immunophenotypes in children with multisystem inflammatory syndrome associated with SARS-CoV-2 infection	Nature Medicine	Original Research	The authors present a detailed examination of SARS-CoV-2 serology, biomarkers, and immunophenotyped leukocytes in a cohort of 25 children, age range 7.7-14.4 years; (median age 12.5 years) in London with MIS-c temporally associated with SARS-CoV-2 during the COVID-19 pandemic in 2020. Of the 25 patients, 68% had antibodies to SARS-CoV-2 and were noted to have more severe disease. The seronegative patients had either a history of COVID-19 symptoms or significant exposure history. The authors present a detailed evaluation of immunological mediators during the acute, resolution, and convalescent phases of illness and compared this to 7 age-matched healthy controls. Specifically, they observed high levels of interleukin 1L-1 β , IL-6, IL-8, IL-10, IL-17, interferon- γ and differential T and B cell subset lymphopenia as well as evidence supporting immune cell activation of neutrophils, monocytes, and T cells. Antigen presenting cells had low HLA-DR and CD86 expression, potentially indicative of impaired antigen presentation. Upon review, they suggest that MIS-c may be a distinct immunological entity in contrast to both Kawasaki's disease and the hyperinflammatory state seen in some adult patients with COVID-19.	The authors present a detailed immunological profile seen in a cohort of 25 children with MIS-c during the acute, resolution, and convalescent phase of illness. Their evidence suggests that MIS-c may be a distinct immunological process in contrast to Kawasaki's disease and the adult hyperinflammation often seen with COVID-19.	Carter MJ, Fish M, Jennings A, Doores KJ, Wellman P, Seow J, Acors S, Graham C, Timms E, Kenny J, Neil S, Malim MH, Tibby SM, Shankar-Hari M. Peripheral immunophenotypes in children with multisystem inflammatory syndrome associated with SARS-CoV-2 infection. <i>Nat Med</i> . 2020 Aug 18. doi: 10.1038/s41591-020-1054-6. Epub ahead of print. PMID: 32812012.
Domestic Violence, children, refuge, well-being, domestic abuse, Norway	18-Aug-20	The COVID-19 Pandemic and Its Impact on Children in Domestic Violence Refuges	Child Abuse Review	Research Article	The study described the impact of the COVID-19 pandemic on victims of domestic violence and abuse due to the strict quarantine efforts put into place on 12 March 2020 in Norway. The author distributed a web-based survey to all domestic violence shelters in Norway (n = 46) on 8 April 2020 (the survey closed on 23 April 2020). The study outlines the findings from four main topics: (1) changes in services, (2) shelter cooperation with other services, (3) what the shelter staff considered most worrying and what they considered to be vital support services for victims, and (4) changes in requests and motivations for contacting the shelters. Respondents to the survey included	The authors collected information about the impacts of the lockdown during the COVID-19 pandemic from 46 domestic violence shelters in Norway. The findings outline concerns among staff and highlights suggestions for increased domestic abuse vigilance	Øverlien C. The COVID-19 Pandemic and Its Impact on Children in Domestic Violence Refuges [published online ahead of print, 2020 Aug 18]. <i>Child Abuse Rev</i> . 2020;10.1002/car.2650. doi:10.1002/car.2650

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					shelter leaders or employees. The author suggests that the lockdown during the pandemic may have increased violence against children. Further, despite a relatively short lockdown period in Norway, there may be unknown long-term impacts on child and adolescent health and well-being. Of particular importance was the observed lack of reports of child abuse during the lockdown; possibly a function of under-reporting. The author concluded by suggesting that social and health services, along with schools and daycare centers, need to be vigilant in addressing the negative consequences of the pandemic and lockdown in Norway.	among social and health services.	
Infants, pregnancy, health care providers, vertical transmission, resuscitation environment, personal protective equipment	18-Aug-20	Effect of COVID-19 Precautions on Neonatal Resuscitation Practice: A Balance Between Healthcare Provider Safety, Infection Control, and Effective Neonatal Care	Frontiers in Pediatrics	Perspective Article	Adaptations have been proposed for the resuscitation of infants born to women with COVID-19 to protect health care providers, maintain infection control, and limit post-natal transmission. In this article the authors weigh the benefits and challenges of these adaptations. These changes especially impact respiratory procedures, PPE use, resuscitation environments, teamwork, and family involvement. Adding viral filters to ventilation devices and modifications to intubation procedures might hinder effective ventilation. PPE could delay resuscitation, hinder task performance, and degrade communication. Changes to resuscitation locations and team composition alter workflow and teamwork. Physical distancing measures and PPE use may impede family-integrated care. These disruptions need to be considered given the uncertainty of vertical transmission of SARS-CoV-2.	The authors argue that adaptations for the resuscitation of infants born to women with COVID-19 (ventilation procedures, PPE use, and physical distancing measures) can be disruptive and should be re-evaluated as more information emerges about the risk of vertical transmission.	Brenda Hiu Yan Law, Po-Yin Cheung, Khalid Aziz. et al. Effect of COVID-19 Precautions on Neonatal Resuscitation Practice: A Balance Between Healthcare Provider Safety, Infection Control, and Effective Neonatal Care. Front. Pediatr., 18 August 2020. https://doi.org/10.3389/fped.2020.00478
India, infant, infantile spasms (IS), epilepsy, neurology	18-Aug-20	Infantile spasms and COVID-19: Challenges and solutions in resource-limited settings	Epilepsy Research	Letter to the Editor	Traditionally, care for infantile spasms (IS) involves an urgent inpatient evaluation to coordinate EEG monitoring, imaging, lab studies, and treatment. Early treatment for IS improves neurodevelopmental outcomes. Administering this care has been more difficult during the COVID-19 pandemic, especially in resource-poor settings. The authors list challenges to IS care during the current COVID-19 outbreak, specifically in India. For instance, shortages of medications such as vigabatrin, and restrictions on international import, mean less availability for patients with IS, especially in rural areas. The authors also discuss innovative solutions for these challenges, such as using alternative and more readily available medicines like oral prednisolone. They also strongly recommend the use of telemedicine and technology for the care of IS patients, when possible.	Administering care for patients with infantile spasms (IS) has been more difficult during the COVID-19 pandemic, especially in resource-poor settings. The authors list challenges to IS care during the current COVID-19 outbreak, and also discuss innovative solutions.	Sinha R, Anand V, Gupta J, Singh S, Gulati S. Infantile spasms and COVID-19: Challenges and solutions in resource-limited settings [published online ahead of print, 2020 Aug 18]. Epilepsy Res. 2020;167:106441. doi:10.1016/j.epilepsyres.2020.106441

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Pregnancy, Evans Syndrome, pneumonia, immune-suppressants, thrombocytopenia, anemia	18-Aug-20	Evans Syndrome Associated with Pregnancy and COVID-19 Infection	Case Reports in Obstetrics and Gynecology	Case Report	In this case report, a pregnant 23-year-old presented at 38 weeks of gestation with spontaneous rupture of membranes and active labor. Her vitals were normal on admission with a hemoglobin of 12.5 g/dL and platelet count of 223 K/ μ L. She received an epidural and labs drawn afterwards were notable for hemoglobin of 7.1 g/dL and platelets of <10 K/ μ L. The patient gave birth to a healthy male infant with a blood loss of 400mL. After delivery, hemoglobin was 5.6 g/dL, hematocrit 17.7%, and platelets <10 K/ μ L. Blood smear showed microcytic, hypochromic anemia. Antibody screen was positive for warm autoantibodies and direct anti-globulin test was positive for anti-immunoglobulin G and anti-complement antibodies, so the diagnosis of Evans Syndrome was made. She was transfused 2 units of red blood cells, 1 pack of platelets, and 1 gram of IV iron dextran and treated with oral dexamethasone for 4 days, with a subsequent rise in platelets to 55 K/ μ L. She was discharged on postpartum day 4. After poor response to outpatient steroids and recurrent thrombocytopenia, rituximab therapy was initiated. On postpartum day 34 she presented to the emergency department with COVID-19 pneumonia and pulmonary embolism, so the rituximab was held for several weeks. Maternal condition remained stable although immunosuppressive therapy may have contributed to her development of COVID-19 pneumonia.	In this case of Evans Syndrome in pregnancy, the authors describe use of immunosuppressive therapies including steroids and rituximab, which they conclude may have contributed to the development of COVID-19 pneumonia.	Vadlamudi G, Hong L, Keerthy M. Evans Syndrome Associated with Pregnancy and COVID-19 Infection. Case Rep Obstet Gynecol. 2020;2020:8862545. Published 2020 Aug 18. doi:10.1155/2020/8862545
Operational adaptation, C-section, labor and delivery	18-Aug-20	Adaptation of labor and delivery to COVID-19	American Journal of Disaster Medicine [DOI not accessible at time of summary]	Commentary	In this article, the authors describe an approach for adapting swiftly to the increasing number of parturient patients admitted into labor and delivery units during the COVID-19 pandemic. They provide guidelines on physical layout, triaging, and quick testing. Additionally, they give action frameworks facilitating emergent C-sections, isolating patients with confirmed COVID-19, and educating health care personnel. The authors highlight the need for institutions to exchange and disseminate information as procedural guidelines are likely to continue evolving.	The authors provide a framework for adapting procedures and guidelines for labor and delivery units in order to fit the evolving needs to a COVID-19 environment.	Karuppiah A, Bharadwaj S, Crimmins S, et al. Adaptation of labor and delivery to COVID-19. Am J Disaster Med. 2020;15(2):93-97. doi:10.5055/ajdm.2020.0359
Children, Kawasaki Disease, Bergamo, Italy	18-Aug-20	Kawasaki-like disease among Italian children in the COVID-19 era	The Journal of Pediatrics	Original research	This retrospective cohort study compared children in Bergamo, Italy, with Kawasaki-like disease in the COVID-19 era to children diagnosed with Kawasaki Disease (KD) in the pre-COVID-19 era. 19 pre-COVID-19 era patients were diagnosed between January 1, 2015, and February 17, 2020. They had a mean age of 3.0 years (SD 2.5). 10 COVID-era patients were diagnosed from February 19-April 20, 2020, with a mean age of 7.5 years (SD 3.5). Those diagnosed in the COVID-19 era demonstrated higher values for the following: incidence: 10 vs 0.3 per month; mean age: 7.5 vs 3.0 years; Kawasaki disease shock syndrome: 50% vs 0%; macrophage activation syndrome: 50% vs 0%; and steroid requirement: 80% vs 15%, all P <0 .01. Children with KD in the COVID-19 era, 80% of whom were antibody positive, were older	This study compared children with Kawasaki disease in the pre-COVID-19 era to children diagnosed with Kawasaki-like disease during the COVID-19 pandemic. Children with Kawasaki disease during the COVID-19 pandemic were found to be older and to have more severe disease.	Kuo HC. Kawasaki-like disease among Italian children in the COVID-19 era. J Pediatr. 2020;224:179-183. doi:10.1016/j.jpeds.2020.07.022

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					and demonstrated more severe disease compared with those with KD disease prior to the COVID-19 era.		
Pediatric, immunology, antibody response, MIS-C, titer level	18-Aug-20	SARS-CoV-2 antibody responses in children with MIS-C and mild and severe COVID-19	medRxiv	Pre-print (not peer-reviewed)	SARS-CoV-2 antibody responses in children remain poorly characterized. In this article, the authors sought to evaluate the humoral responses to SARS-CoV-2 in children presenting with COVID-19 vs. MIS-C. They analyzed serum samples from SARS-CoV-2 positive children (n=29) admitted to a single center in the USA from April to May 2020. Patients were categorized into three clinical phenotypes: minimal COVID-19 (n=10), severe COVID-19 (n=9), and MIS-C (n=10). They found that pediatric patients with MIS-C possessed higher SARS-CoV-2 spike IgG titers compared to those with severe COVID-19 (p=0.002), likely reflecting a longer time since onset of infection in MIS-C patients. Children with minimal COVID-19 had varied levels of serum IgG against all SARS-CoV-2 antigens tests, which likely reflects the clinical heterogeneity of these patients. Additionally, children with severe COVID-19 in this study tended to have lower titers of SARS-CoV-2 antibodies compared to previous reports in adults with similar disease. The authors state that further research is needed to better understand this finding.	The authors found that in a single-center study of SARS-CoV-2 positive pediatric patients in the USA, there were significantly higher levels of anti-SARS-CoV-2 spike IgG in MIS-C cases compared to severe COVID-19.	Anderson E, Diorio C, Goodwin EC et al. SARS-CoV-2 antibody responses in children with MIS-C and mild and severe COVID-19. [published online, 2020 Aug 18]. medRxiv. doi:https://doi.org/10.1101/2020.08.17.20176552
Child abuse, reporting, UK, school closures	18-Aug-20	Surge in Child Abuse, Harm During COVID-19 Pandemic Reported	The Journal of the American Medical Association JAMA	Short Commentary	A recent UK study found an increase in abuse-related head injuries among children during the first month of nationwide self-isolation. As 1.5 billion children worldwide have faced school closures, there are concerns that child abuse is going vastly underreported. The WHO and UNICEF have both called for increased child protection efforts globally.	The author briefly summarizes evidence in the UK and worldwide that social distancing measures resulting from the COVID-19 pandemic have led to an increase in child abuse and further barriers to reporting it.	Kuehn BM. Surge in Child Abuse, Harm During COVID-19 Pandemic Reported. [published online, 2020 Aug 18]. JAMA. 2020;324(7):621. doi:10.1001/jama.2020.14433
Pregnancy, healthcare providers, risk factors, dentistry, first responders	18-Aug-20	Considerations for Pregnant Dental and Health Care Workers amid COVID-19 [Free Access to Abstract only]	JDR Clinical & Translational Research	Review Article	Health care professionals (HCPs), including dental HCPs, are recognized to be at considerably high risk for COVID-19 infection, particularly during pregnancy, due to their close proximity to patients and aerosol-generating procedures. The authors present posed risks and potential effects of COVID-19 on maternal and fetal health. They also discuss current prevention and management strategies for COVID-19 on pregnant dental and HCPs. From their literature review, they found that evidence of vertical transmission of SARS-CoV-2 is controversial. Based on atypical symptoms, the significant numbers of asymptomatic SARS-CoV-2 positive individuals, and the high susceptibility to viral diseases observed in pregnant women, recommendations have been created to limit the exposure of COVID-19-positive or even suspected cases to pregnant HCPs. In conclusion, pregnant HCPs require extra caution as they are already a high-risk population and their work at the frontline in a pandemic may	The authors discuss COVID-19 in pregnancy with a focus on the risks to pregnant healthcare professionals (HCPs). They state that institutional policies aimed at protecting pregnant HCPs should consider avoiding assigning such individuals as first responders.	Mann A, Dahiya A, Souza LC, Letra A. Considerations for Pregnant Dental and Health Care Workers amid COVID-19 [published online, 2020 Aug 18]. JDR Clin Trans Res. doi:10.1177/2380084420952747

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					expose them to additional risks. Improved understanding of COVID-19 and maternal health as well as the development of prevention and management guidelines for pregnant HCPs, will allow for a safer work environment.		
Pregnancy, diagnosis, transmission, healthcare systems	18-Aug-20	Management strategy of pregnant women during COVID-19 pandemic	Australian and New Zealand Journal of Obstetrics and Gynaecology	Letter to the Editor	In this letter to the editor, the authors discuss special considerations and the management of pregnant patients during the COVID-19 pandemic. They support universal screening of pregnant patients on admission to the hospital and in the outpatient setting. They next discuss the approach of their institution in Japan for prioritizing maternal and childcare as well as the health of medical personnel. If a pregnant patient is positive for SARS-CoV-2, admission to the hospital is determined based on the presence of a respiratory disorder associated with infection. When perinatal care is required, a negative pressure room will be used if possible. The delivery mode will be C-section, unless labor progresses rapidly. Postpartum, rapid mother-child separation of COVID-19 positive women should be performed. Synthetic milk is recommended in order to prevent neonatal infection of COVID-19. The authors believe that the described maternal medical system along with highly sensitive testing for SARS-CoV-2 will enable safe management of pregnant patients during the COVID-19 pandemic.	There are special considerations for managing hospitalized pregnant patients during the COVID-19 pandemic. The authors describe their strategies and recommendations in this letter to the editor.	Suzumori N, Goto S, Sugiura-Ogasawara M. Management strategy of pregnant women during COVID-19 pandemic. [published online, 2020 Aug 18]. Aust N Z J Obstet Gynaecol. 2020;60(4):E9-E10. doi:10.1111/ajo.13202
Pediatric, physical disability, parents, rehabilitation, France	18-Aug-20	Emerging health challenges for children with physical disabilities and their parents during the COVID-19 pandemic: the ECHO French survey	Annals of Physical and Rehabilitation Medicine	Original Article	The daily lives of children with physical disabilities have been significantly affected by the COVID-19 pandemic. This study aimed to identify potential healthcare issues and to describe parental concerns for children with physical disabilities in April 2020. The authors administered a nationwide online survey to parents of children (ages < 18 years old) with physical disabilities in France (n=1000). Lockdown had negative effects on morale (44% of children), behavior (55% of children), and social interactions (55% had no contact with other children). Only 22% of patients maintained medical follow-up while 48% and 27% continued physiotherapy and occupational therapy, respectively. The main parental concern was rehabilitation (72%). Surveyed parents emphasized the lack of help and support (60%). This study highlighted substantial effects of the lockdown associated with COVID-19 on the health of children with physical disabilities in France. There was a massive interruption of medical follow-up and rehabilitation during this time. Regular assessment of the health benefit/risk is essential to support families and ensure continuity of care during a pandemic.	The authors sought to describe the impact of the COVID-19 pandemic and lockdown in France on the wellbeing and care of children with physical disabilities. They identified a negative effect on the mental health of both parents and children as well as on continuity of care during this time.	Cacioppo M, Bouvier S, Bailly R, et al. Emerging health challenges for children with physical disabilities and their parents during the COVID-19 pandemic: the ECHO French survey [published online, 2020 Aug 18]. Ann Phys Rehabil Med. doi:10.1016/j.rehab.2020.08.001

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Receptor, pregnancy, ACE2, susceptibility	18-Aug-20	COVID-19 in pregnancy: possible mechanisms not to be discounted	Journal of Maternal-fetal and Neonatal Medicine	Commentary	The currently known receptor for SARS-CoV-2, ACE2, regulates the renin-angiotensin system and is increased during pregnancy. Virus–receptor interactions may have significant effects on placental function, fetal development, and maternal immunity, yet ACE2 expression and activity have yet to be explored as a possible modulator of pregnant host viral susceptibility. Although maternal severity has yet to be fully characterized, an increase in ACE2 expression during pregnancy would predict multi-organ vulnerability including cardiopulmonary complications such as cardiomyopathy, pneumonia and ARDS. The authors explore several hypotheses for potential ACE2 receptor mechanisms contributing to the pathophysiology of COVID-19 in pregnancy.	ACE2, the receptor for SARS-CoV-2, is increased during pregnancy. The authors explore hypotheses for virus–receptor interactions and possible effects on placental function, fetal development, and maternal immunity.	Zelop CM, Bonney EA. COVID-19 in pregnancy: possible mechanisms not to be discounted [published 2020 Aug 18]. J Matern Fetal Neonatal Med. 2020;1-4. doi:10.1080/14767058.2020.1807508
Pregnancy, outpatient surveillance model, hospital system, care model, USA	18-Aug-20	COVID-19 in pregnancy: creating an outpatient surveillance model in a public hospital system [Free Access to Abstract only]	Journal of Perinatal Medicine	Review	Given the paucity of data available regarding the clinical course and outcomes of pregnant women with COVID-19, the authors aimed to establish a model to facilitate care for pregnant women as they moved through different hospital settings, including the emergency room, inpatient care, and outpatient clinics. They created a shared patient list in their centralized electronic medical record. Pregnant women in an urban public hospital system with presumed or confirmed COVID-19 were added to a shared patient list in the authors’ centralized electronic medical record as the pregnant women came to the attention of providers. Participants received a series of phone calls based on their illness severity and were periodically assessed until deemed stable. A total of 83 patients were followed between March 19th and May 31st, 2020 in New York City, USA. Seven (8%) were asymptomatic, 62 (75%) had mild disease, 11 (13%) had severe disease, and three (4%) had a critical illness. This model provides a standardized, scalable care model to achieve their four goals of tracking, triaging, educating, and isolating COVID-19 patients. The authors encourage others to develop and utilize outpatient surveillance systems to facilitate appropriate care and to optimize maternal and fetal well-being.	Due to the lack of data regarding the clinical course and outcomes of pregnant women with COVID-19, the authors from New York City, USA created a care model and encouraged others to develop and utilize outpatient surveillance systems to facilitate appropriate care and to optimize maternal and fetal well-being.	Trostle ME, Silverstein JS, Tubridy E, et al. COVID-19 in pregnancy: creating an outpatient surveillance model in a public hospital system [published online, 2020 Aug 18]. J Perinat Med. 2020;/j/jpme.ahead-of-print/jpm-2020-0309/jpm-2020-0309.xml. doi:10.1515/jpm-2020-0309
Multisystem Inflammatory Syndrome in children, MIS-C, hepatitis, children, pediatrics	18-Aug-20	Acute hepatitis is a prominent presentation of the multisystem inflammatory syndrome in children: a single-center report	Hepatology	Rapid Communication	In this retrospective study, the authors investigated 44 patients with MIS-C admitted at Morgan Stanley Children’s Hospital of New York-Presbyterian, USA between April 18th and May 22nd, 2020. Hepatitis was present in 19 subjects (43%) and was associated with more severe disease. Individuals with hepatitis had significantly higher rates of shock at presentation (21.1% vs. 0%, p=0.008), greater respiratory support requirement (42.1% vs. 12%, p=0.005), and longer hospitalization times (median 7-days [IQR: 5-10 days] vs. 4-days [IQR: 3.5-6.5 days], p<0.05). Patients with hepatitis also had significantly higher levels of ferritin (706.9 vs. 334.2 mg/mL, p<0.01), Interleukin-6 (233.9 vs. 174.7 pg/mL, p<0.05), troponin (83 vs. 28.5 ng/L, p<0.05) and B-type	This study discovered that hepatitis is common in children with MIS-C and is associated with a more severe presentation and persistent elevation of many liver function tests. Close and longer follow-up studies are warranted to understand the impact of SARS-CoV-2 on the liver.	Cantor A, Miller J, Zachariah P, DaSilva B, Margolis K, Martinez M. Acute hepatitis is a prominent presentation of the multisystem inflammatory syndrome in children: a single-center report [published online, 2020 Aug 18]. Hepatology. doi:10.1002/hep.31526

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		[Free Access to Abstract only]			Natriuretic peptide (7424.5 vs. 3209.5 pg/mL, $p < 0.05$). The single patient with liver failure also developed multi-organ failure requiring vasopressors, hemodialysis, and mechanical ventilation. All patients were discharged, though more than 50% had persistent hepatitis up to one month after discharge. The authors concluded that hepatitis is common in children with MIS-C and is associated with a more severe presentation and persistent elevation of liver function tests in many. They suggested close and longer follow-up studies are needed to understand the impact of SARS-CoV-2 on the liver.		
Multisystem inflammatory syndrome, multiple organ failure, Kawasaki disease, Brazil	18-Aug-20	Multisystem Inflammatory Syndrome Associated With Coronavirus Disease in Children: A Multi-centered Study in Belém, Pará, Brazil	The Pediatric Infectious Disease Journal	Brief Report	The authors describe the characteristics of children with pediatric multisystem inflammatory syndrome-temporally associated with SARS-CoV-2 (PIMS-TS). They conducted a prospective observational study between April 15 and June 15, 2020, on 11 children (29 days to 13 years old) admitted to 4 PICUs in the Eastern Amazon, Brazil, with PIMS-TS. The main clinical indications for hospital admission were vasogenic toxic shock ($n = 2$), Kawasaki disease ($n = 4$), and Kawasaki disease shock syndrome ($n = 5$), and the median length of PICU stay was 5 days (range: 3–12 days). The mortality rate was 18.2% (2 cases) and was associated with comorbidities, poor nutrition, shorter length of time between virus exposition and clinical manifestations (range: 7–10 days), and toxic shock syndrome. Seven patients received Mechanical ventilator (MV) support, of which three received invasive MV, and four received non-invasive MV. Furthermore, all patients had two or more organ dysfunctions and elevated inflammatory markers. Cardiovascular involvement was common, with abnormal echocardiography findings in 63% of cases. Also, pneumonia caused by COVID-19 was diagnosed in 9 patients with 4 progressing to acute respiratory distress syndrome.	The authors report a cluster of PICU admissions for cardiovascular failure associated with PMIS-TS. This study showed that PMIS-TS mostly affected younger children, contrary to what was reported in other studies.	de Farias ECF, Pedro Piva J, de Mello MLFMF, et al. Multisystem Inflammatory Syndrome Associated With Coronavirus Disease in Children: A Multi-centered Study in Belém, Pará, Brazil [published 2020 Aug 18]. <i>Pediatr Infect Dis J</i> . 2020;doi:10.1097/INF.0000000000002865
Guidance, immunomodulatory, pediatric	18-Aug-20	Multidisciplinary Guidance Regarding the Use of Immunomodulatory Therapies for Acute COVID-19 in Pediatric Patients	Journal of the Pediatric Infectious Diseases Society	Review Article	Immune-mediated lung injury and systemic hyper-inflammation are characteristic of severe and critical COVID-19 in adults and a small subset of children. This review outlines a framework for considering the use of immuno-modulatory therapy in pediatric patients based on an assessment of clinical disease severity and degree of multi-organ involvement combined with evidence of hyper-inflammation. This guidance offers an approach to decision making regarding immuno-modulatory therapy for severe or critical pediatric COVID-19, with the known rationale for consideration of each immuno-modulatory approach and summarized risks and benefits. The authors caution that this treatment plan should only be considered with severe or critical illness as the risks and benefits are variable, and therefore must be evaluated on a case-by-case basis	This review details guidelines for treatment of severe hyper-inflammation in children by various immunomodulatory medications. The risks and benefits of each treatment are highlighted. The authors caution that treatment should be conducted on a case-by-case basis	Dulek DE, Fuhlbrigge RC, Tribble AC, et al. Multidisciplinary Guidance Regarding the Use of Immunomodulatory Therapies for Acute COVID-19 in Pediatric Patients [published online ahead of print, 2020 Aug 18]. <i>J Pediatric Infect Dis Soc</i> . 2020;piaa098. doi:10.1093/jpids/piaa098

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Amniocentesis, pregnancy, prenatal invasive diagnostic procedures, ultrasound, vertical transmission, India	18-Aug-20	Restructuring fetal medicine services in a low-resource setting during the COVID-19 pandemic: Experience from a tertiary care fetal medicine center	International Journal of Gynecology & Obstetrics	Brief Communication	Prenatal diagnosis and invasive fetal therapy, being a highly specialized aspect of prenatal care, are available only in select centers in India and present unique challenges during the COVID-19 pandemic. The impact of these interventions on the fetus in the setting of COVID-19 is unclear, posing challenges in balancing the risks and benefits of such interventions. The authors present the experiences and key strategies for providing fetal medical care. With effective screening, contingent testing, and use of PPE, fetal interventions can be performed safely.	The authors provide key strategies for fetal medical care during the pandemic, including effective screening, contingent testing, and use of PPE.	Rana A, K Sharma A, Dadhwal V. Restructuring fetal medicine services in a low-resource setting during the COVID-19 pandemic: Experience from a tertiary care fetal medicine center [published online ahead of print, 2020 Aug 18]. Int J Gynaecol Obstet. 2020. doi:10.1002/ijgo.13337
PMIS, MIS-C, hyperinflammation, New York City, USA	18-Aug-20	A Novel Pediatric Multisystem Inflammatory Syndrome During the COVID-19 Pandemic [Free Access to Abstract only]	Pediatric Emergency Care	Special Feature	This article details 4 cases (ages 4-16 years) in a New York City (USA) emergency department presenting with a novel inflammatory syndrome associated with COVID-19 infection, so providers can have a better understanding of the identification and workup of these patients. The clinical features of this syndrome seem to overlap between Kawasaki disease, toxic shock syndrome, and myocarditis. All 4 patients had fever, variable rash, abdominal pain, vomiting, and/or diarrhea. Patients remained persistently tachycardic and febrile despite being given proper doses of antipyretics. Severity of presentations varied among the 4 cases. All 4 patients were found to have antibodies to COVID-19; however, it is unclear when this inflammatory syndrome develops in respect to COVID-19 infection. All patients required admission, but 2 required the pediatric intensive care unit for cardiac and/or respiratory support or closer monitoring. Upon follow-up, it seems that most patients are recovering with treatment.	This article details 4 cases in a New York City (USA) emergency department presenting with a novel inflammatory syndrome associated with COVID-19 infection. Symptomology, laboratory results, and full course of treatment are provided.	Del Greco G, Brady K, Clark B, Park H. A Novel Pediatric Multisystem Inflammatory Syndrome During the COVID-19 Pandemic [published online, 2020 Aug 18]. Pediatr Emerg Care. 2020. doi:10.1097/PEC.0000000000002229
Pregnancy, opioid use disorder, methadone	18-Aug-20	Changing Outdated Methadone Regulations That Harm Pregnant Patients	Journal of Addiction Medicine	Commentary	The authors describe that current regulations for methadone administration for opioid use disorder in the USA prevent the use of daily divided doses of methadone to maintain stability. With the increased metabolic state that occurs in pregnancy, this regulation results in repeated episodes of maternal/fetal opioid withdrawal, as well as other fetal physiologic abnormalities, and prevents optimal outcomes. Most methadone clinics are in urban settings, leaving patients in rural areas without access, and many are over-crowded to try to meet demand. During the COVID-19 pandemic, this has resulted in settings where physical distancing is challenging, posing particular risk to pregnant patients. A revised methadone system should provide treatment that is local, flexible, and limited in size to manage viral contagion risks. The authors advocate for immediate federal action to allow divided dosing during pregnancy and the early post-partum period, which would allow pregnant patients to receive medication at a dose and frequency that is optimized for them.	The authors describe the potential harms to pregnant women posed by the current regulations for methadone treatment in the USA, exacerbated by the COVID-19 pandemic, and recommend regulatory changes to allow optimal dosing to occur during pregnancy.	McCarthy JJ, Jones HE, Terplan M, et al. Changing Outdated Methadone Regulations That Harm Pregnant Patients [published online 2020 Aug 18]. J Addict Med. 2020. doi:10.1097/ADM.0000000000000720

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Children, pediatric emergency department, accesses, visits, Italy	18-Aug-20	Impact of COVID-19 on the Pattern of Access to a Pediatric Emergency Department in the Lombardy Region, Italy [No Abstract and Article not available for free]	Pediatric Emergency Care	Letter to the Editor	Overcrowded pediatric emergency departments (PEDs) often face reduced capacity to provide access to patients for non-urgent visits. To illustrate the impact of COVID-19 on the pattern of access, the authors performed a retrospective study to review health records to explore the frequency and characteristics of visits in a Lombardy Region hospital in Italy during the first trimester of 2019 and 2020 (January 1 – March 31). Additionally, the authors compared visits before and after the first COVID-19 case was reported in the region on February 23, 2020 (defined as pre-epidemic and epidemic periods). The findings suggested a reduction from 45.6 (+/-12.8) mean daily accesses during the first trimester in 2019 to 32.8 (+/-23.6) mean daily accesses in 2020. Further, there was a significant decline in the number of visits from 50.1 (+/13.3) visits during the pre-epidemic period to 7.7 (+/-5.5) visits during the epidemic period. The findings suggested an increased likelihood of hospitalization during the epidemic period (odds ratio 3.22; 95% CI 2.31–4.49). The authors conclude that PED attendance is impacted by the COVID-19 pandemic.	This retrospective study suggests that pediatric emergency department patterns of access were impacted by COVID-19 through reduced visits and daily accesses in a Lombardy Region hospital in Italy.	Clavenna A, Nardelli S, Sala D et al. Impact of COVID-19 on the Pattern of Access to a Pediatric Emergency Department in the Lombardy Region, Italy. [published online, 2020 Aug 18]. <i>Pediatr Emerg Care</i> . 2020. doi:10.1097/PEC.000000000000232
Pregnant Women, vertical transmission, clinical characteristics, Iran	17-Aug-20	Evaluating Clinical Course and Risk Factors of Infection and Demographic Characteristics of Pregnant Women with COVID-19 in Hamadan Province, West of Iran	Journal of Research in Health Sciences	Original Article	This retrospective cohort study evaluated the clinical course and risk factors of pregnant women diagnosed with COVID-19 in Hamadan Province, west of Iran. The authors performed convenience sampling January 6 - June 21, 2020 to identify 50 pregnant women (mean age 29.2 years, age range 18-38 years, average gestational age 28.8 weeks) diagnosed with COVID-19 according to the WHO's temporary guidelines in hospitals of Hamadan Province [number of hospitals is not discussed]. The authors reviewed files in each hospital's archive to collect data. Findings showed that 32% (n=16) of the women had an underlying disease, 32% (n=16) had a history of influenza, and 40% (n=20) recently traveled to infected areas. The most common symptoms were fever, cough, and shortness of breath. The average length of hospital stay was 4.04 days, and 8% (n=4) of the women required ICU hospitalization. 24 women delivered 25 infants during the study, and 29% of these women (n=7) had premature births. Moreover, of the 24 patients who delivered, 14 of them had a vaginal delivery and 10 had a c-section. Upon neonatal testing, 7 of the 25 infants were positive for SARS-CoV-2 on PCR and were monitored in the neonatal ICU [the authors do not discuss timing or other details of these tests]. The authors concluded that early diagnosis of COVID-19 disease is essential in pregnant women, because there is a possibility of worsening complications in the mother and fetus.	This retrospective study from Iran evaluated the clinical course and risk factors of 50 pregnant women diagnosed with COVID-19 and found that preterm delivery and C-section were possible complications of pregnancy with COVID-19. The most common symptoms in pregnant women with COVID-19 were fever, cough, and respiratory distress, and infected infants were also observed among infants born to women with COVID-19.	Sattari M, Bashirian S, Masoumi SZ, et al. Evaluating Clinical Course and Risk Factors of Infection and Demographic Characteristics of Pregnant Women with COVID-19 in Hamadan Province, West of Iran. <i>J Res Health Sci</i> . 2020 Aug 17;20(3):e00488. doi: 10.34172/jrhrs.2020.22.
Pregnancy, neonate, multiple sclerosis,	17-Aug-20	MS, pregnancy and COVID-19	Multiple Sclerosis Journal	Original Article	The authors discuss key clinical considerations regarding COVID-19 and Multiple Sclerosis (MS) in pregnancy, focusing on the following four topics: (1) the impact of COVID-19 infection on	The authors summarize data regarding COVID-19 in pregnancy, and provide	Yam C, Jokubaitis V, Hellwig K, Dobson R. MS, pregnancy and COVID-19. <i>Multiple Sclerosis</i>

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neurology, immunomodulatory therapy					pregnant women, (2) neonatal outcomes after maternal COVID-19, (3) the impact of the current pandemic on antenatal care, and (4) the interaction between COVID-19, MS and pregnancy. The authors make the following general recommendations: Women with MS who are also pregnant should be advised to follow appropriate social distancing measures and/or shielding measures depending on their immunosuppressant exposure and additional clinical co-morbidities. Management of pregnant women with MS comes with additional considerations due to the unique immunological environment during pregnancy, immunomodulatory therapy use, and implications for COVID-19 disease activity. It is important that pregnant women maintain contact with obstetric services as appropriate to their particular circumstances.	recommendations for neurologists and providers caring for pregnant women with Multiple Sclerosis during the COVID-19 pandemic.	Journal. 2020;26(10): doi:10.1177/1352458520949152
ACE2, TMPRSS2, vertical transmission, peri-implantation, placenta	17-Aug-20	SARS-CoV-2 Entry Factors: ACE2 and TMPRSS2 Are Expressed in Peri-Implantation Embryos and the Maternal-Fetal Interface	Engineering (Beijing)	Article	It is still unclear whether vertical transmission of SARS-CoV-2 exists. In order to investigate the potential risk of vertical transmission, this study explored ACE2 and transmembrane protease serine 2 (TMPRSS2) expression patterns in peri-implantation embryos and the maternal-fetal interface using previously published single-cell transcriptome data. The results show that day 6 (D6) trophoblast cells (TE) in peri-implantation embryos, as well as syncytiotrophoblast (STB) at 8 weeks of gestation (STB_8W) and extravillous trophoblasts cells (EVT) at 24 weeks of gestation (EVT_24W) in the maternal-fetal interface, strongly co-expressed ACE2 and TMPRSS2, indicating SARS-CoV-2 infection susceptibility. The ACE2 positive-expressing cells in the three cell types mentioned above are all involved in autophagy and immune-related processes. ACE2 showed no gender bias in post-implantation embryos but was highly expressed in D6 female TE and PE cells, along with a gender difference in ACE2 positive-expressing STB and CTB. Although there is still no direct evidence of vertical transmission, these results reveal a theoretical possibility of SARS-CoV-2 infection risks during embryo transfer, peri-implantation embryo development, and gestation.	This study explored ACE2 and transmembrane protease serine 2 (TMPRSS2) expression patterns in peri-implantation embryos and the maternal-fetal interface. Although there is still no direct evidence of vertical transmission, results reveal a theoretical possibility of SARS-CoV-2 infection during embryo transfer, peri-implantation embryo development, and gestation.	Chen W, Yuan P, Yang M, et al. SARS-CoV-2 Entry Factors: ACE2 and TMPRSS2 Are Expressed in Peri-Implantation Embryos and the Maternal-Fetal Interface [published online, 2020 Aug 17]. Engineering (Beijing). 2020. doi:10.1016/j.eng.2020.07.013
Australia, perinatal distress, mental health	17-Aug-20	Perinatal distress during COVID-19: a thematic analysis of an online parenting forum	Journal of Medical Internet Research	Original Research	In this article, the authors examined the public discourse of a perinatal cohort to learn about impacts of the COVID-19 pandemic on unmet needs, mothering identity and social dynamics. All 831 posts related to COVID-19 from January 27-May 12, 2020 on an Australian online support forum for pregnant and recently pregnant women were analyzed. 5 themes emerged: 1) heightened distress related to a high-risk external environment; 2) despair and anticipatory grief due to deprivation of social and family support, and bonding rituals; 3) altered family and support relationships; 4) guilt-tampered happiness; and 5)	Researchers in Australia surveyed an online forum for pregnant mothers in order to determine the effects of the COVID-19 pandemic on mothering identity and social dynamics. The authors determined that mothers feel increased negative	Chivers BR, Garad RM, Boyle JA, et al. Perinatal distress during COVID-19: a thematic analysis of an online parenting forum [published online 2020 Aug 17]. J Med Internet Res. 2020; doi:10.2196/22002

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					family future postponed. Sentiment analysis revealed content was predominantly negative, and word-specific analysis showed a high prevalence of negative words and verbiage. The perinatal period involves a major life transition requiring increased levels of social, emotional, and health professional support, and the authors suggest that the general information on COVID-19 safe behaviors does not appear to meet the expectations of the perinatal population, resulting in exacerbated risk of psychological and physiological distress. The authors stress the need for targeted and consistent information in risk aversion and related strategies.	sentiments due to the current pandemic situation, and stress that more targeted risk aversion strategies are needed to help perinatal mothers.	
Pediatric disorders, rehabilitation, social isolation, social distancing, telemedicine, Brazil	17-Aug-20	Impact of Social Isolation due to the COVID-19 Pandemic in Patients with Pediatric Disorders: Rehabilitation Perspectives From a Developing Country	Physical Therapy	Original Article	In most countries, the only strategies that have been shown to be effective in the reduction of cases and deaths during the COVID-19 pandemic thus far are rigid public health measures such as social distancing. Despite its importance, social distancing seems to impact the lives of patients with neuropsychiatric conditions in a biopsychosocial manner. Children with disabilities in social isolation, especially in developing countries, may have problems accessing necessary therapies. Telerehabilitation, during which rehabilitation professionals interact with their patients at a distance, can provide rehabilitation assistance during the pandemic; however, this modality can be new and challenging for physical therapists. The authors discuss the potential issues of telerehabilitation, including those specific to the neuropsychiatric population. They recommend creating public policies that support families of children with disabilities, investigating the efficacy telerehabilitation in neuropsychiatric areas, as well as providing psychological and social support for these families.	The authors discuss telerehabilitation during the COVID-19 pandemic, including for pediatric patients with neurological disorders. They state that pediatric physical therapists must adapt in order to provide the best possible care during the current complex social moment that many patients and families are enduring.	Meireles ALF, de Meireles LCF. Impact of Social Isolation due to the COVID-19 Pandemic in Patients with Pediatric Disorders: Rehabilitation Perspectives From a Developing Country [published online, 2020 Aug 17]. Phys Ther. doi:10.1093/ptj/pzaa152
MIS-C, PIMS-TS, children, adolescents, pediatric, hyperinflammation	17-Aug-20	Multisystem inflammatory syndrome in children related to COVID-19: A systematic review	medRxiv	Pre-print (not peer-reviewed)	A thorough characterization of PIMS-TS or MIS-C is currently lacking. The authors conducted a systematic review of the literature describing inflammatory syndromes associated with COVID-19 in children and adolescents, including 40 observational studies and case reports (687 cases) (published between May 9th, 2020 and June 30th, 2020). Studies were mostly conducted in the US (n=18), France (n=5), and UK (n=6). In contrast with Kawasaki Disease (KD), median age was higher at 9 years (IQR 6.0-12.3 years) and racial/ethnic minorities were disproportionately affected. Most cases were male (59.1%), and pre-existing conditions were infrequent, apart from obesity (24.4%). The majority suffered from gastrointestinal (87.2%) and cardiocirculatory (79.2%) manifestations; respiratory symptoms (51.2%) were less frequent. 56.3% presented with hemodynamic shock, and critical care was often necessary. Mortality rate was low (1.6%) and short-term outcomes favorable. The Royal College of Pediatrics and Child Health PIMS-TS case definition proved to	A systematic review was conducted of 40 observational studies and case reports describing inflammatory syndromes associated with COVID-19 in children and adolescents. The authors characterize results according to demographics, presentation, diagnosis, and outcome.	Hoste L, Van Paemel R, Haerynck F. Multisystem inflammatory syndrome in children related to COVID-19: A systematic review. [published online, 2020 Aug 17]. medRxiv. doi: 10.1101/2020.08.17.20173641.

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					be most comprehensive comprising all single cases, while WHO and CDC MIS-C definitions were more stringent. The authors call for uniform case definitions to guide future research on epidemiological clustering, immunopathology, and long-term prognosis.		
Asthma, wheezing, indirect impacts, children, London	17-Aug-20	The indirect impact of COVID-19 on children with asthma	Archivos de Bronconeumología	Letter to the Editor	The authors discuss the indirect impacts of COVID-19 on children with asthma in the UK. Over the eight-week lockdown period in the UK starting on March 23, 2020, a London hospital saw a 90% reduction in the admission of children (<18-years-old) presenting with asthma and/or wheezing compared to the same time period in 2017-2019. The authors did not believe that this was due to parental concerns of COVID-19 exposure in healthcare settings, but rather other factors reducing the burden of acute asthma. Among these factors are school closures and air quality improvement as a function of reduced air and road travel. The authors suggested that school and childcare center closures may have reduced transmission of other respiratory viruses that can exacerbate symptoms in asthmatic patients. The authors conclude that during the reopening of schools and childcare programs, it is important to monitor increases in acute asthma cases to further illustrate the indirect impacts that the COVID-19 lockdown had on children with asthma.	A London Hospital saw a reduction of 90% in children (<18-years-old) presenting with asthma during the COVID-19 lockdown in the UK. The authors suggested that school closures as well as reduced air and road travel may have played a role in the reduction of acute asthma cases.	Chavasse R, Almario A, Christopher A, Kappos A, Shankar A. The Indirect Impact of COVID-19 on Children With Asthma. 2020 Aug 17. Arch Bronconeumol. 2020;S0300-2896(20)30226-X. doi:10.1016/j.arbres.2020.07.003
Vertical transmission, nucleocapsid proteins, placenta, pneumonia, Italy	17-Aug-20	SARS-CoV-2 vertical transmission with adverse effects on the newborn revealed through integrated immunohistochemical, electron microscopy and molecular analysis of placenta	EBioMedicine	Original Research	Placental positivity for SARS-CoV-2 has been reported in selected cases, but infection or virus-associated disease of fetal tissues or newborns remains to be demonstrated. The authors screened for SARS-CoV-2 spike (S) protein expression placentas from 101 women who delivered between February 7 and May 15, 2020, including 15 who tested positive for SARS-CoV-2 RNA. One placenta resulted positive for the SARS-CoV-2 S and SARS-CoV-2 nucleocapsid (N proteins), which was further studied by RNA-in situ hybridization and RT-PCR for S transcripts, and by electron microscopy. This placenta strongly expressed SARS-CoV-2 S and N proteins. The newborn tested positive for viral RNA and developed COVID-19 pneumonia soon after birth, providing evidence in support of transmission of SARS-CoV-2 infection from a fully term pregnant woman to her newborn. The authors are unsure if this outcome is due to host genetic factors, the infection of a unique SARS-CoV-2 variant, and/or the production of a high load of maternal antibody-virus immune complexes contributing to enhancement of infection, and assert that more research is needed.	This study documents a single case of vertical transmission of SARS-CoV-2 in a full-term pregnant mother to her newborn. Placental analysis showed increased expression of SARS-CoV-2 proteins, but further cases are needed to determine the cause of the vertical transmission.	Facchetti F, Bugatti M, Drera E, et al. SARS-CoV2 vertical transmission with adverse effects on the newborn revealed through integrated immunohistochemical, electron microscopy and molecular analyses of Placenta [published online ahead of print, 2020 Aug 17]. EBioMedicine. 2020;59:102951. doi:10.1016/j.ebiom.2020.102951

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Libya, neonatologist, transmission	17-Aug-20	Impact of COVID-19 pandemic on neonatologists in resource-limited country [No Abstract and Article not available for free]	The Journal of Maternal-Fetal and Neonatal Medicine	Letter to the Editor	. Several previous studies have reported the severity of COVID-19 and the risk of transmission from pregnant women to neonates as well as the risk of adverse pregnancy outcomes. A cross-sectional study was conducted in April 2020 among neonatologists working in Libya to determine their knowledge and preparedness toward the COVID-19 outbreak. The study was conducted using online and paper questionnaires to include demographic data, basic participant characteristics, work-related data, COVID-19 related knowledge, self-reported preparedness, hospital preparedness, and readiness reported by the neonatologist. There were responses from 417 out of 500 neonatologists. While 194 neonatologists felt appreciated for their contribution as healthcare workers during COVID-19, the remaining neonatologists did not. Approximately 132 reported feeling stigmatized by families and/or friends for being medical practitioners during COVID-19. There were 359 responses that reported that their hospitals had available neonatal ICU facilities with ventilators and 114 reported a shortage of disinfectants and cleaning facilities in their hospitals. Adequate knowledge and preparedness toward COVID-19 are needed to prevent cross-contamination because many neonates and their mothers can be asymptomatic individuals who can transmit the virus. The authors urge that increased surveillance by testing all pregnant women and their newborns and healthcare workers is needed.	This study from Libya has demonstrated many critical and practical points for the preparedness and knowledge of neonatologists during the COVID-19 outbreaks in countries with limited resources.	Elhadi M, Msherghi A, Elkhafeefi F, et al. Impact of COVID-19 pandemic on neonatologists in resource-limited country [published online ahead of print, 2020 Aug 17]. J Matern Fetal Neonatal Med. 2020;1-3. doi:10.1080/14767058.2020.1808619
Asthma, pollution, respiratory virus, telemedicine, Philadelphia	17-Aug-20	Pediatric Asthma Healthcare Utilization, Viral Testing, and Air Pollution Changes during the COVID-19 Pandemic	The Journal of Allergy and Clinical Immunology: In Practice	Original Article	The authors evaluated changes in pediatric asthma-related healthcare utilization, respiratory viral testing, and air pollution due to the COVID-19 pandemic. For the period Jan 17-May 7, 2015-2020, asthma-related encounters and weekly summaries of respiratory viral testing data were taken from Children's Hospital of Philadelphia, USA, electronic health records, and pollution data for four criteria air pollutants were extracted from AirNow. Changes in encounter characteristics, viral testing patterns, and air pollution before and after Mar 17, 2020 were assessed and compared to data from 2015-2019. After Mar 17, 2020, in-person asthma encounters decreased by 87% (outpatient) and 84% (emergency + inpatient). Video telemedicine became the most highly utilized asthma encounter modality (61% of all visits), and telephone encounters increased by 19%. Concurrently, asthma-related systemic steroid prescriptions and frequency of rhinovirus test positivity decreased, while air pollution levels were not significantly different than historical trends.	The COVID-19 pandemic in Philadelphia, USA was accompanied by changes in pediatric asthma healthcare delivery patterns, including reduced admissions and systemic steroid prescriptions.	Taquechel K, Diwadkar AR, Sayed S, et al. Pediatric Asthma Healthcare Utilization, Viral Testing, and Air Pollution Changes during the COVID-19 Pandemic [published online ahead of print, 2020 Aug 17]. J Allergy Clin Immunol Pract. 2020;S2213-2198(20)30824-2. doi:10.1016/j.jaip.2020.07.057

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ART, ESHRE, access to services, assisted reproduction, coronavirus disease 2019, infertility, severe acute respiratory syndrome coronavirus 2	17-Aug-20	A picture of medically assisted reproduction activities during the COVID-19 pandemic in Europe	Human Reproduction Open	Original Article	With the outbreak of COVID-19, the European Society of Human Reproduction and Embryology (ESHRE) advised that medically assisted reproduction (MAR) services should be reduced to avoid complications during assisted reproductive technology (ART) pregnancies, mitigate unknown risk of vertical transmission, preserve health resources and maintain social distancing. A structured questionnaire was distributed in April 2020 among the ESHRE Committee of National Representatives to evaluate the impact of COVID-19 on MAR services and compared to data on COVID-19 case number per country from the European Centre for Disease Control. By aligning the data for each country with respective epidemiological data, the authors show a large variation in the time and the phase in the epidemic when MAR/ART treatments were suspended and restarted. In most European countries, MAR/ART activities were stopped in March 2020, and treatments resumed gradually in the second half of April. On average, ART activity was paused for 48.76 days, ranging from 23 to 92 days, based on data from 37 countries. Treatment stop and restart was evaluated according to the phases in the epidemic: lag phase, exponential phase, stationary phase, and decline phase. In most of the countries (77.5%, 31/40), the MAR/ART activity was stopped during the exponential phase. Similarly, for restarting activity, most countries (75.0%, 30/40) restarted during the early decline phase.	The current article presents a longitudinal overview of the impact of the COVID-19 pandemic on the provision of assisted reproductive technology (ART) activities in Europe. Most countries medically assisted reproduction/ART activity was stopped when the epidemiologic curve hit the exponential phase, and activities were restarted when the daily number of new COVID-19 patients declined.	ESHRE COVID-19 Working Group , Vermeulen N, Ata B, et al. A picture of medically assisted reproduction activities during the COVID-19 pandemic in Europe. Hum Reprod Open. 2020;2020(3):hoaa035. Published 2020 Aug 17. doi:10.1093/hropen/hoaa035
New-onset type 1 diabetes, North West London, UK	17-Aug-20	New-Onset Type 1 Diabetes in Children During COVID-19: Multicenter Regional Findings in the U.K	Diabetes Care	Original Article	Data on new-onset type 1 diabetes during the COVID-19 pandemic, particularly in children, is limited. The authors reported data from North West London, UK of new-onset type 1 diabetes and diabetic ketoacidosis (DKA) in children aged 23-months-old to 16.8-years-old during the peak of the COVID-19 pandemic. Thirty children presented with new-onset type 1 diabetes. A high proportion of children (21/30, 70%) presented with DKA and twelve children presented with clinical shock with four being managed in pediatric intensive care units. Among other data, in comparison with a typical year, the authors estimated that this represents an additional 12-15 new type 1 diabetes cases during the COVID-19 pandemic, and they postulated that SARS-CoV-2 exposure contributed to the observed increase in cases by precipitating or accelerating type 1 diabetes onset.	This is supposedly the first report to describe an apparent increase in new-onset type 1 diabetes in children during the pandemic, and the authors raise awareness of a possible link between SARS-CoV-2 and new-onset type 1 diabetes	Unsworth R, Wallace S, Oliver NS, et al. New-Onset Type 1 Diabetes in Children During COVID-19: Multicenter Regional Findings in the U.K [published online ahead of print, 2020 Aug 17]. Diabetes Care. 2020;dc201551. doi:10.2337/dc20-1551

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Child development	17-Aug-20	Let Us Be Vigilant: COVID-19 Is Poised to Obliterate Gains in Healthy Child Development Globally	Pediatrics	Commentary	In this commentary, the author discusses a multi-country observational cohort study in which children and parents were assessed multiple times from children's ages 6 months to 6 years collecting information on measures of socio-economic status, infection, illness, maternal depression, positive parenting, and the home environment. The outcome was child development, as measured by the Bayley Scales of Infant Development at early stages and the Wechsler Preschool and Primary Scale of Intelligence at 60 months old. Previous literature explains the importance of social support and nurturing for children in their early developmental stages and as they grow up, and it is known that there are many issues in promoting early child development in low-income and middle-income countries. The SARS-CoV-2 pandemic is now poised to obliterate any gains that may have been made over recent years and plunge many low- and middle-income countries into increased poverty.	This commentary looks at a study that points to a way to monitor the trajectories of children globally and to improve their development with support for a nurturing and safe environment and adequate nutrition.	Dreyer BP. Let Us Be Vigilant: COVID-19 Is Poised to Obliterate Gains in Healthy Child Development Globally [published online ahead of print, 2020 Aug 17]. <i>Pediatrics</i> . 2020;e2020012591. doi:10.1542/peds.2020-012591
Pregnancy, diabetes, clinical recommendations , glycemic control	17-Aug-20	Practical Considerations for Pregnant Women with Diabetes and SARS-CoV-2 Infection	American Journal of Obstetrics & Gynecology MFM	Clinical Perspective	Individuals with poorly controlled diabetes are at greater risk for SARS-CoV-2 morbidity. The authors aim to provide guidance for the management of diabetes in pregnant women during the pandemic, especially for general obstetricians-gynecologists. They offer the following recommendations based on current available evidence: Pregnant women with diabetes, especially type 1, and COVID-19 infection must be evaluated for severe hyperglycemia or diabetic ketoacidosis. Oral diabetes medications should be discontinued in pregnant patients who are admitted with moderate to severe COVID-19 infection, with insulin being the preferred agent for glycemic control. Additionally, continuous glucose monitoring should be considered. The administration of antenatal steroids should be individualized based on potential for neonatal benefits weighed against the indeterminate effect of corticosteroids on the COVID-19 disease process and potential maternal complications. Diabetic women with COVID-19 should follow standard practice of serial fetal growth ultrasounds and antenatal testing. Finally, the authors recommend use of institutional algorithms for diabetes management in COVID-19.	COVID-19 poses significant challenges to providing care for pregnant women with diabetes mellitus. The authors discuss clinical recommendations to improve the care of these patients.	Boyles GP, Thung S, Gabbe SG, Landon MB, Costantine MM, Practical Considerations for Pregnant Women with Diabetes and SARS-CoV-2 Infection. <i>American Journal of Obstetrics & Gynecology MFM</i> (2020), doi: https://doi.org/10.1016/j.ajogmf.2020.100210.
Pregnancy, race/ethnicity, temporality, geography, prevalence, hospital, New York	17-Aug-20	Race/ethnicity and spatiotemporal trends in SARS-CoV-2 prevalence on obstetrical units in New York	American Journal of Obstetrics & Gynecology	Research Letter	SARS-CoV-2 has been observed to disproportionately affect racial and ethnic minorities as well as socio-economically disadvantaged groups. The authors perform a retrospective study of all pregnant women with a positive SARS-CoV-2 test who were admitted to obstetric units at one of seven hospitals in New York City, USA from April 1 – June 9, 2020. Among the 4,811 pregnant women attending these hospitals, PCR results were collected for 4,674 patients; 500 (11%) of tests were positive. Significant declines in overall prevalence from 25% during week one to 4%	This retrospective study suggested SARS-CoV-2 disproportionately affects Hispanic and non-Hispanic Black pregnant women in New York City, USA health systems. The prevalence of positive SARS-CoV-2 tests varied geographically	Blitz MJ, Rochelson B, Prasannan L, et al. Race/ethnicity and spatiotemporal trends in SARS-CoV-2 prevalence on obstetrical units in New York [published online ahead of print, 2020 Aug 17]. <i>Am J Obstet Gynecol MFM</i> . 2020;100212.

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					during week ten were observed (p<0.0001). Additionally, significant differences in SARS-CoV-2 test positivity between racial/ethnic groups were observed (p<0.0001). Hispanic women and non-Hispanic Black women, although comprising only one-third of the study population, accounted for nearly half of the positive cases. Further, the authors suggested geographic variability in the proportion of positive tests among obstetrical units. The authors conclude by suggesting SARS-CoV-2 prevalence is heterogenous within this health system and should be addressed to ensure appropriate resource planning and surveillance of viral spread.	among obstetric units in this setting.	doi:10.1016/j.ajogmf.2020.100212
Health disparities, pregnancy, social determinants of health	17-Aug-20	Risk Factors for SARS-CoV2 Infection in Pregnant Women [Free Access to Abstract Only]	American Journal of Obstetrics and Gynecology MFM	Original Article	Risk factors for SARS-CoV-2 infection in pregnancy remain poorly understood. The authors of this study aimed to compare sociodemographic and clinical characteristics of pregnant women with and without SARS-CoV-2 infection and, among those with SARS-CoV-2, to compare characteristics of those who reported COVID-19 symptoms and those who were asymptomatic at diagnosis. They used a retrospective cohort study including women who delivered or intended to deliver at a hospital in Chicago, USA after initiation of a universal testing protocol on admission (April 8, 2020-May 31, 2020). During the study period, 1,418 women met inclusion criteria, of whom 101 (7.1%) tested positive for SARS-CoV2. Of those 101 women, 77 (76.2%) were symptomatic at the time of diagnosis. Compared to women who tested negative for SARS-CoV2, women who tested positive were younger and were more likely to have public insurance, to identify as Black/African American or Latina, to be unmarried, to be obese, have pre-existing pulmonary disease, and have living children. An increasing number of living children was associated with an increasing risk of SARS-CoV2 infection and this finding persisted after controlling for potential confounders. Understanding populations at heightened risk of acquisition of SARS-CoV-2 is essential to more effectively target outreach and prevention efforts.	Many risk factors for SARS-CoV-2 infection in pregnancy are similar to the social and structural determinants of health that have been reported in the general population. The observed association between SARS-CoV2 infection and having living children raises the possibility of children themselves as vectors of viral spread or behavior patterns of parents as mediators of acquisition.	Sakowicz A, Ayala AE, Ukeje CC, Witting CS, Grobman WA, Miller ES. Risk Factors for SARS-CoV2 Infection in Pregnant Women [published online ahead of print, 2020 Aug 17]. Am J Obstet Gynecol MFM. 2020;100198. doi:10.1016/j.ajogmf.2020.100198
Child health, child rights, recovery	17-Aug-20	Prioritising children's rights in the COVID-19 response	The Lancet	Editorial	The COVID-19 pandemic is threatening some of the hard-won gains in child health over the past two decades. While necessary to halt virus transmission, public health measures are causing prolonged disruption to societal functioning and exacerbating inequalities worldwide. Many clinical and community health services for children have reduced in capacity. This has placed eighty million children younger than 1 year in at least 68 countries at risk of vaccine-preventable diseases. The COVID-19 pandemic has also led to school closures, putting a significant portion of the world's children at risk for malnutrition and long-lasting negative impacts on development, well-being, and future	The authors argue that children's rights must be central in the recovery phase of the COVID-19 pandemic and in future planning in order to regain losses and to accelerate progress in the effort towards worldwide equitable child health.	The Lancet Child & Adolescent Health. Prioritising children's rights in the COVID-19 response. Lancet Child Adolesc Health. 2020;4(7):479. doi:10.1016/s2352-4642(20)30172-3

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					earning potential. Due to these far-reaching consequences of the COVID-19 pandemic, the authors call for the prioritization of children and their rights in the pandemic response and recovery planning. They argue for building equitable and resilient health systems, prioritizing education, and strengthening social protection measures for children.		
Pediatric, MIS-C, Kawasaki disease, epidemiology, pathophysiology, diagnosis, treatment	17-Aug-20	COVID-19 and multisystem inflammatory syndrome in children and adolescents	The Lancet	Review Article	The association between SARS-CoV-2 and the emerging condition known as MIS-C remains unknown. Although there are an increasing number of case reports, the global and population-specific incidence of MIS-C remains unknown, and the causal relationship of Kawasaki disease (KD) and MIS-C is unclear. In this review article, the authors describe current knowledge regarding epidemiology, causes, clinical features, and treatment protocols for MIS-C in children and adolescents associated with SARS-CoV-2. They also discuss the possible underlying pathophysiological mechanisms for COVID-19-induced inflammatory processes, which can lead to organ damage in severely ill pediatric patients. The authors conclude by posing several important questions about MIS-C, which need to be further researched. Some of the questions are: how does the pathophysiology of MIS-C differ from KD; whether patients with fever and inflammation following SARS-CoV-2 infection progress to KD, shock, or organ failure if left untreated; does the infection at a different stage of childhood and adolescence influence the severity of disease progression and prognosis; is MIS-C associated with an increased risk of medium-term to long-term adverse pediatric outcomes, etc. Insights from the available literature lend support for the need to develop a clear case definition and treatment protocol for this new condition. These findings also shed light on the potential for future therapeutic interventions and vaccine development for SARS-CoV-2.	The authors provide an overview of the current literature on MIS-C. They emphasize the importance of answering important scientific questions remaining about this condition and of clearly defining the case definition for the diagnosis of MIS-C.	Jiang L, Tang K, Levin M et al. COVID-19 and multisystem inflammatory syndrome in children and adolescents. [published online, 2020 Aug 17]. The Lancet. doi:https://doi.org/10.1016/S1473-3099(20)30651-4
COVID-19; children; transmission; asymptomatic; SARS-CoV-2, United States	16-Aug-20	Prevalence of Asymptomatic SARS-CoV-2 Infection in Children and Adults in Marion County, Indiana	Cureus	Original Research	The authors assessed the prevalence of asymptomatic SARS-CoV-2 infection in children and adults in Marion County, Indiana, in the United States between April 27 - May 15, 2020. Individuals living in Marion County with no symptoms of COVID-19 within 7 days of enrollment were eligible for this cross-sectional household study. Study kits were delivered to the participant's residence for self-swabbing, picked up by the study team, and tested by PCR for SAR-CoV-2. 511 nasal swabs were collected from 119 children <18 years and 392 adults ≥18 years of age (overall study median age=36 years; range not specified). No asymptomatic infection in adults was found, while a 7-year-old boy tested positive for an overall study prevalence of 0.2% (95% CI 0, 0.6%). The participant who tested positive had no known contact with a person with SARS-CoV-2 infection, and his 5 family	The authors assessed the prevalence of asymptomatic SARS-CoV-2 infection in children and adults in Marion County, Indiana, in the United States between April 27 - May 15, 2020. The findings suggest that asymptomatic SARS-CoV-2 infection can occur in children <10 years old with no known SARS-CoV-2 exposure.	Wood J, Datta D, Hudson BL, et al. Prevalence of Asymptomatic SARS-CoV-2 Infection in Children and Adults in Marion County, Indiana. Cureus. 2020;12(8):e9794. doi:10.7759/cureus.9794.

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					members tested negative for infection. The child and family members all tested negative for infection 10 and 20 days after the first test, and none developed symptoms of COVID-19 for 20 days after testing. The findings suggest that asymptomatic SARS-CoV-2 infection can occur in children <10 years old with no known SARS-CoV-2 exposure. Large cohort studies should be conducted to determine the prevalence of asymptomatic infection and risk of transmission from asymptomatic infection in children and adults over time.		
SARS-CoV-2; COVID-19; household; transmission; contact tracing; USA	16-Aug-20	Household Transmission of SARS-CoV-2 in the United States	Clinical Infectious Diseases	Original Research	The authors sought to estimate household secondary infection rates (SIR) of SARS-CoV-2 and evaluate potential risk factors for secondary infections in the US. Researchers from the CDC worked with public health departments in Milwaukee, WI and Salt Lake City, UT to identify confirmed cases of SARS-CoV-2 from March 22-April 25, 2020 via nasopharyngeal swab and PCR analysis. Households were then chosen based on convenience sampling. Surveys of each household were conducted on day 0, day 14, and on the day of any newly symptomatic cases. 58 index cases were selected resulting in 58 households and 188 household members; the median household size was 4 (range:2-16). The median age for index case-patients was 40 years (range 16-90 years), and household contacts median age was 22 years (range <1-76 years). 31 (54%, 95%CI: 41-66%) of the households had a secondary transmission, which involved 52 of the 188 household members for an SIR of 28% (95% CI: 22-34%). SIRs were highest among children of the primary patient (children <18 years, 18/43, 42%) (adult children, 6/17, 35%), with a significant difference seen among the 10-17 year age group (SIR: 15/26 or 58% vs. 1/13 or 8% for household contacts who were not children of the primary patient, p<0.05). The 3 households with a primary patient <18 years old remained without secondary infections during this study. Children seem to be at a higher risk for secondary infection when their parent is the primary patient. In contrast, a previous study in China found only 4% SIR for those <18 years. As transmission dynamics are not uniform across households, it is vital to isolate within households and to learn more about these dynamics to prevent future spread. [Note: this article contains some discrepancies in numbers in the abstract that are slightly different from the results in the full text].	The authors conducted a study to determine household secondary infection rates (SIR) from 2 major US cities. Children of the primary patient were found to have an increased risk for secondary infection. This was true for both children <18 years and adult children of the index patient. Isolation within households is essential to control the disease's spread, and household dynamics of transmission need further study.	Lewis NM, Chu VT, Ye D, et al. Household Transmission of SARS-CoV-2 in the United States [published online, 2020 Aug 16]. Clin Infect Dis. 2020;ciaa1166. doi:10.1093/cid/ciaa1166
China, clinical characteristics, symptoms	16-Aug-20	Characteristics of Eight Pediatric Patients with Coronavirus Disease 2019	Iranian Journal of Pediatrics	Original Research	The authors retrospectively reviewed the epidemiological, laboratory, clinical and imaging data of 8 pediatric patients with COVID-19 from January 31 - February 24, 2020 at Xiangyang General Hospital, China. 8 out of the 166 patients admitted during this period had laboratory-confirmed COVID-19. Of the 8 patients, two had underlying illnesses and seven (87.5%) had	The authors report on common clinical, epidemiological, laboratory, and imaging data from 8 pediatric patients with COVID-19 in	Chen G, Li J , Jiang Y, Chen H , Pan R. Characteristics of Eight Pediatric Patients with Coronavirus Disease 2019, Iran J Pediatr. Online ahead of Print ;

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					belonged to a family cluster outbreak. The most common symptoms were fever (50%), cough (37.5%), expectoration (37.5%), and sore throat (37.5%). Three cases displayed abnormal white blood cell counts (37.5%) and six presented with higher lymphocyte counts (75%). Chest CT showed glass opacity or patchy lesions in 7 patients (87.5%). All patients received antiviral therapy, with some receiving additional antibiotics (4 patients), glucocorticoid atomization (1 patient), interferon atomization (1 patient), and traditional Chinese medicine (4 patients). All patients were discharged within 4 weeks, with no poor prognosis or recurrence after 14 days follow-up. The authors determine early detection and isolation are key measures to control the disease. High-resolution CT scans and nasopharyngeal SARS-CoV-RNA tests can be a great asset for early-stage diagnosis, with anti-viral therapies being effective in treating viral pneumonia.	China. They determine that most pediatric COVID-19 cases have milder clinical presentation, with abnormalities in white blood count and lymphocyte counts. Family clusters appear to be a major source of infection.	30(5):e103337. doi: 10.5812/ijp.103337.
Neonates, negative pressure, incubator, innovation	16-Aug-20	How a portable negative pressure incubator for COVID-19 was created with minor modifications	Acta Paediatrica	Letter	The authors describe the development of a negative pressure incubator for neonates with COVID-19 using available and affordable materials. They used a Neo Shield, Model Neo 1001 incubator and drilled small holes in the last 40 cm of the suction tubing. This tube was then fixed over the end wall and the roof of the incubator. The suction tube was passed through an underwater seal drain system, which contained 100 ml of 1% sodium hypochlorite, to disinfect the exhaust air before attaching it to the wall suction unit. The inlet for the surrounding airflow was provided through a space surrounding the caudal end window and the suction pressure was kept at 200 millibars to create approximately 12 air changes per hour. The authors then assessed the efficacy by aerosolization of a fluorescein solution under ultraviolet light. They found that a key advantage of their neonate incubator, in addition to being made of readily available materials, was its portability.	The authors describe the development of a portable negative pressure incubator for neonatal patients with COVID-19 using readily available materials.	Kumar A, Kumar N, Kumar A, Chowdhry BK, Sinha AK. How a portable negative pressure incubator for COVID-19 was created with minor modifications [published 2020 Aug 16]. Acta Paediatr. 2020; doi:10.1111/apa.15521
Children, influenza, China	16-Aug-20	Seasonal influenza activity in young children before the COVID-19 outbreak in Wuhan, China	Transboundary and Emerging Diseases	Letter to the Editor	One hypothesis of why few children were infected in the early stages of the COVID-19 outbreak in Wuhan, China is the potential interference of seasonal influenza peaks with the COVID-19 outbreak. This letter reports that the incidence rate of influenza-like illness was higher in the 2019-20 season than in the previous two years. The authors review test results of 194,672 specimens from one hospital in Wuhan, collected from 1 January 2017 to 20 May 2020. In 2020, they found a peak of influenza A in early January, coinciding with the start of the COVID-19 outbreak. This peak occurred nearly one month earlier than the flu peaks in 2017-18 and 2018-19. A possible reason for this phenomenon is the earlier Chinese New Year holiday season in 2019-20. Cases of influenza A decreased abruptly in January 2020, presumably due to social distancing. The authors then discuss discrepancies	One hypothesis of why few children were infected in the early stages of the COVID-19 outbreak in Wuhan, China is the potential interference of seasonal influenza peaks with the COVID-19 outbreak. This letter discusses the interaction between seasonal respiratory viruses and COVID-19, especially in children.	Xia Z, Yang L, Li N, et al. Seasonal influenza activity in young children before the COVID-19 outbreak in Wuhan, China [published online, 2020 Aug 16]. Transbound Emerg Dis. 2020;doi:10.1111/tbed.13799

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					between two reports on the number of pediatric COVID-19 cases early in the pandemic (Liu et al and Kong et al), and possible reasons for the disparity. They recommend studies with a large sample size from different regions to investigate the interaction between seasonal respiratory viruses and COVID-19, especially in children.		
Cutaneous chilblain lesions, pediatric, dermatology, serology, false negatives	16-Aug-20	Response to "No evidence of SARS-CoV-2 infection by PCR or serology in children with pseudo-chilblain"	British Journal of Dermatology	Letter to the Editor	In this response to Caselli et al.'s letter published 1 July 2020, which found no evidence of an outbreak of acute pseudo-chilblain skin lesions being related to SARS-CoV-2 infection, the authors recall a case study by Colmenero et al. published 20 June 2020 that detected SARS-CoV-2 in endothelial cells of cutaneous chilblain lesions (CLL) by immuno-histochemistry methods, despite the patients having had negative nasopharyngeal swabs. The authors also discuss 32 of their own patients with CLL (15F/17M, average age=16.3 years) treated in Lecco, Italy, who were consistently negative for specific IgG antibodies. 3 of these cases were previously negative for SARS-CoV-2 infection and serology but positive for specific IgM upon further testing with a new method. The authors provide several possible reasons for false-negative testing, such as technique and timing of nasopharyngeal swabs, shortcomings of available serological testing methods, or a vigorous innate immune response against the virus hampering the generation of antibodies through the adaptive response. The authors conclude that CLL develop in subjects with mild infection, low and rapid viral shedding, and limited ability to generate detectable specific antibodies.	Despite previous false negatives and limited detectable serology, the authors conclude that cutaneous chilblain lesions are associated with SARS-CoV-2 infection in pediatric patients.	Recalcati S, Tonolo S, Luzzaro F, et al. Response to "No evidence of SARS-CoV-2 infection by PCR or serology in children with pseudo-chilblain". Br J Dermatol. 2020. doi:10.1111/bjd.19493
Brazil, maternal mortality, social determinants	16-Aug-20	Clinical characteristics and risk factors for mortality in obstetric patients with severe COVID-19 in Brazil: a surveillance database analysis	British Journal of Obstetrics and Gynecology	Original Research	It is still unclear whether pregnancy or the postpartum period leads to increased morbidity and mortality from COVID-19 infection. Furthermore, there may be additional risks for women in low- and middle-income countries. The authors abstracted data from the Brazilian Acute Respiratory Distress Syndrome (ARDS) Surveillance System for 978 Brazilian pregnant and postpartum women identified as COVID-19 ARDS cases with a known clinical outcome. They identified 124 maternal death with an overall mortality rate of 12.7% among obstetric COVID-19 ARDS cases. At least one comorbidity was present in 48.4% of fatal cases compared to 24.9% of surviving cases. Among women who died, 58.9% were admitted to the ICU, 53.2% had invasive ventilation, and 29% had no respiratory support. The main risk factors for maternal mortality associated with COVID-19 were postpartum onset of ARDS, obesity, diabetes, and cardiovascular disease. White ethnicity had a protective effect. The rate of maternal death varied based on geographical location indicating poor outcomes may be related to social risks and limited access to health care. Additionally, in Brazil the overall rate of COVID-19	Both clinical characteristics and social determinants of health, including access to proper health care, impact the outcomes of obstetric COVID-19 cases. Ensuring high quality care throughout pregnancy and the postpartum period is crucial to mitigating the risk of maternal mortality especially in low- and middle-income countries.	Takemoto MLS, Menezes MO, Andreucci CB, et al. Clinical characteristics and risk factors for mortality in obstetric patients with severe COVID-19 in Brazil: a surveillance database analysis [published online ahead of print, 2020 Aug 16]. BJOG. 2020;10.1111/1471-0528.16470. doi:10.1111/1471-0528.16470

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					related maternal deaths surpassed the worldwide published rate.		
Pediatric, MIS-C, Kawasaki disease, PIMS-TS, Japan	16-Aug-20	Kawasaki disease or Kawasaki-like disease: influence of SARS-CoV-2 infections in Japan	Acta Paediatrica	Brief Report	During the COVID-19 pandemic, several clusters of children have presented with fever and multisystem inflammation resembling Kawasaki disease (KD). No cases of the condition, known as PIMS-TS or MIS-C, have been diagnosed in Asia to the authors' knowledge. Therefore, the authors analyzed clinical data on patients diagnosed with KD at a single center during a local COVID-19 epidemic from 1 Dec. 2019-31 May 2020 to investigate the relationship between KD and SARS-CoV-2 infections in Japan, which has the highest KD incidence in the world. In total, 44 KD patients with a median age of 2 years old were identified. Of these, two patients were positive for anti-SARS-CoV-2 IgG antibody, one of whom was also positive for anti-Mycoplasma pneumoniae antibody. They conclude that most patients with KD at their hospital had clinical characteristics more compatible with classical KD than with PIMS-TS. No dramatic increase in KD incidence or changes in its clinical features were observed during the local COVID-19 epidemic, unlike in other countries where PIMS-TS is endemic.	In a single-center study of Kawasaki disease (KD) patients in Japan during the COVID-19 pandemic, the authors found that only one patient (2%) was hospitalized for SARS-CoV-2 infection and had anti-SARS-CoV-2 IgG antibodies. There was not an increase in KD cases during the COVID-19 pandemic at this institution.	lio K, Uda K, Hataya H, et al. Kawasaki disease or Kawasaki-like disease: influence of SARS-CoV-2 infections in Japan [published online, 2020 Aug 16]. Acta Paediatr. doi:10.1111/apa.15535
School closures, social distancing, child abuse, depression, mental health, children, adolescents, domestic violence, child welfare	16-Aug-20	A 'Parallel Pandemic': The Psychosocial Burden of Covid-19 in Children and Adolescents	Acta Paediatrica	Perspective	Social distancing and temporary shutdown of schools, companies, and recreational facilities has resulted in a 'parallel pandemic' of psychosocial consequences worldwide. This article details the impact of these closures on children and adolescents, including financial insecurity, educational under-achievement, food insecurity, child abuse, domestic violence, and depression - all compounded by the loss of infrastructural, emotional, and social support. The authors stress the importance of pro-active screening along with provision of resources and coping strategies to address mental health and rebuild resilience in children and adolescents.	This article explores the psychosocial impacts of COVID-19 related lockdowns on children and adolescents worldwide and recommends pro-active screening and provision of resources to rebuild resilience.	Cardenas MC, Bustos SS, Chakraborty R. A 'Parallel Pandemic': The Psychosocial Burden of Covid-19 in Children and Adolescents [published online, 2020 Aug 16]. Acta Paediatr. 2020;10.1111/apa.15536. doi:10.1111/apa.15536
Prenatal visits, household, transmission, diabetes, rapid saliva test	16-Aug-20	COVID-19: Risk During Prenatal Visits Household & Other Transmission Diabetes & Mortality Rapid Saliva Test	NEJM Journal Watch	Summary	The author summarizes the latest developments and research on COVID-19 regarding prenatal visits, household transmission, diabetes and mortality, and the rapid saliva test. First, researchers concluded that in-person prenatal visits were not likely to pose a significant risk for SARS-CoV-2 infection after a case-control study showed no difference in the average number of in-person prenatal visits between cases and controls. Second, a study in the Annals of Internal Medicine suggests that household exposure to SARS-CoV-2 confers the highest risk for transmission (10%), while exposure on public transportation seems to confer the least (0.1%). Third, according to a study in The Lancet Diabetes and Endocrinology, both type 1 and type 2 diabetes, are independent predictors of COVID-19 mortality. Fourth, the US Food and Drug Administration issued an emergency use	This summary of the latest developments in COVID-19 news and research offers guidance on prenatal visits, household transmission, diabetes and mortality, saliva testing, and reinfection risk.	Herman A. COVID-19: Risk During Prenatal Visits / Household & Other Transmission / Diabetes & Mortality / Rapid Saliva Test. NEJM Journal Watch. 2020. https://www.jwatch.org/fw116940/2020/08/16/covid-19-risk-during-prenatal-visits-household-other?query=C19&cid=DM97469_NEJM_Registered_Users_and_InActive&bid=245618719 . Accessed August 22, 2020.

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					authorization for a rapid saliva test for SARS-CoV-2, the SalivaDirect, developed at the Yale School of Public Health. The SalivaDirect test is unique because it does not require a separate nucleic acid extraction step and is compatible with a range of common reagents and instruments, thus enabling wide usage. Finally, the CDC clarified that although a person can test positive for SARS-CoV-2 for up to 3 months after diagnosis without posing a risk to others, it does not imply immunity to re-infection with SARS-CoV-2 in the three months following infection.		
Pediatric mental health, Italy	16-Aug-20	Where Have All the Emergency Pediatric Mental Health Patients Gone During COVID19?	Acta Paediatrica	Brief Report	The novel coronavirus that results in COVID-19 has significantly impacted the global healthcare system and economy since first reported in December 2019. Many countries and states have enacted stay-at-home orders and implemented social distancing to mitigate disease transmission. One recent Italian study described delays in seeking pediatric emergency care for fear of COVID-19 infection, resulting in potentially avoidable ICU admissions and deaths. The study in this paper was performed at a tertiary care children's hospital in Portland, Oregon USA from April 1, 2019 to April 29, 2020, following the Oregon stay-at-home order on March 23, 2020. The objective of the study was to evaluate the overall pediatric ED volume relative to mental health specific volume since the Oregon stay-at-home order was implemented. Pediatric mental health patients were defined by using the most common subgroups of patients: suicidal or aggressive. The overall annual pediatric emergency department volume at this single center was 14,108 patients in 2019. After the March 23, 2020 stay-at-home order, there was a sharp decline to slightly under half the normal volume. Pediatric mental health visits showed a larger decrease. These results raise important questions and have significant implications for research and policy.	There have been declines in pediatric patients in emergency departments with regard to mental health. Youth and families may simply not be seeking care due to the pandemic, potentially leading to a higher acuity and more severe outcomes.	Sheridan DC, Cloutier R, Johnson K, Marshall R. Where Have All the Emergency Pediatric Mental Health Patients Gone During COVID19? [published online ahead of print, 2020 Aug 16]. Acta Paediatr. 2020;10.1111/apa.15537. doi:10.1111/apa.15537
Universal testing, pregnancy, labor and delivery, Los Angeles	16-Aug-20	Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Universal Testing Experience on a Los Angeles Labor and Delivery Unit	Obstetrics & Gynecology	Research Letter	The authors describe their experience after implementing universal testing for SARS-CoV-2 on all pregnant women admitted to their labor and antepartum units at the Cedars-Sinai Medical Center in Los Angeles USA on April 4, 2020. During the testing period, 82 pregnant women admitted to the obstetric unit were tested for SARS-CoV-2 infection, of whom 77 (94%) were admitted to the labor unit, and five (6%) were admitted to the antepartum unit. The authors observed that of the 82 patients admitted, two reported COVID-19 symptoms on intake, one of whom tested positive for SARS-CoV-2. Furthermore, none of the remaining 80 asymptomatic patients tested positive for SARS-CoV-2, and all remained symptom-free throughout their hospitalizations. Women tested for SARS-CoV-2 infection were treated as persons under investigation and placed on contact	The authors suggest that local rates of COVID-19 infection should guide universal testing. Alternatively, a trial period of universal testing may help determine whether such an approach makes sense for an individual labor and delivery unit.	Naqvi M, Burwick RM, Ozimek JA, Greene NH, Kilpatrick SJ, Wong MS. Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Universal Testing Experience on a Los Angeles Labor and Delivery Unit. Obstet Gynecol. 2020;136(2):235-236. doi:10.1097/AOG.0000000000003987

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					precautions while test results were pending. However, this led to the use of valuable personal protective equipment by all members of the treatment team and, in some cases, mother–newborn separation until test results were available. For these reasons, the authors discontinued universal testing after seven days because they could not justify continued testing of asymptomatic women in the absence of positive test results for SARS-CoV-2 infection.		
Pregnancy, hospitalization, ICU, outcomes, Italy	16-Aug-20	Clinical Findings and Disease Severity in Hospitalized Pregnant Women With Coronavirus Disease 2019 (COVID-19)	Obstetrics and Gynecology	Original Research	The authors conducted a prospective multicenter cohort study of pregnant women with SARS-CoV-2 infection who were admitted to 12 Italian maternity hospitals between February 23 and March 28, 2020. The study aimed to investigate the clinical evolution of COVID-19 in hospitalized pregnant women and potential factors associated with severe maternal outcomes. Included patients were admitted at any gestational age or within the third postpartum day with a diagnosis of SARS-CoV-2 infection, identified by a positive result on an RT-PCR assay of a maternal nasopharyngeal swab specimen. 77 patients were included in the study, 14 of whom had severe disease (18%). Two-thirds of the patients in the cohort were admitted during the third trimester, and 84% were symptomatic on admission. Of note, 11 patients underwent urgent delivery for respiratory compromise (16%), of whom nine underwent cesarean delivery. Furthermore, six patients were admitted to the ICU (8%), one patient underwent extracorporeal membrane oxygenation, and no deaths occurred. Also, preterm delivery occurred in 12% of patients, and nine newborns were admitted to the neonatal intensive care unit. The authors concluded that increased pregestational BMI and abnormal heart and respiratory rates on admission were associated with severe disease, and prematurity was the most prevalent adverse perinatal outcome.	This study on the clinical maternal evolution of SARS-CoV-2 infection among 77 hospitalized pregnant patients in Northern Italy showed that hospitalized pregnant women with COVID-19 infection are at increased risk for preterm birth and cesarean delivery.	Savasi VM, Parisi F, Patanè L, et al. Clinical Findings and Disease Severity in Hospitalized Pregnant Women With Coronavirus Disease 2019 (COVID-19). <i>Obstet Gynecol.</i> 2020;136(2):252-258. doi:10.1097/AOG.0000000000003979
Anxiety, depressive symptoms, mental health, pregnancy, sleep, Columbia	16-Aug-20	Attitudes and collateral psychological effects of COVID-19 in pregnant women in Colombia [Free Access to Abstract Only]	International Journal of Gynaecology and Obstetrics	Clinical Article	A cross-sectional web survey was carried out including 946 pregnant women in seven cities in Colombia who were evaluated during the mitigation phase of the SARS-CoV-2 pandemic between April 13 and May 18, 2020. The questions evaluated demographic, knowledge, psychological symptoms, and attitudes data regarding the COVID-19 pandemic. The rate of psychological consequences of the pandemic was much larger than the number of patients clinically affected by the virus, with 50.4% of the entire cohort reporting symptoms of anxiety, 49.1% insomnia, and 25% reporting depressive symptoms. Poorly informed women were more likely to be younger, covered by Colombian subsidized health insurance, and with lower levels of education. A high degree of psychological stress in pregnant women in	A cross-sectional web survey indicates that a high degree of psychological stress in pregnant women in Colombia might be associated with a gap in knowledge about the consequences of SARS-CoV-2 infection during pregnancy.	Parra-Saavedra M, Villa-Villa I, Pérez-Olivo J, et al. Attitudes and collateral psychological effects of COVID-19 in pregnant women in Colombia [published online ahead of print, 2020 Aug 16]. <i>Int J Gynaecol Obstet.</i> 2020. doi:10.1002/ijgo.13348

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					Colombia might be associated with a gap in knowledge about the consequences of SARS-CoV-2 infection during pregnancy.		
Maternal mortality, neonatal mortality, pregnancy	16-Aug-20	COVID-19 and maternal, fetal and neonatal mortality: a systematic review. [Free access to abstract only]	The Journal of Maternal-Fetal & Neonatal Medicine	Review Article	This review focuses on currently available evidence regarding maternal, fetal and neonatal mortality cases associated with COVID-19 infection, up to July 2020. The authors systematically searched PubMed, Scopus, Google Scholar and Web of Science databases to identify any reported cases of maternal, fetal or neonatal mortality associated with COVID-19 infection. Of 2815 studies screened, 10 studies reporting 37 maternal and 12 perinatal mortality cases (7 fetal demises and 5 neonatal deaths) were eligible for inclusion. All maternal deaths were seen in women with previous co-morbidities, of which the most common were obesity, diabetes, asthma and advanced maternal age. Acute respiratory distress syndrome (ARDS) and severity of pneumonia were considered as the leading causes of maternal mortalities. Fetal and neonatal mortalities were suggested to be a result of the severity of maternal infection or prematurity, respectively. There was no evidence of vertical transmission or positive COVID-19 test result among neonates who died. The currently available evidence suggested that maternal mortality mostly happened among women with previous co-morbidities and neonatal mortality seems to be a result of prematurity rather than infection.	Pregnant women and their fetuses and newborns do not seem to have an increased risk of mortality as compared with general population. Maternal mortality mostly happened to those with previous co-morbidities and neonatal mortality seems to be a result of prematurity rather than infection.	Hessami K, Homayoon N, Hashemi A, Vafaei H, Kasraeian M, Asadi N. COVID-19 and maternal, fetal and neonatal mortality: a systematic review [published online, 2020 Aug 16]. J Matern Fetal Neonatal Med. 2020;1-6. doi:10.1080/14767058.2020.1806817
Intensive care, ICU, pregnancy, maternal health, mortality, low- and middle-income countries, LMICs, Brazil	16-Aug-20	Increasing maternal mortality associated with COVID-19 and shortage of intensive care is a serious concern in low resource settings	Acta Obstetrica et Gynecologica Scandinavica	Letter to the Editor	A recent study by Collin et al. shows increased risk of requiring intensive care in pregnant or postpartum women with SARS-CoV-2 (RR: 3.49; 95% CI:1.89-6.52). In light of this, the author expresses concern of increased mortality risk in countries with low resources. A recent study reported a 3.4 times higher mortality in pregnant and postpartum women with COVID-19 in Brazil compared to reports in other countries. 27.7% of patients who died were not admitted to the ICU and 14.6% did not receive any type of ventilatory support, owing to the collapse of Brazilian health system. The author calls for universal COVID-19 testing for pregnant women and a lowered threshold for hospital admission and intensive care.	The author cites evidence of increased mortality in pregnant and postpartum women with COVID-19 in Brazil. Universal COVID-19 testing for pregnant women and a lowered threshold for hospital admission and intensive care are recommended.	Silveira Campos L, Caldas JMP. Increasing maternal mortality associated with COVID-19 and shortage of intensive care is a serious concern in low resource settings [published online, 2020 Aug 16]. Acta Obstet Gynecol Scand. 2020;10.1111/aogs.13975. doi:10.1111/aogs.13975
ACE2, COVID-19, fetal organs, placenta, protein expression, SARS-CoV-2, vertical transmission	15-Aug-20	Protein Expression of Angiotensin-Converting Enzyme 2, A SARS-CoV-2-specific Receptor, in Fetal and Placental Tissues	Ultrasound Obstetrics Gynecology	Original Research	The authors hypothesized that the low incidence of perinatal infection in SARS-CoV-2-infected pregnant women could be related to the low expression of angiotensin-converting enzyme 2 (ACE2) receptors in the fetoplacental unit. In May 2020, the authors performed immunohistochemical analyses for ACE2 in tissue samples from fetal organs and placentae from 5 cases of second- or third-trimester medical termination of pregnancy in healthy women (between 15- and 38-weeks gestation). They also evaluated two placentae, one from a 7-week spontaneous miscarriage in a non-infected woman and one from a	The authors evaluated protein expression of ACE2 at various gestational ages in both placenta and fetal organs from pregnancies not infected with SARS-CoV-2 and from a symptomatic SARS-CoV-2-infected pregnant woman. ACE2 was detected in fetal	Faure-Bardon V, Isnard P, Roux N, et al. Protein expression of angiotensin-converting enzyme 2, a SARS-CoV-2-specific receptor, in fetal and placental tissues throughout gestation: new insight for perinatal counseling. Ultrasound Obstetrics Gynecology. 2021;57(2):242-247. doi:10.1002/uog.22178

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		Throughout Gestation: New Insight for Perinatal Counseling			symptomatic pregnant woman positive for SARS-CoV-2 delivered by Cesarean section at 34 weeks gestation. Matching tissues from autopsies of four 8-year-old children were tested as controls. The results showed that ACE2 expression was detected in fetal kidneys, rectum, and ileum across gestation and similarly in the pediatric control. ACE2 was barely detectable in the lungs at 15 weeks gestation and not found thereafter. In the pediatric controls, ACE2 was only detectable in type 2 pneumocytes. No ACE2 expression was found in the cerebral ependymal, parenchyma, nor cardiac tissues. ACE2 was expressed in syncytiotrophoblast and cytotrophoblast from 7 weeks gestation onwards and across gestation but not in the amnion. The intensity and distribution of ACE2 staining in the placenta from the symptomatic SARS-CoV-2-infected pregnant woman was similar to that in the non-infected placentae. The authors concluded that the marked placental expression of ACE2 provides a rationale for vertical transmission at the cellular level. The absence of ACE2 expression in the fetal brain and heart is reassuring regarding the risk of congenital malformation.	kidneys, rectum, and ileum but absent in fetal brain and heart. The intensity and distribution of ACE2 staining in the placenta from the symptomatic SARS-CoV-2-infected pregnant woman was similar to that in the non-infected placentae.	
Histopathology, placenta, pregnancy, symptoms, New York, USA	15-Aug-20	Histopathologic evaluation of placentas after diagnosis of maternal severe acute respiratory syndrome coronavirus 2 infection	American Journal of Obstetrics & Gynecology MFM	Original Research	The authors conducted a retrospective cohort study of pregnant women with SARS-CoV-2 infection who delivered at the Long Island Jewish Medical Center, New York, USA, from April 9 to April 27, 2020, to determine if any significant placental histopathologic changes occur after the diagnosis of SARS-CoV-2 infection during pregnancy and whether these changes are correlated with the presence or absence of symptoms associated with the infection. They compared the histopathological characteristics of 50 placentas from SARS-CoV-2 infected pregnant women to 50 matched historical controls selected from a cohort of women who delivered six months before the study period. Histopathologic characteristics were also compared between placentas from patients with or without typical symptoms related to SARS-CoV-2 infection. The results showed that histopathologic findings, such as accelerated villous maturation or decidual vasculopathy, were not visualized in any of the placentas from patients with SARS-CoV-2 infection. Also, there was no statistically significant difference in maternal vascular malperfusion histopathologic characteristics, such as distal villous hypoplasia (4% vs. 2%), excessive infarction (8% vs. 8%), and old hemorrhage in membranes (2% vs. 4%), between the two groups. Furthermore, there was no difference in the placental histopathologic findings of SARS-Cov-2 infected pregnant women with or without symptoms.	Findings from this study did not reveal significant placental histopathologic changes in SARS-CoV-2 infected pregnant women compared with a gestational age-matched historical control group, as well as between SARS-CoV-2 pregnant women who were symptomatic vs. asymptomatic.	Gulersen M, Prasannan L, Tam HT, et al. Histopathologic evaluation of placentas after diagnosis of maternal severe acute respiratory syndrome coronavirus 2 infection. American Journal of Obstetrics & Gynecology MFM. 2020:100211. doi:10.1016/j.ajogmf.2020.100211

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Miscarriage, pregnancy loss, first trimester, pregnancy, maternal outcomes	15-Aug-20	Miscarriage Risk in COVID-19 Infection	SN Comprehensive Clinical Medicine	Letter to the Editor	In this letter, the authors highlight 2 cases of first trimester miscarriage in COVID-19 infected pregnant mothers in Sarawak, Malaysia. The first case suffered from a mild COVID-19 infection, with minimal respiratory symptoms 3 days prior to the onset of vaginal bleeding. Throughout her illness, she remained stable, with no clinical progression to severe disease. She was treated with hydroxychloroquine, which was initiated after the miscarriage occurred. The second case had an asymptomatic course of COVID-19 infection, which was diagnosed incidentally as a requirement policy for admission into a private medical center one week after she experienced light vaginal bleeding. She subsequently required surgical removal of retained products on conception but remained otherwise asymptomatic for COVID-19 and did not require treatment. Both cases had missed miscarriage diagnosed clinically around the time of COVID-19 infection (diagnosed based on nasopharyngeal RT-PCR swab). While the exact cause of the miscarriages could not be determined, SARS-CoV-2 infection as the causal factor could not be completely ruled out.	The authors describe 2 cases of first trimester miscarriage in pregnant women with asymptomatic or mild SARS-CoV-2 infection in Malaysia and indicate that while the exact cause of the miscarriages remains unknown, COVID-19 infection could have played a causal role.	Wong, T.C., Lee, Z.Y., Sia, T.L.L. et al. Miscarriage Risk in COVID-19 Infection. SN Compr. Clin. Med. 2, 1449–1452 (2020). https://doi.org/10.1007/s42399-020-00443-5
Speech disorders, articulation, cleft palate, telepractice, Mexico	15-Aug-20	Speech pathology telepractice for children with cleft palate in the times of COVID-19 pandemic	International Journal of Pediatric Otorhinolaryngology	Original Research	This study aimed to study whether providing Speech and Language Pathology (SLP) interventions by telepractice (TP) could effectively improve speech performance in children with cleft palate in Mexico. 43 children (mean= 7.04 years; range 4-12 years; SD = 2.59) with cleft palate were treated with TP intervention in 45 min sessions, 2x/week for one month. All children presented with velopharyngeal insufficiency and compensatory articulation (CA) after palatal repair. TP was provided in small groups (5-6 children) following the principles of the Whole Language Model. The severity of CA was evaluated by a standardized scale at the onset and the end of the TP period. At the onset of the TP intervention period, 84% of the patients demonstrated severe CA. At the end of the TP period, there was a significant improvement in the severity of CA ($p < 0.001$). The results of this study suggest that TP can be a safe and reliable tool for improving CA. Considering that the COVID-19 pandemic will radically modify the delivery of health care services in the long term, alternate modes of service delivery should be studied and implemented.	This study of the use of telepractice (TP) to improve speech performance in children with cleft palate in Mexico suggests that the use of TP may be an effective option for speech pathology treatment.	Pamplona MDC, Ysunza PA. Speech pathology telepractice for children with cleft palate in the times of COVID-19 pandemic [published online, 2020 Aug 15]. Int J Pediatr Otorhinolaryngol. 2020;doi:10.1016/j.ijporl.2020.11.0318
Pediatric, surgery, anesthesia, United States, COVID-19 testing	15-Aug-20	Pediatric Anesthesia During the Coronavirus Disease Epidemic One Pediatric Surgical	Pediatric Anaesthesia	Brief Report	This article discusses an American pediatric hospital that suspended elective surgeries early in the 2020 COVID-19 outbreak. When surgeries resumed in April 2020, a new plan for surgical and anesthesia care was established to protect patients and staff. A nursing team was trained for COVID-19 specimen collection, and access to testing equipment was established. Hospital staff frequently assessed local COVID-19 case prevalence	This article presents one American pediatric hospital's resumption of surgical care during the COVID-19 pandemic. It includes a COVID-19 Peri-operative Testing Decision	Tafoya S, Tumber S. Pediatric Anesthesia During the Coronavirus Disease Epidemic One Pediatric Surgical Hospital's Rapid Transition Back to Care [published online ahead of print, 2020 Aug 15]. Paediatr Anaesth.

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		Hospital's Rapid Transition Back to Care			and monitored availability of PPE, including N95 respirators. Surgery was often delayed 24-48 hours for COVID-19 testing, resulting in an urgency-based surgical schedule. The article includes a COVID-19 Peri-operative Testing Decision Tree to guide appropriateness of surgery and PPE recommendations. Generally, if a pre-operative COVID-19 test was positive or pending, alternate care plans were established, or airborne PPE was used if surgical cases were urgent. Under physician leadership, this pediatric hospital has been able to resume care while protecting patients and providers, conserving PPE, and lessening the potential for morbidity associated with receiving an anesthetic during the COVID-19 pandemic.	Tree to guide appropriateness of surgery and PPE recommendations.	2020;10.1111/pan.14000. doi:10.1111/pan.14000
MIS-C, cardiac, inflammation, children	15-Aug-20	Cardiac manifestations in SARS-CoV-2-associated multisystem inflammatory syndrome in children: a comprehensive review and proposed clinical approach	European Journal of Pediatrics	Review Article	Since mid-April 2020, there have been reports of pediatric cases of severe multisystem hyperinflammation linked with COVID-19. This article reviews the current literature and discusses the acute and follow-up management of patients with multisystem inflammatory syndrome in children (MIS-C). Patients with MIS-C commonly present with fever, gastrointestinal symptoms, and shock. Laboratory evaluation demonstrates elevated inflammatory markers and evidence of cytokine storm. A proportion of patients also present with hypotension and shock (20-100%) attributed to acute myocardial dysfunction and systemic hyperinflammation or vasodilation. Additionally, coronary artery dilation or aneurysms (6-24%) and arrhythmia (7-60%) have been linked to MIS-C presentation. During the acute stages of the syndrome, cardiac support, immunomodulation, and anticoagulation are used for management. Long-term follow-up is advised due to the unclear prognosis and potential of progressive cardiac manifestations in this pediatric population.	MIS-C is a novel pediatric multisystem inflammatory syndrome related to SARS-CoV-2 infection. Since cardiac manifestations of the syndrome are frequent, there is a need for careful clinical identification and long-term monitored follow-up.	Sperotto F, Friedman KG, Son MBF, VanderPluym CJ, Newburger JW, Dionne A. Cardiac manifestations in SARS-CoV-2-associated multisystem inflammatory syndrome in children: a comprehensive review and proposed clinical approach [published online ahead of print, 2020 Aug 15]. Eur J Pediatr. 2020;1-16. doi:10.1007/s00431-020-03766-6
ARDS, lung mechanics, surfactant, RDS, Pittsburgh, USA,	15-Aug-20	Lung Mechanics in COVID-19 Resemble Respiratory Distress Syndrome, Not Acute Respiratory Distress Syndrome: Could Surfactant Be a Treatment?	American Journal of Respiratory and Critical Care Medicine	Letter to the Editor	The authors sought to determine if the relatively well-preserved lung mechanics reported in COVID-19 patients with ARDS were similar to lung mechanics in RDS caused by surfactant deficiency. They reviewed data from pulmonary function testing performed at the Children's Hospital of Pittsburgh, USA, in neonates during the first week of life as part of an institutional review board-approved study of the natural course of respiratory failure in the neonatal period. The authors compared 12 prematurely born neonates who were mechanically ventilated because of respiratory distress syndrome (RDS group) with 13 term infants with ARDS due to meconium aspiration syndrome (MAS group) requiring extracorporeal membrane oxygenation. Ten term newborns without lung disease, who had been briefly intubated for procedures under anesthesia, served as controls. The authors evaluated lung function with the deflation flow-volume curve technique described in detail elsewhere. The results showed that	The authors' findings suggest that lung mechanics in premature infants with severe RDS caused by surfactant deficiency are similar to those observed in COVID-19 patients. However, whether early administration of exogenous surfactant could alter the course and severity in COVID-19 is not known.	Koumbourlis AC, Motoyama EK. Lung Mechanics in COVID-19 Resemble Respiratory Distress Syndrome, Not Acute Respiratory Distress Syndrome: Could Surfactant Be a Treatment?. Am J Respir Crit Care Med. 2020;202(4):624-626. doi:10.1164/rccm.202004-1471LE

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					in RDS, the lung volume and the respiratory system compliance adjusted for body weight were near normal, but they were severely decreased in MAS. Both conditions also showed very high airway conductance, probably due to a lack of surfactant. Therefore, the authors suggest a randomized controlled trial in adult patients to start with exogenous surfactant given as early as possible, and not as a rescue when the lungs had already suffered irreparable damage.		
Lifestyle, pregnancy, quality of life, quarantine, Spain	15-Aug-20	Analysis of the Impact of the Confinement Resulting from COVID-19 on the Lifestyle and Psychological Wellbeing of Spanish Pregnant Women: An Internet-Based Cross-Sectional Survey	International Journal of Environmental Research and Public Health	Original Article	The authors conducted an internet-based cross-sectional survey which collected information about adherence to the Mediterranean diet (MD), physical exercise, health-related quality of life (HRQoL), and perceived obstacles for pregnant women (in terms of exercise, preparation for delivery, and medical appointments) before and after the confinement. The survey was administered in May 18-31, 2020 and 90 pregnant women in Spain participated. The authors determined that the diet of approximately two-thirds of the participants was poorer than the national recommendations, but this population did not change their adherence to the MD. There was a significant decrease in the levels of physical activity ($p < 0.01$) as well as in HRQoL ($p < 0.005$). Furthermore, 54.2% of the participants were unable to continue or start their preparation for delivery, while 24.4% of those surveyed participated in online perinatal preparation classes.	The results of this study provide new data on the lifestyle changes made by pregnant women as a consequence of the confinement imposed because of COVID-19. Confinement significantly decreased levels of physical activity and health-related quality of life.	Biviá-Roig G, La Rosa VL, Gómez-Tébar M, et al. Analysis of the Impact of the Confinement Resulting from COVID-19 on the Lifestyle and Psychological Wellbeing of Spanish Pregnant Women: An Internet-Based Cross-Sectional Survey. Int J Environ Res Public Health. 2020;17(16):E5933. Published 2020 Aug 15. doi:10.3390/ijerph17165933
Histopathology, maternal vascular malperfusion, placental pathology, thrombosis	15-Aug-20	Histopathological Evaluation of Placentas After Diagnosis of Maternal SARS-CoV-2 Infection	American Journal of Obstetrics & Gynecology MFM	Original Research	The authors' objective was to determine if significant placental histopathological changes occur after the diagnosis of SARS-CoV-2 infection in pregnancy and whether these changes correlate with the presence or absence of symptoms. They conducted a retrospective cohort study of women with singleton gestations and laboratory-confirmed SARS-CoV-2 infection, who delivered at a single center (Long Island Jewish Medical Center, Northwell Health, Queens, NY USA) from April 9 to 27, 2020. Historical controls selected from a cohort of women who delivered six months before the study period were matched in a 1:1 fashion by week of gestation at delivery. Also, histopathological characteristics were evaluated in each placenta, and findings compared between the two groups, and between patients with or without typical symptoms related to infection. A total of 50 placentas with a diagnosis of maternal SARS-CoV-2 infection and 50 historical controls were analyzed. The results showed that histopathological findings such as decidual vasculopathy were not visualized in any placentas from patients with SARS-CoV-2 infection. Furthermore, there was no statistically significant difference in maternal vascular mal-perfusion histopathological characteristics between the two groups. Therefore, these data	The authors suggest that pregnancies with SARS-CoV-2 infection may be managed based on clinical findings alone, as findings from placental pathology warranting increased or different surveillance were not demonstrated in this study.	Gulersen M, Prasannan L, Tam HT, et al. Histopathological evaluation of placentas after diagnosis of maternal SARS-CoV-2 infection [published online ahead of print, 2020 Aug 15]. Am J Obstet Gynecol MFM. 2020;100211. doi:10.1016/j.ajogmf.2020.100211

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					suggest no increased risk of significant placental histopathological changes after SARS-CoV-2 infection in the third trimester regardless of the presence or absence of symptoms.		
OB-GYN emergency department, emergency services, self-referral, pregnancy, Italy	15-Aug-20	Obstetrics and Gynecology Emergency Services during COVID-19 pandemic	American Journal of Obstetrics & Gynecology	Research Letter	Obstetrics and Gynecology Emergency Departments (OB-GYN EDs) observed variable attendance during the COVID-19 pandemic. The authors conducted a retrospective study at a hospital in Bologna, Italy during the same periods in 2019 and 2020 (March 1-31) to estimate the number of women who self-referred to OB-GYN EDs and explore changes in admission before and during the epidemic. Self-referrals were significantly reduced from 972 women during March 2019 to 484 women during March 2020 (50.2% reduction, p<0.001). Additionally, despite lower patient admissions, the hospitalization rates were higher in 2020 suggesting that women went to the hospital for more serious problems during the pandemic (37.7% hospitalized in 2019 vs 46.7% hospitalized in 2020, p<0.001). The authors conclude by suggesting that these findings are representative of indirect evidence for the overuse of emergency services under normal circumstances, but could also be a function of fear concerning COVID-19 and delaying medical care.	Obstetrics and Gynecology Emergency Departments (OB-GYN EDs) in Bologna, Italy observed reduced admission during the COVID-19 pandemic but saw more hospitalizations during this period. The authors outline findings of indirect evidence on the overuse of OBGYN-EDs under normal circumstances.	Salsi G, Seidenari A, Diglio J, et al. Obstetrics and Gynecology Emergency Services during COVID-19 pandemic [published online ahead of print, 2020 Aug 15]. Am J Obstet Gynecol MFM. 2020;100214. doi:10.1016/j.ajogmf.2020.100214
Screening, intrapartum, pregnancy, labor, obstetric, newborn, USA, New York	15-Aug-20	Testing of Patients and Support Persons for Coronavirus Disease 2019 (COVID-19) Infection Before Scheduled Deliveries	Obstetrics and Gynecology	Original Research	This observational study evaluated both the rate of asymptomatic COVID-19 infection in obstetric patients, and concordance/discordance of infection between patients and support persons. The study included women scheduled for delivery at Mount Sinai Health system in New York City, USA from 4 to 15 April 2020. After screening negative for symptoms via phone, patients and support persons received a SARS-CoV-2 test one day before hospital admission. A total of 155 patients and 146 support persons were tested. Twenty-four (15.5%) of patients and 14 (9.6%) of support persons tested positive. Of the patients positive for SARS-CoV-2, 58% of their support persons were positive, while <3% of support persons were positive when the patients tested negative, giving a 7.5% discordance rate among pairs. These findings show that universal testing of obstetric patients and support persons has implications for COVID-19 exposure of newborns and healthcare workers. Test results could inform appropriate PPE use, and education on infant contact and breastfeeding. The study also demonstrates that symptom screening tools may miss a significant number of COVID-19 positive individuals.	In a New York City hospital, 15.5% of asymptomatic obstetric patients and 9.6% of asymptomatic support persons tested positive for SARS-CoV-2 infection. These findings have implications for exposure of newborns and healthcare workers.	Bianco A, Buckley AB, Overbey J, et al. Testing of Patients and Support Persons for Coronavirus Disease 2019 (COVID-19) Infection Before Scheduled Deliveries. Obstet Gynecol. 2020;136(2):283-287. doi:10.1097/AOG.0000000000003985

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Pediatric fractures	15-Aug-20	Where Have All the Fractures Gone? The Epidemiology of Pediatric Fractures During the COVID-19 Pandemic [Free Access to Abstract only]	Journal of Pediatric Orthopaedics	Original Article	During the COVID-19 pandemic, public health measure to encourage social distancing have been implemented, including the cancellation of school and organized sports. The authors of this study used a retrospective cohort study to examine the impact of the COVID-19 pandemic on fracture incidence and characteristics. They compared the acute fractures presenting to a single level I pediatric trauma hospital during the COVID-19 pandemic (03/15/2020-04/15/2020) with fractures during a pre-pandemic period at the same institution (03/15/2018-04/15/2018, 03/15/2019-04/15/2019). There was a significant decrease in the incidence of fractures presenting in the institution during the pandemic ($p<0.001$) and the presenting age for all fractures decreased during the pandemic ($p<0.001$) most likely due to decreased fracture burden among adolescents. There were significantly more injuries occurring at home ($p<0.001$) or on bicycles ($p<0.001$), and significantly less injuries occurring on playgrounds ($p<0.001$) or those related to sports ($p<0.001$). Overall, pediatric fracture volume has decreased and given the rising proportion of bicycling injuries, the authors suggest that an emphasis on basic safety precautions could improve public health. It is also possible that lower trauma volume may allow redeployment of orthopedic surgeons and staff to other clinical areas.	Pediatric fracture volume has decreased 2.5-fold during the COVID-19 pandemic, partially because of cessation of organized sports and decreased playground use.	Bram JT, Johnson MA, Magee LC, et al. Where Have All the Fractures Gone? The Epidemiology of Pediatric Fractures During the COVID-19 Pandemic. J Pediatr Orthop. 2020;40(8):373-379. doi:10.1097/BPO.0000000000001600
Maternal health, maternity care, Europe	15-Aug-20	The impact of the coronavirus (COVID-19) pandemic on maternity care in Europe	Midwifery	Editorial	In this editorial, the authors consider the impact that COVID-19 has had on maternity care in Europe and draw on first-hand accounts from colleagues and clinicians in several affected countries to examine similar or different responses. Commonalities include concerns around PPE, high numbers of healthcare staff affected by the virus, and steps taken to reduce pregnant women's exposure to health settings by switching to online and telephone consultations where possible. Differences emerge in how labor care and choice of delivery location have been planned, the reductions in antenatal and postnatal 'face to face' care provision, and in promotion of skin to skin contact and breastfeeding for COVID-19 positive women following birth. While there is evidence suggesting that pregnancy does not increase the likelihood of developing COVID-19 complications and that vertical transmission appears to be unusual, the authors conclude that additional evidence is needed to definitively support these early indications.	In this editorial, the authors describe the impact that COVID-19 has had on maternity care in Europe, and examine how those countries most affected have had similar or different responses. They argue that COVID-19 will affect maternity care for the foreseeable future.	Coxon K, Turienzo CF, Kweekel L, et al., The Impact of the Coronavirus (COVID-19) Pandemic on Maternity Care in Europe. [published online, 2020 Aug 15]. Midwifery. doi:https://doi.org/10.1016/j.midw.2020.102779
ACE-2, placenta, fetal, congenital malformation	15-Aug-20	Anatomical and timely assessment of protein expression of	Ultrasound in Obstetrics and Gynecology	Original Research	It is unknown if maternal SARS-CoV-2 infection can lead to vertical transmission and fetal organ damage. Decreased expression of the SARS-CoV-2 receptor, ACE2, in the fetal-placental unit may contribute to the lower incidence of observed perinatal infection. This study used immunochemistry to	At a cellular level, ACE-2 protein expression in the placenta supports the potential for vertical transmission of SARS-CoV-	Faure-Bardon V, Isnard P, Roux N, et al. Anatomical and timely assessment of protein expression of angiotensin-converting enzyme 2, SARS-CoV-2 specific

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		angiotensin-converting enzyme 2, SARS-CoV-2 specific receptor, in fetal and placental tissues: new insight for perinatal counseling			characterize ACE2 protein expression in the placentas and fetal organs of uninfected pregnancies. Placentas from healthy women undergoing medical termination of pregnancy between 18 to 34 weeks and the corresponding paraffin-embedded fetal tissues of the kidney, brain, lungs, intestinal tract, and heart were stained for ACE2 protein expression (n=5). Matching tissue samples from 8-year-old children were used as positive controls (n=4). Placentas from a 7-week miscarriage (n=1) and a symptomatic SARS-CoV-2 pregnant at 34 weeks (n=1) were also examined. ACE2 expression was detected in the fetal kidney, rectum, and ileum across gestation, as well as, in the pediatric control groups. After 15 weeks of gestation, ACE2 was undetectable in the fetal lungs. Additionally, there was no ACE2 expression in the fetal cerebral ependymal, parenchyma, or cardiac tissue. Within the placenta, ACE2 was expressed in the syncytiotrophoblasts and cytotrophoblasts after 7 weeks but not observed in the amnion. There was comparable intensity and distribution of ACE2 expression between the placentas from the infected and uninfected pregnancies.	2. However, the absence of ACE-2 expression in the fetal brain and heart provides reassurance regarding the low risk of potential congenital malformation.	receptor, in fetal and placental tissues: new insight for perinatal counseling [published online ahead of print, 2020 Aug 15]. <i>Ultrasound Obstet Gynecol.</i> 2020;10.1002/uog.22178. doi:10.1002/uog.22178
Obstetrical patients, pregnant women, antenatal care, Boston, United States	14-Aug-20	Association Between Number of In-Person Health Care Visits and SARS-CoV-2 Infection in Obstetrical Patients	The Journal of the American Medical Association (JAMA)	Research Letter	The authors conducted a case control study to estimate the risk of contracting SARS-CoV-2 infection among pregnant women making antenatal visits to 4 hospitals in Boston, USA from April-June 2020. There were 111 (3.7%) pregnant women who tested positive for SARS-CoV-2 infection. Of these, 45 tested positive for SARS-CoV-2 infection antenatally and 66 tested positive at the time of admission for labor and delivery. The authors matched 93 cases with 372 control observations after excluding some patients from analysis. The mean number of in-person visits was 3.1 (SD: 2.2; range: 0-10) for cases and 3.3 (SD: 2.3; range: 0-16) for controls. For the association between the number of in-person health care visits and SARS-CoV-2 infection, the odds ratio was 0.93 (95% CI: 0.80-1.08) per additional visit. The authors found that there was no meaningful association between the number of in-person health care visits and the rate of SARS-CoV-2 infection in this sample of obstetrical patients in the Boston area. The findings from this obstetrical population who had frequent in-person visits to a health care setting and underwent universal testing for SARS-CoV-2 infection suggest in-person health care visits were not likely to be an important risk factor for infection and that necessary, in-person care can be safely performed.	The authors conducted a case control study to estimate the risk of contracting SARS-CoV-2 infection among pregnant women making antenatal visits to 4 hospitals in Boston, USA from April-June 2020. The findings from this obstetrical population who had frequent in-person visits to a health care setting and underwent universal testing for SARS-CoV-2 infection suggest in-person health care visits were not likely to be an important risk factor for infection and that necessary, in-person care can be safely performed.	Reale SC, Fields KG, Lumbreras-Marquez MI, et al. Association Between Number of In-Person Health Care Visits and SARS-CoV-2 Infection in Obstetrical Patients. <i>JAMA.</i> 2020;324(12):1210-1212. doi:10.1001/jama.2020.15242
HDI, preparedness, elderly population, case	14-Aug-20	Are Child and Youth Population at Lower Risk of COVID-19	Child and Youth Services Review	Original Research	In this study, the authors show the impact of age composition on fatality differentials in European and South-East (SE) Asian countries, especially the percentage share of child and youth population. The authors conducted a secondary data analysis of	This study shows that COVID-19 case fatality rates are substantially high in highly developed	Ankita Zaveri N, Chouhan P. Are Child and Youth Population at Lower Risk of COVID-19 Fatalities? Evidences from South-

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fatality rate, Asia, Europe		Fatalities? Evidences from South-East Asian and European Countries			information compiled from UNDP, WHO, and Worldometers as of July 27, 2020. The case fatality rate (CFR) and the composite Z score technique were calculated to determine the countries' mortality differentials and the higher fatality risk countries. The study shows that COVID-19 CFR is substantially high in highly developed countries of the European region, while exceptionally low (<3%) in the SE Asian region except for Indonesia (4.85%). The authors classified the selected European and SE Asian Countries into three fatality risk zones: low, moderate, and high. Most of the European countries were under the high-risk zone (Risk Score 0.35-0.55). The authors attributed their findings to the higher proportion of child and youth population in SE Asian countries resulting in low CFR and low fatality risks.	countries of the European region compared to the South-East Asian countries. Authors explain that a higher proportion of child and youth population in SE Asian countries is the factor behind mortality differentials when compared to European countries.	East Asian and European Countries [published online ahead of print, 2020 Aug 14]. Child Youth Serv Rev. 2020;105360. doi:10.1016/j.childyouth.2020.105360
Infection, universal screening, pregnant	14-Aug-20	Universal screening for SARS-CoV-2 infection among pregnant women at Elmhurst Hospital Center, Queens, New York	medRxiv	Preprint (not peer-reviewed)	This article describes the results of a SARS-CoV-2 universal screening program at the Labor and Delivery (L&D) Unit at Elmhurst Hospital in Queens, NY USA, a 545-bed public hospital serving a diverse, largely immigrant and low-income patient population. A retrospective cross-sectional study was conducted on data from 126 pregnant women admitted from March 29 - April 22, 2020. Of these, 37% were positive, and of the women who tested positive, 72% were asymptomatic at the time of testing. Patients who tested positive for SARS-CoV-2 were more likely to be of Hispanic ethnicity (unadjusted difference 24.4 % points, 95% CI 7.9, 41.0) and report their primary language as Spanish (unadjusted difference 32.9 % points, 95% CI 15.8, 49.9) than patients who tested negative. The authors state that the rationale for universal screening was to ensure safety of patients and staff during an acute rise in SARS-CoV-2 infections. Women were roomed by their SARS-CoV-2 status, and postpartum counseling was tailored to infection status. The authors conclude that the experience at the Elmhurst Hospital was instructive for L&D units serving vulnerable populations.	Results of a universal screening program at a hospital in Queens, NY USA showed that a majority of the SARS-CoV-2-positive patients were asymptomatic. Additionally, as this hospital primarily serves a diverse, largely immigrant and low-income patient population, the authors noted that their patients that were positive for SARS-CoV-2 were more likely to speak Spanish than those who tested negative.	Maru S, Patil U, Carroll-Bennett R, et al. Universal screening for SARS-CoV-2 infection among pregnant women at Elmhurst Hospital Center, Queens, New York. medRxiv. 2020. doi: 10.1101/2020.08.12.20171694
Diarrhea, nucleic acid amplification test, pneumonia, diagnosis, Chinese traditional medicine, children, Wuhan, China	14-Aug-20	A child infected with severe acute respiratory syndrome coronavirus 2 presenting with diarrhea without fever and cough: A case report	Medicine (Baltimore)	Case Report	A 23-month-old boy presented with a 2-day history of diarrhea, and his chest CT showed pneumonia. After admission to the Wuhan Children's Hospital, China, the patient exhibited no diarrhea or other symptoms. The positive presence of SARS-CoV-2 was confirmed by 5 consecutive rounds of nucleic acid amplification testing (NAAT) of nasopharyngeal swabs. The patient was also found to have liver damage. The patient was treated with a Chinese traditional medicine prescription suitable for both the treatment of pneumonia and liver damage. Following the treatment, signs of pneumonia on CT were observed to be partially absorbed, and 2 consecutive rounds of NAAT of swab samples were negative. The patient was discharged on the 21st day after admission. After discharge, the	This case study of a 23-month old boy in China suggests that diarrhea could be a preliminary symptom of SARS-CoV-2 infection in children and that liver damage is a possible complication.	Liu Q, Zhang Y, Long Y. A child infected with severe acute respiratory syndrome coronavirus 2 presenting with diarrhea without fever and cough: A case report. Medicine (Baltimore). 2020;99(33):e21427. doi:10.1097/MD.00000000000021427

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					patient had no recurrence of disease or pulmonary lesions and had normal liver function. This case suggests that diarrhea could be a preliminary symptom of SARS-CoV-2 infection in children.		
Diaper erythema, neonates, oral candidiasis, thrombocytopenia , Romania	14-Aug-20	First neonates with severe acute respiratory syndrome coronavirus 2 infection in Romania: Three case reports	Medicine (Baltimore)	Case Report	3 newborns in Romania tested positive for SARS-CoV-2 infection. One of them presented bilateral decreased air entry, while the other 2 had no respiratory symptomatology. All 3 developed diaper erythema and oral candidiasis. The chest X-ray of the symptomatic patient revealed a medium degree of hilar parenchymal infiltration and a slight infiltration of the visceral pleura. The patients were admitted to the isolated neonatology ward of the University of Medicine and Pharmacy, Romania. All of them received antifungal treatment for oral candidiasis and topic cream for diaper erythema. The symptomatic patient also received prophylactic antibiotic therapy, human immunoglobulins, aminophylline, and parenteral nutrition. All 3 neonates were discharged after 2 consecutive negative tests for SARS-CoV-2. Even if there are only a few reported cases of neonates infected with COVID-19 and most of them present mild manifestations, newborns need careful insight because of the non-specific symptomatology.	3 newborn patients in Romania with SARS-CoV-2 presented with diaper erythema and oral candidiasis. Even if both were regarded as non-specific symptoms, their mention could be relevant as no other author has associated these 2 clinical entities with neonatal COVID-19 infection.	Dima M, Enatescu I, Craina M, Petre I, Iacob ER, Iacob D. First neonates with severe acute respiratory syndrome coronavirus 2 infection in Romania: Three case reports. Medicine (Baltimore). 2020;99(33):e21284. doi:10.1097/MD.00000000000021284
Complementary and alternative medicine, pulmonary function, pediatric massage, protocol	14-Aug-20	Pediatric massage therapy for restoring pediatric lung function from COVID-19: A protocol for systematic review and meta-analysis	Medicine (Baltimore)	Original Article	Given the rapidly growing pandemic of COVID-19 and the overwhelmed medical system, there is an urgent need for alternative medicine to help relieve pediatric respiratory symptoms during self-quarantine, and help increase chances of survival and recovery. This paper provides a protocol for a systematic review that will evaluate the existing evidence of pediatric massage therapy for restoring pediatric lung function from COVID-19. The authors will search the following electronic databases: Wanfang and Pubmed Database, CNKI, CENTRAL, CINAHL, EMBASE and MEDLINE until June 2020. The entire process will include study selection, data extraction, risk of bias assessment and meta-analyses. The outcomes will include the improvement of pulmonary function and adverse effects.	The authors summarize a protocol for systematic review and meta-analysis on the current evidence of pediatric massage in attenuating lung function in children recovering from COVID-19.	Zhou KL, Dong S, Wang K, et al. Pediatric massage therapy for restoring pediatric lung function from COVID-19: A protocol for systematic review and meta-analysis. Medicine (Baltimore). 2020;99(33):e21581. doi:10.1097/MD.00000000000021581
Treatment, dexamethasone, corticosteroids, antenatal, pregnancy, Los Angeles, USA	14-Aug-20	Preferential use of dexamethasone for fetal lung maturation in severe COVID-19	American Journal of Obstetrics & Gynecology MFM	Case Study	The effects of treating pregnant COVID-19 patients with corticosteroids remain largely unexplored due to concerns that their use could worsen maternal disease, despite benefits to the fetus. This case study details the use of dexamethasone in a pregnant COVID-19 patient at 30 weeks gestation with a history of obesity, anemia, and thrombocytopenia. Upon admission to the emergency department, the patient had symptoms of tachycardia, dyspnea, lymphopenia, hypoxemia, and elevated levels of CRP, D-dimer, and IL-6. As dyspnea worsened, she was transferred to the ICU. Due to concern for impending respiratory failure, dexamethasone was administered for fetal lung maturation to prepare for possible emergent delivery.	Pregnant patients with severe COVID-19 may benefit from receiving dexamethasone. The authors suggest a preferential use of dexamethasone over other corticosteroids in pregnant COVID-19 patients when preterm delivery is imminent.	Dellapiana G, Naqvi M, Leggett C, et al. Preferential use of dexamethasone for fetal lung maturation in severe COVID-19. Am J Obstet Gynecol MFM. 2020;100218. doi:10.1016/j.ajogmf.2020.100218

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					Dexamethasone administered using standard dosing over 48 hours showed a favorable response, and the patient was discharged home on hospital day 10 after delivery plans were discontinued. The patient also received tocilizumab and remdesivir, which have shown benefit for COVID-19 in pregnancy. The authors suggest a preferential use of dexamethasone when acceleration of fetal lung maturity is indicated for pregnant COVID-19 patients.		
Intrauterine infection, neonate, vertical transmission, China	14-Aug-20	Clinical features of neonates born to mothers with coronavirus disease-2019: A systematic review of 105 neonates	Journal of Microbiology, Immunology, and Infection	Original Research	In this systematic review, the authors analyze studies (n=14) of neonates (n=105) born to mothers with COVID-19. The rates of preterm neonates and those small for gestational age (SGA) were 25 (23.8%) and 10 (11.2%), respectively. Among 91 neonates who were tested, 8 (8.8%) were positive for nucleic acids or antibodies for SARS-CoV-2. Additionally, 28 (26.7%) of the neonates were symptomatic, and two test-negative neonates died, including one stillbirth. Neonatal symptoms included fever, tachypnea, shortness of breath, and vomiting. Between test-positive and test-negative groups, the rate of neonates who were symptomatic after birth was significantly different (62.5% vs. 20.5%, p = 0.008). However, the rates of SGA, preterm delivery, duration between maternal symptom onset and delivery, and perinatal complications were not significantly different. Based on the finding of positive tests in 8.8% of neonates, the risk of intra-uterine infection should be considered, though direct evidence of intra-uterine infection is scarce. Symptomatic neonates should receive tests for SARS-CoV-2 to initiate appropriate treatment and quarantine.	Most neonates born to SARS-CoV-2 infected mothers have favorable outcomes. Despite limited evidence of intra-uterine infection, the risk should still be considered, and symptomatic neonates should receive tests.	Chi H, Chiu NC, Tai YL, et al. Clinical features of neonates born to mothers with coronavirus disease-2019: A systematic review of 105 neonates [published online 2020 Aug 14]. J Microbiol Immunol Infect. 2020; S1684-1182(20)30182-1. doi:10.1016/j.jmii.2020.07.024
Singapore, telemedicine, telepsychiatry, pediatrics	14-Aug-20	Child and adolescent psychiatry telemedicine: A Singaporean experience born in Covid-19	Asian Journal of Psychiatry	Letter to the Editor	Singapore was one of the first Asian countries to be affected by the COVID-19 outbreak. When stringent measures were put in place by the Singapore government to control the outbreak, the essential role of psychiatry and psychological services remained unquestioned. The authors discuss a clinical case which demonstrates the utility of telemedicine services for youth mental healthcare during the pandemic. A 13-year-old student who was diagnosed with an episode of psychosis in September 2019 was successfully treated with telemedicine. After expressing anxiety about contracting the virus from attending face-to-face sessions at the hospital, telemedicine was offered to both the patient and his parent. He attended three telemedicine sessions, and his condition has been stable, and he has been able to cope with the challenges of home-based learning during school closure. Although telepsychiatry is one of the longest established forms of evidenced-based telemedicine, the authors note that it is still underused globally. There must be a continuous push from clinicians to optimize telehealth practice to ensure that its	The authors discuss how their Singaporean psychiatry consult service successfully adopted telepsychiatry during the COVID-19 pandemic. This enabled the continuous provision of pediatric psychiatric care while reducing unnecessary exposure to COVID-19.	Poon NY, Pat Fong S, Chen HY. Child and adolescent psychiatry telemedicine: A Singaporean experience born in Covid-19 [published online ahead of print, 2020 Aug 14]. Asian J Psychiatr. 2020;53:102336. doi:10.1016/j.ajp.2020.102336

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					delivery is comparable to the standard of care. As demonstrated by the clinical case, the advantages of telemedicine have facilitated the adoption of a safe and convenient model of mental health care during the current pandemic.		
Children, adolescent, hyperinflammation, immunosuppression, outcomes, MIS-C, Brazil	14-Aug-20	Severe clinical spectrum with high mortality in pediatric patients with COVID-19 and multisystem inflammatory syndrome	Clinics (Sao Paulo)	Article	This cross-sectional study included 66 pediatric patients (<18 years) with lab-confirmed SARS-CoV-2 in Sao Paulo (Brazil). 61 tested positive via NP swab and RT-PCR testing and 5 (7.5%) tested positive on serological tests. MIS-C was diagnosed in 6/66 (9%) patients [median age 7.8 years (0.01-17.62)]. The following symptoms and outcomes occurred with more frequency in patients with MIS-C vs those without: diarrhea, vomiting, and/or abdominal pain (67% vs. 22%, p=0.034); pediatric SARS (67% vs. 13%, p=0.008); hypoxemia (83% vs. 23%, p=0.006); arterial hypotension (50% vs. 3%, p=0.004); C-reactive protein levels >50 mg/L (83% vs. 25%, p=0.008); D-dimer levels >1000 ng/mL (100% vs. 40%, p=0.007); median D-dimer, troponin T, and ferritin levels (p<0.05); pediatric intensive care unit admission (100% vs. 60%, p=0.003); mechanical ventilation (83% vs. 7%, p<0.001); vaso-active agent use (83% vs. 3%, p<0.001); oxygen therapy (100% vs. 33%, p=0.003), intravenous immunoglobulin therapy (67% vs. 2%, p<0.001), aspirin therapy (50% vs. 0%, p<0.001), and current acute renal replacement therapy (50% vs. 2%, p=0.002); shock (83% vs. 5%, p<0.001); cardiac abnormalities (100% vs. 2%, p<0.001); and death (67% vs. 3%, p<0.001). MIS-C was significantly associated with gastro-intestinal manifestations (OR=10.98; 95%CI=1.20-100.86; p=0.034) and hypoxemia (OR=16.85; 95%CI=1.34-211.80; p=0.029).	A cross-sectional study of 66 pediatric patients (<18 years) in Sao Paulo (Brazil) with lab-confirmed SARS-CoV-2 compared symptoms and outcomes for patients with and without MIS-C. Results indicate severe clinical spectrum, high mortality rate, and a strong association with gastrointestinal involvement and hypoxemia for patients with MIS-C.	Pereira MFB, Litvinov N, Farhat SCL, et al. Severe clinical spectrum with high mortality in pediatric patients with COVID-19 and multisystem inflammatory syndrome. [published online, 2020 Aug 14]. Clinics (Sao Paulo). 2020;75:e2209. doi:10.6061/clinics/2020/e2209
Telemedicine, fetal anomaly, neonatology, USA	14-Aug-20	Prenatal neonatology telemedicine consultation for patients with fetal anomalies during the COVID-19 pandemic era: rapid implementation and lessons learned	Journal of Perinatology	Commentary	The COVID-19 pandemic caused a rapid shift to telehealth services as well as loosened governmental and regulatory oversight of telehealth restrictions. Obstetrical patients with pregnancies complicated by a fetal anomaly require multidisciplinary subspecialty consultation and prenatal follow-up. The authors provide commentary about the implementation of telemedicine services for these complex cases. Their neonatology group instituted telemedicine synchronous video outpatient consults at the University of Pittsburgh Medical Center for Advanced Fetal Diagnosis, USA. The two main barriers to effective consultation included the challenge of ensuring secure reliable teleconnection and creating a therapeutic relationship in the digital environment. However, patients positively noted that telemedicine was convenient, allowed them to have more family in attendance, and decreased the burden of finding childcare or paying for travel. There was a 100% attendance rate for neonatology telemedicine prenatal consults. Telemedicine	The shift to telemedicine during the COVID-19 pandemic increased access to health care and decreased the time and travel burden for patients and their families. Continued telemedicine advocacy may prove important to ensure access to high-quality care and the patient outcomes of telemedicine programs should be tracked.	Bishop CE, Jackson LE, Vats KR, Azuqa AA. Prenatal neonatology telemedicine consultation for patients with fetal anomalies during the COVID-19 pandemic era: rapid implementation and lessons learned [published online ahead of print, 2020 Aug 14]. <i>J Perinatol.</i> 2020;1-2. doi:10.1038/s41372-020-00787-9

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					provided an opportunity to increase access to neonatology care for patients with fetal anomalies.		
Diabetes, type 1 diabetes	14-Aug-20	A Diabetes and COVID-19 Dilemma: Balancing Parents' Health & Children's Education	Journal of Diabetes Science & Technology	Letter to the Editor	Type 2 diabetes mellitus is associated with increased mortality from COVID-19 infection, but less is known about the connection between COVID-19 and Type 1 diabetes (DM1). Parents with DM1 must decide whether to send their children to school during the pandemic. Individuals must balance the benefits of in-person schooling, with the risks of possible COVID-19 transmission to adults with chronic conditions. The authors obtained input from 32 health providers specializing in diabetes care. Eighteen (56%) of them recommended sending children to school if a parent had DM1, nine (28%) recommended keeping children home, and five (16%) were unsure. Younger providers generally favored sending children to school, but there was no consensus. Respondents discussed questionable public adherence to hygiene measures, and lack of evidence regarding COVID-19 and DM1.	Parents with Type 1 diabetes (DM1) must balance the benefits of sending their children to school in person, with the risks of possible COVID-19 infection. This is especially difficult, given the lack of information about the effects of COVID-19 on people with DM1.	Mehta PB, Rushakoff RJ. A Diabetes and COVID-19 Dilemma: Balancing Parents' Health & Children's Education [published online ahead of print, 2020 Aug 14]. <i>J Diabetes Sci Technol</i> . 2020;1932296820950287. doi:10.1177/1932296820950287
Pregnancy, postpartum, transmission, outcomes, Austria	14-Aug-20	COVID-19 During Pregnancy and Puerperium - A Review by the Austrian Society of Gynaecology and Obstetrics (OEGGG)	Geburtshilfe Frauenheilkd	Review Article	This review by the Austrian Society of Gynaecology and Obstetrics evaluates the scientific literature available until May 1, 2020 and discusses common questions about COVID-19 in the context of pregnancy and the postpartum period. The authors describe the evidence for their following conclusions: Pregnant women are not at greater risk of being infected by SARS-CoV-2 than the general population, maternal infection is not associated with an increased risk of malformation or miscarriage, and the risk of intra-uterine or perinatal transmission appears to be low even though a few individual cases of placental or neonatal infection have been described. In addition, the authors did not find evidence that vaginal delivery is detrimental or delivery by C-section is safer if COVID-19 is suspected or confirmed. Finally, they found that neonatal outcomes are overall positive with very low mortality and there is no evidence of viral transmission through breastmilk.	This review by the Austrian Society of Gynaecology and Obstetrics addresses most common questions about COVID-19 in the context of pregnancy and the postpartum period.	Klaritsch P, Ciresa-König A, Pristauz-Telsnigg G; board of the OEGGG . COVID-19 During Pregnancy and Puerperium - A Review by the Austrian Society of Gynaecology and Obstetrics (OEGGG). <i>Geburtshilfe Frauenheilkd</i> . 2020;80(8):813-819. doi:10.1055/a-1207-0702
SAH, pediatrics	14-Aug-20	Association of Pediatric COVID-19 and Subarachnoid Hemorrhage	Journal of Medical Virology	Letter to the Editor	Pediatric COVID-19 appears with mild symptoms and less severe complications than adults. However, the clinical course and complications related to COVID-19 in children are still unclear. The authors of this letter describe a 9-year-old boy who was hospitalized and intubated with cardiopulmonary arrest and a low Glasgow Coma Scale and COVID-19 symptoms. He had no past medical history, but close contact with a person who tested positive for COVID-19. Due to fixed and dilated pupils on the second day, a brain CT scan was performed and revealed symptoms of subarachnoid hemorrhage (SAH) and a reduction of white matter density in favor of brain edema. This presented case of pediatric COVID-19 developing SAH while he had no underlying neurological disease highlights that children are at risk of severe	The authors describe subarachnoid hemorrhage (SAH) as a severe neurological manifestation associated with pediatric COVID-19 and urge for rapid medical care of such patients.	Basirjafari S, Rafiee M, Shahhosseini B, Mohammadi M, Neshin SAS, Zarei M. Association of Pediatric COVID-19 and Subarachnoid Hemorrhage [published online ahead of print, 2020 Aug 14]. <i>J Med Virol</i> . 2020;10.1002/jmv.26434. doi:10.1002/jmv.26434

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					complications from COVID-19 and immediate medical care is required.		
Infertility, male, Pregnancy, Semen	14-Aug-20	Male Fertility and the COVID-19 Pandemic: Systematic Review of the Literature	World Journal of Men's Health	Review Article	COVID-19 infection is more common in males than in females. This article reviewed 24 original articles, to determine possible links between SARS-CoV-2 and male reproduction. The authors also conducted a Strengths-Weaknesses-Opportunities-Threats analysis of the evidence. Six of the reviewed studies evaluated semen samples from COVID-19 positive patients. In the combined total of 120 patients from the six studies, SARS-CoV-2 RNA was found in 5% (n=6) of the samples; all of the positive samples were from one study. Another report found altered semen parameters in patients with severe COVID-19 illness. Evidence was mixed regarding the effect of SARS-CoV-2 on male reproductive hormones, but testosterone was generally lower in COVID-19 positive patients. COVID-19 might be associated with preterm birth and low birth weight, but pregnancy outcomes appear less severe than with other coronaviruses. Assisted reproductive procedures are considered essential and time-sensitive, but their benefits need to be balanced with concern for COVID-19 transmission and reproductive complications.	COVID-19 infection could have negative effects on male reproduction and pregnancy outcomes, but current evidence is inconclusive. The authors urge caution regarding conception and assisted reproductive technology during the pandemic.	Khalili MA, Leisegang K, Majzoub A, et al. Male Fertility and the COVID-19 Pandemic: Systematic Review of the Literature [published online ahead of print, 2020 Aug 14]. <i>World J Mens Health</i> . 2020;10.5534/wjmh.200134. doi:10.5534/wjmh.200134
Pediatric, asthma, nebulizer, steroids.	14-Aug-20	Acute asthma management considerations in children and adolescents during the COVID-19 pandemic	Archives of Disease in Childhood	Original Article	Due to concerns over whether COVID-19 infection could spread by viral aerosolization during pediatric nebulized therapies, health care providers have considered alternative therapies for asthmatic children. However, evidence suggests that the risk of acquiring COVID-19 by administering nebulized therapy is low, and additional PPE is not recommended for this task. Alternative treatments that are not evidence-based include salbutamol and ipratropium bromide administered concurrently via metered-dose inhaler, and increased inhaled corticosteroid dosage. IV salbutamol, aminophylline, and magnesium sulfate should remain second-line treatments for severe asthma. Clinicians should continue to practice routine stepwise asthma management, including early administration of oral steroids. Patients should wash hands and equipment regularly, avoid sharing equipment, and continue to follow their pre-COVID-19 asthma treatment plans.	The risk of acquiring COVID-19 by administering pediatric nebulized therapy appears to be low. Clinicians should continue to practice routine stepwise management in the care of children with asthma.	Nagakumar P, Davies B, Gupta A. Acute asthma management considerations in children and adolescents during the COVID-19 pandemic [published online ahead of print, 2020 Aug 14]. <i>Arch Dis Child</i> . 2020;archdischild-2020-319391. doi:10.1136/archdischild-2020-319391
Spain, pediatric, point-of-care ultrasound (POCUS), ultrasound, pleural effusions, pericardial effusion	14-Aug-20	Short report - Usefulness of point-of-care ultrasound in pediatric SARS-CoV-2 infection	European Review for Medical and Pharmacological Sciences	Original Article	This article uses three cases to demonstrate the usefulness of point-of-care ultrasound (POCUS) in pediatric COVID-19 patients. The authors contend that POCUS offers both portable and high-quality imaging, in contrast to chest CT and X-ray. In all three cases, POCUS detected pleural and/or pericardial effusions, which may have been missed on X-ray. Consequently, the authors state that effusions may be more common in pediatric COVID-19 cases than previously thought. Cross-infection did not occur in any of the three presented cases. POCUS can also be used in	The authors present three cases to highlight the uses, benefits, and safety of POCUS imaging in the setting of pediatric COVID-19 infection.	Vazquez Martínez JL, Pérez-Caballero Macarrón C, Coca Pérez A, Tapia Moreno R, Otheo de Tejada E. Short report - Usefulness of point-of-care ultrasound in pediatric SARS-CoV-2 infection. <i>Eur Rev Med Pharmacol Sci</i> . 2020;24(14):7801-7803.

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					children with COVID-19 to optimize positive end-expiratory pressure management, check endotracheal intubation positioning, assess volemia and cardiac function, and perform neuro-monitoring.		doi:10.26355/eurrev_202007_22_284
Hubei, China, children, adolescents, transmission	14-Aug-20	Children with SARS-CoV-2 infection during an epidemic in China (outside of Hubei province)	Annals of Translational Medicine	Original Article	A limited number of studies have reported on clinical and epidemiological characteristics of children infected with SARS-CoV-2. The authors of this study conducted an observational, cross-sectional study in order to provide the epidemiological characteristics of children with COVID-19 throughout China (outside of the Hubei Province). The number of newborns (age 0 days – 28 days old), infants (age 28 days – 1 year old), younger children (age 1 year – 5 years old), and older children (age 5 years to 18 years old) accounted for 0.7%, 6.5%, 23.7%, and 69.2% of the total number of infected children, respectively. From 23 to 31 January 2020, infected children mainly came from Wuhan, China. After February 3, 2020, family clustering transmission became the main mode of transmission. Considering the mild symptoms in infected children, the possibility that children may be a source of the transmission should not be ignored.	More than half of all children infected with SARS-CoV-2 were between the ages of 5 years and 18 years old. Family clustering transmission is currently the main model of transmission in children, however further studies should be conducted to rule out other possibilities.	Xiao F, Chen B, Xiao T, Lee SK, Yan K, Hu L. Children with SARS-CoV-2 infection during an epidemic in China (outside of Hubei province). Ann Transl Med. 2020;8(14):849. doi:10.21037/atm-20-2908
School reopening, children, school attendance	14-Aug-20	Plans of US Parents Regarding School Attendance for Their Children in the Fall of 2020	JAMA Pediatrics	Original Investigation	As schools consider reopening for in-person instruction prior to availability of a COVID-19 vaccine, families may be weighing their priorities regarding school attendance. The authors of this investigation wanted to characterize the association of planned in-person school attendance during the COVID-19 pandemic with factors, including family socio-economic characteristics, and parent attitude and beliefs about their child’s school attendance. They collected data from June 2, 2020, to June 5, 2020 via a cross-sectional survey. The main outcome was parent-reported plan to send their child to school or keep their child home, conditional on their school opening for in-person instruction. The sample of 730 parents was balanced by parent sex (53% women) with oversampling for Black (28%; n = 201) and Hispanic (27%; n = 200) participants. In estimates weighted to US population norms, 31% of participants indicated they would probably or definitely keep their child home this fall, and 49% indicated that they would probably or definitely send their child to school this fall. Factors associated with planning to keep children home included lower income, being unemployed, and having a flexible job. Planning to keep children home was also associated with fear of COVID-19 (p < 0.001), fear of multisystem inflammatory syndrome (p=0.04), confidence in schools (p<0.001), and challenges of homeschooling (p=0.01). Race and ethnicity were not significantly associated with plans to keep children home. The authors recommend that schools need to act soon in order to address parental concerns and provide options for what will be	In the survey study of 730 US parents of school-aged children, 31% of parents indicated that they will probably or definitely keep their child home this fall if schools open for in-person instruction. Factors associated with planning to keep children home were lower household income, not being employed, and workplace flexibility.	Kroshus E, Hawrilenko M, Tandon P., et al. Plans of US Parents Regarding School Attendance for Their Children in the Fall of 2020. JAMA Pediatr. 2020. doi:10.1001/jamapediatrics.2020.3864

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					available to them should they opt to keep their child home. Structural barriers, such as lack of workplace flexibility and potential school-level inequities in implementation of preventative measures, must be acknowledged and addressed where possible.		
School, parental concerns, social inequity, technology, USA	14-Aug-20	Returning to School in the Era of COVID-19	JAMA Pediatrics	Editorial	This editorial highlights a recent study that evaluated parental opinions in the USA on sending their children back to school in the fall 2020. The survey aimed to explore parents' concerns on COVID-19, MIS-C, the school system, and virtual curriculums. Research has shown that Black, Latinx, and Native American students face inequities with access to devices, internet connection, and support navigating virtual school. These groups may also be disproportionately affected by COVID-19 as a result of inequitable social and health factors. Additionally, parents may face challenges due to socio-economic class and lack of flexibility in employment. Families that rely on schools for other resources including nutrition, physical activity, and health programs, may have a disadvantage when deciding between in-person or virtual platforms. Students that rely on special education services are also facing difficulties in maintaining this support remotely. The authors urge schools to address the concerns described in this article by collaborating with parents and health systems, such as public health departments and pediatricians, to ensure an equitable curriculum for all students navigating a virtual platform.	The authors suggest that parental opinions in the USA on sending their children back to school revolve around concerns with access and resources. They argue that it is vital to focus on equity between students when addressing these concerns.	Dooley DF, Simpson JN, Beers NS. Returning to School in the Era of COVID-19. 2020 Aug 14. JAMA Pediatr. 2020. doi:10.1001/jamapediatrics.2020.3874
Hospitalization, children, intensive care unit, USA	14-Aug-20	Hospitalization Rates and Characteristics of Children Aged <18 Years Hospitalized with Laboratory-Confirmed COVID-19 - COVID-NET, 14 States, March 1-July 25, 2020	Morbidity and Mortality Weekly Report	Report	Most reported cases of COVID-19 in children aged <18 years appear to be asymptomatic or mild, so less is known about severe COVID-19 illness requiring hospitalization in children. During March 1-July 25, 2020, 576 pediatric COVID-19 cases were reported to the COVID-19-Associated Hospitalization Surveillance Network (COVID-NET), a population-based surveillance system that collects data on laboratory-confirmed COVID-19-associated hospitalizations in 14 states in the USA. Infants aged <3 months accounted for 18.8% of all children hospitalized with COVID-19. The median patient age was 8 years (IQR = 9 months–15 years), and 50.7% were males. Among 91.3% children for whom race and ethnicity information were reported, 45.8% were Hispanic, 29.7% were black, 14.1% were white; 4.6% were non-Hispanic Asian or Pacific Islander; and 0.8% were non-Hispanic American Indian/Alaska Native. The cumulative COVID-19-associated hospitalization rate among children aged <18 years during the surveillance period was 8.0 per 100,000 population and was highest among children aged <2 years (24.8); rates were substantially lower in children aged 2–4 years (4.2) and 5–17 years (6.4). Weekly hospitalization rates among children increased steadily during the surveillance period (from 0.1 to 0.4	Analysis of pediatric COVID-19 hospitalization data from 14 states in the USA found that although the cumulative rate of COVID-19-associated hospitalization among children (8.0 per 100,000 population) is low compared with that in adults (164.5 per 100,000), one in three hospitalized children was admitted to an intensive care unit.	Kim L, Whitaker M, O'Halloran A, et al. Hospitalization Rates and Characteristics of Children Aged <18 Years Hospitalized with Laboratory-Confirmed COVID-19 - COVID-NET, 14 States, March 1-July 25, 2020. MMWR Morb Mortal Wkly Rep. 2020;69(32):1081-1088. Published 2020 Aug 14. doi:10.15585/mmwr.mm6932e3

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					per 100,000, with a weekly high of 0.7 per 100,000; trend test, $p < 0.001$). Among 208 (36.1%) hospitalized children with complete medical chart reviews, 69 (33.2%) were admitted to an ICU; 12 of 207 (5.8%) required invasive mechanical ventilation, and one patient died during hospitalization. Although the cumulative rate of pediatric COVID-19-associated hospitalization remains low (8.0 per 100,000 population) compared with that among adults (164.5 per 100,000), one in three hospitalized children was admitted to the ICU, similar to the proportion among adults. Continued tracking of SARS-CoV-2 infections among children is important to characterize morbidity and mortality. Reinforcement of prevention efforts is essential in congregate settings that serve children, including childcare centers and schools.		
Children, child abuse, lockdown, school closures, Birmingham, England, UK	14-Aug-20	Effect of covid-19 lockdown on child protection medical assessments: a retrospective observational study in Birmingham, UK.	medRxiv	Preprint (not peer-reviewed)	This retrospective observational study analyzed data from Birmingham Community Healthcare NHS Trust, which provides routine child protection medical examinations (CPME) for Birmingham, England. The authors sought to determine any change in referral patterns and outcomes in children (0-18 years) referred for CPME from late February to late June 2020 during the COVID-19 pandemic compared to 2018 and 2019. There were 78 CPME referrals in 2018, 75 in 2019 and 47 in 2020. This was a 39.7% (95%CI 12.4-59.0) reduction in referrals from 2018 to 2020, and a 37.3% (95%CI 8.6-57.4) reduction from 2019 to 2020. There were fewer CPME referrals initiated by school staff in 2020, 12 (26%) compared to 36 (47%) and 38 (52%) in 2018 and 2019 respectively. School closure due to COVID-19 may have posed a harm to children as occurrences of child abuse have gone unreported.	This retrospective study found a significant reduction in referrals for child protection medical examinations during COVID-19 lockdowns compared to 2018 and 2019 in Birmingham, England. School closures due to COVID-19 may have led to occurrences of child abuse going unreported, and there may be a significant increase in safeguarding referrals when schools fully re-open as children disclose abuse they have experienced at home.	Garstang J, Debelle G, Anand I, et al. Effect of covid-19 lockdown on child protection medical assessments: a retrospective observational study in Birmingham, UK [published online 2020 Aug 14]. medRxiv. 2020. doi:10.1101/2020.08.09.20170977
Pediatric, Kawasaki disease, CDC, MIS-C	14-Aug-20	COVID-19-Associated Multisystem Inflammatory Syndrome in Children - United States	Morbidity and Mortality Weekly Report	Report	Distinguishing patients with MIS-C from those with acute COVID-19 and other hyperinflammatory conditions is critical for early diagnosis and appropriate management, and for monitoring potential adverse events of a COVID-19 vaccine when one becomes widely available. As of 29 July 2020, 570 U.S. MIS-C patients meeting the CDC case definition had been reported. The most common signs and symptoms reported during illness course were abdominal pain (61.9%), vomiting (61.8%), skin rash (55.3%), diarrhea (53.2%), hypotension (49.5%), and conjunctivitis (48.4%). Substantial numbers of MIS-C patients had severe complications, including cardiac dysfunction (40.6%), shock (35.4%), myocarditis (22.8%), coronary artery dilatation or	Most cases of MIS-C have features of shock, with cardiac involvement, gastrointestinal symptoms, and significantly elevated markers of inflammation, with positive laboratory test results for SARS-CoV-2.	Godfred-Cato S, Bryant B, Leung J, et al. COVID-19-Associated Multisystem Inflammatory Syndrome in Children - United States, March-July 2020. MMWR Morb Mortal Wkly Rep. 2020;69(32):1074-1080. Published 2020 Aug 14. doi:10.15585/mmwr.mm6932e2

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					aneurysm (18.6%), and acute kidney injury (18.4%). The median patient age was 8 years (range 2 weeks–20 years). 55.4% were male, 40.5% were Hispanic, 33.1% were black, and 13.2% were white. Obesity was the most reported underlying medical condition, occurring in 30.5% of Hispanic, 27.5% of black, and 6.6% of white MIS-C patients. Health care providers should continue to monitor patients to identify children with a hyperinflammatory syndrome with shock and cardiac involvement. Suspected MIS-C patients should be reported to local and state health departments.		
Children, school attendance, USA	14-Aug-20	Plans of US Parents Regarding School Attendance for Their Children in the Fall of 2020: A National Survey	JAMA Pediatrics	Original investigation	This cross-sectional survey study sought to characterize the association of planned in-person school attendance during the COVID-19 pandemic in the USA with factors, including family socio-economic characteristics, and parent attitudes and beliefs about their child’s school attendance. Data were collected via an online survey from 730 parents from June 2-5, 2020. 31% (95% CI, 27% to 34%) of participants indicated they would probably or definitely keep their child home this fall, and 49% indicated that they would probably or definitely send their child to school this fall. Factors associated with planning to keep children home included lower income, being unemployed, and having a flexible job. Planning to keep children home was also associated with greater fear of COVID-19 (P <0 .001), greater fear of MIS-C (P =0 .04), lower confidence in schools (P <0 .001), and challenges of homeschooling (P = 0.01). Race and ethnicity were not significantly associated with plans to keep children home. In this survey study, many parents planned to keep children home in fall 2020. Schools need to act soon to address parental concerns and provide options for what will be available for them should they opt to keep their child home. Structural barriers, such as lack of workplace flexibility and potential school-level inequities in implementation of preventive measures, must be acknowledged and addressed where possible.	This survey sought to characterize plans for school in the fall of 2020 of parents in the USA, and found that planning to keep children home was associated with lower income, being unemployed, and having a flexible job as well as fear of COVID-19, fear of MIS-C, lower confidence in schools and challenges of homeschooling.	Kroshus E, Hawrilenko M, Tandon PS, Christakis DA. Plans of US Parents Regarding School Attendance for Their Children in the Fall of 2020: A National Survey [published online 2020 Aug 14]. JAMA Pediatr. 2020. doi:10.1001/jamapediatrics.2020.3864
Children, adolescents, school closure, anxiety, depression, stress	14-Aug-20	Psychological Impact of COVID-19 on Children and Adolescents: Is There a Silver Lining?	Indian Journal of Pediatrics	Letter to the Editor	Since the declaration of the COVID-19, there has been literature emerging about the possible psychological impact of the illness, lockdown, and quarantine among children. This article addresses the positive aspects of the COVID-19 pandemic and its result in school closures, including protection from bullying, drug abuse, and pressure of scholastic performance. Although these positive effects are unlikely to make a long-term impact, avoidance of these stressors can mediate anxiety, depression, and stress-related symptoms that occur amongst children and adolescents as a result of the pandemic.	The authors present a number of positive aspects related to the COVID-19 pandemic and resulting school closures that can mediate anxiety, depression, and stress-related symptoms amongst children and adolescents.	Chawla N, Sharma P, Sagar R. Psychological Impact of COVID-19 on Children and Adolescents: Is There a Silver Lining? [published online ahead of print, 2020 Aug 14]. Indian J Pediatr. 2020;1. doi:10.1007/s12098-020-03472-z

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Mothers, clinical outcomes, preterm infants, Wuhan, China	14-Aug-20	Managing Preterm Infants Born to COVID-19 Mothers: Evidence from a Retrospective Cohort Study in Wuhan, China	Neonatology	Original paper	This study aimed to clarify the management and characteristics of preterm infants born to COVID-19 mothers in Tongji Hospital in Wuhan, China. For patient management, a multidisciplinary team was consulted before delivery. The timing and mode of delivery and delivery site were determined based on the maternal and fetal risks. All neonates born to COVID-19 mothers were isolated immediately after birth. 6 preterm infants were admitted to this hospital between January 23 and March 19, 2020. Gestational age ranged from 28+5 to 36+3 weeks. 1 late preterm infant was delivered early due to maternal dyspnea from COVID-19. 5 infants were delivered by C-section. None had perinatal asphyxia. 2 infants required respiratory support due to respiratory distress syndrome and apnea of prematurity. No infants developed severe complications of prematurity and all were negative for SARS-CoV-2. With an expedited and adequate delivery protocol, less invasive treatment principle, and active infection precautions, the authors found a limited impact of COVID-19 mothers on preterm delivery and neonatal short-term outcomes. The risk of vertical transmission of SARS-CoV-2 is low in preterm infants born to COVID-19 mothers if appropriate management is implemented.	This study found that utilizing a comprehensive approach and multidisciplinary attendance, the clinical courses of the preterm infants were favorable, and the short-term outcomes were optimal.	Hu X, Gao J, Wei Y, et al. Managing Preterm Infants Born to COVID-19 Mothers: Evidence from a Retrospective Cohort Study in Wuhan, China [published online, 2020 Aug 14]. Neonatology. 2020;1-7. doi:10.1159/000509141
MIS-C, cardiovascular	13-Aug-20	Striking Similarities of Multisystem Inflammatory Syndrome in Children and a Myocarditis-Like Syndrome in Adults: Overlapping Manifestations of COVID-19	Circulation	Commentary	This article explains the similarities and differences between acute COVID-19 cardiovascular syndrome (ACovCS) and MIS-C. Based on the timeline reported in previous studies, the authors hypothesize that MIS-C might be attributable to a postinfectious inflammatory state that occurs several weeks after SARS-CoV-2 infection. Mucocutaneous symptoms, lymphadenopathy, coronary artery dilation, negative SARS-CoV-2 PCR with positive SARS-CoV-2 IgG, and absence of pneumonia are the common findings of MIS-C. In ACovCS, it is common to detect SARS-CoV-2 in PCR. However, cardiac complications can occur days to weeks after the SARS-CoV-2 infection or after pneumonia has improved, producing a biphasic illness and suggesting the possibility of a similar postinfectious inflammatory response that occurs in MIS-C. Other similarities between MIS-C and ACovCS include fever, cardiogenic shock, biventricular dysfunction, myocarditis, and elevated inflammatory markers. There are many similarities in clinical features between MIS-C in children and ACovCS in adults, suggesting related pathophysiology and spectrum of illness. The authors suggest a “COVID-19-associated cardiovascular complications” continuum that includes both diseases. This will consequently broaden the case definition of MIS-C in epidemiologic surveillance, emphasize the interchangeable natural history and therapeutics for both diseases, and facilitate the identification of shared mechanisms.	The authors explain the similarities and differences between acute COVID-19 cardiovascular syndrome (ACovCS) and MIS-C and suggest a “COVID-19-associated cardiovascular complications” continuum that includes both diseases.	Most ZM, Hendren N, Drazner MH, et al. Striking Similarities of Multisystem Inflammatory Syndrome in Children and a Myocarditis-Like Syndrome in Adults: Overlapping Manifestations of COVID-19. Circulation. 2021;143(1):4-6. doi:10.1161/CIRCULATIONAHA.120.050166

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Children, epidemiology, novel coronavirus	13-Aug-20	Ten key points about COVID-19 in children: The shadows on the wall	Pediatric Pulmonology	Review Article	With the aim of broadening knowledge of pediatric COVID-19 infection, this article presents a review of literature published from 1 January to 28 May 2020, including 92 peer-reviewed and pre-print non-peer-reviewed studies. The authors summarize 10 key points that characterize the disease in children. 1) The prevalence of COVID-19 in children is lower than in adults. Several studies suggest that children do not have a significant role in transmission. 2) Pediatric symptoms are generally mild, but further research is needed on PIMS and on vertical transmission. 3) Some markers to evaluate in a child with COVID-19 are lymphocytes, D-dimer, C-reactive protein, pro-calcitonin, and liver enzymes. However, specific recommendations for these tests are still needed. 4) The authors voice concern over pediatric radiation exposure from chest CT scans, with unknown medical benefit. 5) SARS-CoV-2 PCR testing of nasopharyngeal swabs has sub-optimal sensitivity. Serology could provide an alternative solution. 6) Children with COVID-19 might be coinfecting with other respiratory viruses and bacteria. 7) Due to the vulnerability of patients with chronic conditions, caution is recommended toward chronically ill children during the pandemic. 8) Although uncommon, some pediatric patients develop severe COVID-19 disease requiring intensive care. 9) The global case fatality rate for COVID-19 in children is low, but child mortality can occur. 10) Until recommendations are given on the best pharmacological approach for pediatric COVID-19, supportive care should be practiced.	With the aim of broadening knowledge of pediatric COVID-19 infection, this article presents a review of literature including peer-reviewed and pre-print non-peer-reviewed studies. The authors summarize 10 key points that characterize the disease in children.	Escosa-García L, Aguilera-Alonso D, Calvo C, Mellado MJ, Baquero-Artigao F. Ten key points about COVID-19 in children: The shadows on the wall. <i>Pediatr Pulmonol.</i> 2020 Aug 13;10.1002/ppul.25025. doi: 10.1002/ppul.25025. Epub ahead of print. PMID: 32790245; PMCID: PMC7436376.
Children, epidemiology, clinical characteristics, symptoms, Nigeria, Africa	13-Aug-20	Profile of children with COVID-19 infection: a cross sectional study from North-East Nigeria	Pan African Medical Journal	Original Research	This cross-sectional study was conducted in Bauchi State, North-East Nigeria, among 53 children 1.5-18 years of age (mean 12.63 years \pm 4.31), who had RT-PCR confirmed COVID-19 diagnosis. The authors sought to describe epidemiological and clinical characteristics of children with COVID-19, who accounted for 10.7% of all the cases recorded during this period in the region. The majority were asymptomatic (60.4%), while 32.1% and 7.5% had mild and moderate diseases, respectively. There were no cases of severe or critical disease (most were previously healthy without underlying illness or co-morbidity). The most common symptoms were cough (20.8%), fever (17%), and sneezing (15.1%). 5 children (9.4%) complained of loss of taste while anosmia was documented in 1 child (1.9%). The authors observed a significant relationship between age category and the presence of symptoms. Children younger than 10 years (pre-adolescents) were 5 times more likely to be symptomatic compared to those above age 10 ($p = 0.029$, 95% CI 1.08-21.56). The authors conclude that the majority of children with COVID-19 experience	The authors examined the epidemiological and clinical characteristics of 53 children in Nigeria with COVID-19. Most had mild or asymptomatic disease, and children younger than 10 years were 5 times more likely than older children to be symptomatic.	Adedeji IA, Abdu YM, Bashir MF, et al Profile of children with COVID-19 infection: a cross sectional study from North-East Nigeria. <i>Pan Afr Med J.</i> 2020 Aug 13;35(Suppl 2):145. doi: 10.11604/pamj.supp.2020.35.145.25350.

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					mild disease, and younger children may have greater vulnerability than older children.		
Pregnancy, neonatal, outcomes, clinical trials, breastfeeding, treatment	13-Aug-20	A Systematic Review of Treatment and Outcomes of Pregnant Women With COVID-19-A Call for Clinical Trials	Open Forum Infectious Diseases	Original Research	The authors performed a systematic literature review of PubMed/MEDLINE to identify cases of COVID-19 in pregnancy or the postpartum period and associated outcomes as of June 29, 2020. They also evaluated the proportion of COVID-19 clinical trials (from ClinicalTrials.gov) excluding pregnant or breastfeeding persons through June 29, 2020. The authors identified 11,308 reported cases of COVID-19 in pregnancy and the postpartum period from a total of 52 case reports, 44 case series, 25 prospective/retrospective cohort studies, three governmental or national reports, and two case-control studies. The most common symptoms reported were cough (24%) and fever (18%), and <5% were reported as entirely asymptomatic. Most cases were mild to moderate in severity (79%), and 21% were severe/critical and requiring ICU admission or intubation. Of note, maternal and neonatal survival was reassuring (98% and 99%, respectively), and neonatal disease was rare, with only 41 cases of possible neonatal SARS-CoV-2 infection reported. Of the 2351 ongoing COVID-19 therapeutic clinical trials, 1282 were enrolling persons of reproductive age, of which 65% excluded pregnant persons. Furthermore, pregnancy was an exclusion criterion for 69% of chloroquine/hydroxychloroquine, 80% of lopinavir/ritonavir, and 48% of convalescent plasma studies.	The authors observed favorable maternal and neonatal outcomes with COVID-19. However, the number of published reports of COVID-19 in pregnancy is limited, and many clinical trials excluded pregnant persons. The authors suggest establishing an international registry and pregnancy-specific adaptive clinical trials to identify safe and effective treatments.	Pastick KA, Nicol MR, Smyth E, et al. A Systematic Review of Treatment and Outcomes of Pregnant Women With COVID-19-A Call for Clinical Trials. <i>Open Forum Infect Dis.</i> 2020;7(9):ofaa350. Published 2020 Aug 13. doi:10.1093/ofid/ofaa350
Child, parent, emotion regulation, meaning making, pandemic, emergency	13-Aug-20	The Little Professor and the Virus: Scaffolding Children's Meaning Making During the COVID-19 Emergency	Frontiers in Psychiatry	Opinion Article	In the psychological child development state called the "Little Professor," children try to make meaning out of stimuli they receive from their environment. This stage cultivates strategies for intuition and prelogical thinking. Parental scaffolding of meaning-making processes helps children cope with stressful events such as the COVID-19 pandemic. Uncertainty about the virus and lack of a specific treatment can perpetuate fears in both adults and children. Infection prevention policies also restrict social relationships and habits, leading to negative psychological effects. These authors highlight four ways through which parents can guide children through the meaning-making process. First, adults should recognize their own emotions, and be aware of the non-verbal emotional cues they exhibit. By listening carefully to children's affective communications, adults can validate their feelings and foster trust and support. Adults should next use simple language and explanations to address children's fears and questions. Finally, adults can promote emotional expression and regulation by playing and drawing together with children.	Parental scaffolding of meaning-making processes helps children cope with stressful events such as the COVID-19 pandemic. These authors highlight ways through which adults can guide children through the meaning-making process.	Provenzi L, Baroffio E, Ligabue S, Borgatti R. The Little Professor and the Virus: Scaffolding Children's Meaning Making During the COVID-19 Emergency. <i>Front Psychiatry.</i> 2020;11:817. Published 2020 Aug 13. doi:10.3389/fpsy.2020.00817
Pediatric, infection, emergency	13-Aug-20	Out-of-hospital deaths among children during	British Medical Journal (BMJ)	Original Research Letter	In March 2020, the Helsinki University Hospital area (Finland) formed an epidemic hotspot and the government launched social distancing measures. The authors investigated the prevalence of	The authors investigated the out-of-hospital all-cause mortality and the	Harve-Rytsälä H, Puhakka L, Kuisma M, et al. Out-of-hospital deaths among children during

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department, mortality, prevalence, Finland		COVID-19 pandemic: Indicator of collateral damage?	Paediatrics Open		COVID-19 in children (0-15 years) presenting to an emergency department (ED) for infectious symptoms along with all-cause out-of-hospital mortality among children. A review of all pediatric emergency medical services (EMS) responses leading to on-scene death revealed there were 4 out-of-hospital deaths in 2 months (1 March to 30 April 2020) compared with 8 in the preceding 12 months. To assess the prevalence of COVID-19 in acutely ill children during the local epidemic peak (8 - 15 April 2020), the authors searched all 113 children presenting to a pediatric ED for any infectious symptoms. 3 of the 113 children (2.7%) were positive for SARS-CoV-2. Although the prevalence of COVID-19 was low in children requiring ED care for infectious symptoms, the number of sudden out-of-hospital deaths was noteworthy. The overall number of EMS contacts with children decreased by 18.0% compared with the previous 12 months, suggesting that seriously ill children may have delayed seeking care.	prevalence of COVID-19 in children seeking emergency department care for infectious symptoms in Finland. There was a noticeable increase in out-of-hospital deaths during the epidemic peak, which the authors attribute to evidence of delayed health care.	COVID-19 pandemic: indicator of collateral damage? BMJ Paediatrics Open 2020;4:e000763. doi: 10.1136/bmjpo-2020-000763
Vertical transmission, ACE2, placental, maternal, pregnancy	13-Aug-20	Comment on evidence for and against vertical transmission of severe acute respiratory syndrome coronavirus 2 (coronavirus disease 2019).	American Journal of Obstetrics and Gynecology	Letter to the editor	In this letter to the editor, the authors comment and expand on Lamouroux's discussion of vertical transmission of SARS-CoV-2. Lamouroux et al. 2020, reported a low frequency (1%) of serum SARS-CoV-2 RNA viral load and a low expression of ACE2 receptor in the maternal-fetal interface between 6-14 weeks' gestation. This provided support against the biologic plausibility of vertical transmission in the first trimester of pregnancy. Vertical transmission of maternal pathogens may occur transplacentally via amniotic fluid infection or an ascending infection. Presumably, for transplacental transmission to occur, maternal viremia would be required. Consistent with Lamouroux's statement that ACE2 is low in the first trimester, ACE2 RNA is developmentally regulated with low expression at 6-14 weeks' gestation. However, there is high expression at 24 weeks' gestation. In utero or congenital infection of SARS-CoV-2 via amniotic fluid has been suggested, with positive PCR results obtained from amniotic fluid. Placental infection has been demonstrated in a pregnancy with miscarriage in the 2 nd trimester. Whether in utero infection or placental infection is possible remains unclear, but the authors believe it appears plausible. They recommend translational, systemic evaluation demonstrating an infectious virus in paired maternal and infant tissues samples to better address the question of vertical transmission.	The authors provide comments on Lamouroux et al. 2020 and expand on the biological plausibility of vertical transmission of SARS-CoV-2. While they believe there is a lack of definitive evidence regarding in utero infection or placental infection, vertical transmission appears plausible. Systemic evaluation of infectious virus in paired maternal-infant samples is recommended.	Brion LP, Chan CS, Adhikari EH. Comment on evidence for and against vertical transmission of severe acute respiratory syndrome coronavirus 2 (coronavirus disease 2019) [published online ahead of print, 2020 Aug 13]. Am J Obstet Gynecol. 2020;S0002-9378(20)30850-4. doi:10.1016/j.ajog.2020.08.022
Pneumonia, computed tomography, outcome, pregnancy, China	13-Aug-20	Clinico-Radiological Features and Outcomes in Pregnant Women with	Infection and Drug Resistance	Original Research	The authors conducted a retrospective case-controlled study to review clinical features, serial chest CT findings, and outcomes in pregnant women with COVID-19 pneumonia. Twenty-one pregnant and 19 age-matched non-pregnant women with COVID-19 pneumonia were recruited from Xinhua Hospital affiliated to Shanghai Jiao Tong University School of Medicine and the	The authors observed that although lung involvement was more severe in pregnant women with COVID-19 pneumonia at presentation than in age-	Liu F, Liu H, Hou L, et al. Clinico-Radiological Features and Outcomes in Pregnant Women with COVID-19 Pneumonia Compared with Age-Matched Non-Pregnant Women. Infect

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		COVID-19 Pneumonia Compared with Age-Matched Non-Pregnant Women			Maternal and Child Health Hospital of Hubei Province, China, from January 23 to March 4, 2020. Four stages of CT images were analyzed and compared based on the time interval from symptom onset. The results showed that the initial absence of fever (62%) and normal lymphocyte count (52%) were more frequent in the pregnant group than in the age-matched non-pregnant women. The predominant patterns of lung lesions on chest CT were pure ground-glass opacity (GGO), GGO with consolidation or reticulation, and pure consolidation in both groups. However, pure consolidation at presentation was more common in the pregnant group. Of note, pregnant women experienced more severe disease progression and a slower recovery course than non-pregnant women. However, the length of hospitalization was similar in both groups and no patients died.	matched non-pregnant women, their outcomes were similar. Therefore, early detection, diagnosis, and timely obstetrical management are crucial for better maternal and fetal outcomes.	Drug Resist. 2020;13:2845-2854. Published 2020 Aug 13. doi:10.2147/IDR.S264541
Children, clinical characteristics, spectrum, ICD-10 code	13-Aug-20	Spectrum of COVID-19 in Children	Acta Paediatrica	Original Research	The authors describe the clinical characteristics and disease burden in children, 0 to 18 years of age, with a confirmed laboratory diagnosis of COVID-19 from January 20, 2020, to June 10, 2020. Information on symptoms and organ system involvement in 1353 children was obtained based on the International Classification of Diseases (ICD)-10 diagnosis codes from electronic medical records. The results showed that the most common symptoms were fever and cough. Interestingly, loss of smell/taste sensation was reported only in a minority of children, 11 years or older. Furthermore, most of the children had respiratory system involvement with acute upper respiratory infection being the most common diagnosis. Cardiac involvement was reported in 6.4% of children, while Kawasaki disease was reported in only 1.2% of children. However, the authors were unable to obtain data on the multisystem inflammatory syndrome in children (MIS-C) reported with COVID-19 due to the absence of an ICD-10 code for the disease.	This study on the spectrum of COVID-19 in children confirms multiple organ system involvement with only a minority of children requiring hospitalization with or without critical care.	Ranabothu S, Onteddu S, Nalleballe K, Dandu V, Veerapaneni K, Veerapandiyan A. Spectrum of COVID-19 in children. Acta Paediatr. 2020;109(9):1899-1900. doi:10.1111/apa.15412
Children, nasopharyngeal swabs, saliva, diagnosis	13-Aug-20	Diagnosis of COVID-19 Infection in Children: Less Nasopharyngeal Swabs, More Saliva	Acta Paediatrica	Letter to the Editor	The authors discuss the reasons why saliva is useful for testing for SARS-CoV-2 infection in children instead of nasopharyngeal (NP) swabs. According to the authors, the low positive rate of NP swabs and the difficulty of performing this procedure correctly in children may contribute to the low incidence of COVID-19 in this age group. Obtaining NP and throat swabs for testing for respiratory infections cause severe discomfort in children. Besides, the NP swab requires close contact between healthcare workers and patients, thus exposing healthcare workers to disease. Reports show that the positive rate of SARS-CoV-2 nucleic acid tests performed on saliva samples in adults with confirmed COVID-19 is higher than in NP swabs and feces. Furthermore, saliva contains secretions produced by the mucosa	The authors propose that saliva testing be considered as an alternative to nasopharyngeal swabs to detect SARS-CoV-2 infection in children.	Ruggiero A, Sanguinetti M, Gatto A, Attinà G, Chiaretti A. Diagnosis of COVID-19 infection in children: Less nasopharyngeal swabs, more saliva. Acta Paediatr. 2020;109(9):1913-1914. doi:10.1111/apa.15397

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					of the nasopharynx and from the lungs. Therefore, saliva represents a reliable tool to detect SARS-CoV-2 infection.		
Pediatrics, asymptomatic, testing, MIS-C, US	13-Aug-20	Which Pediatric Asymptomatic Patients Should Be Tested for COVID-19	Pediatric Annals	Letter to the Editor	The authors explored testing asymptomatic children for SARS-CoV-2 in the US. As of mid-July, 2020, children (< 18 years old) represented only 0.46% of the total number of COVID-19 cases in the US. However, in light of emerging MIS-C in pediatric patients, COVID-19 may pose a larger risk in children than originally hypothesized. Further, infected children are predominately asymptomatic, which poses a risk for community transmission. The authors administered a survey to pediatric emergency health care providers to assess for testing of pediatric patients for SARS-CoV-2. 85% of surveyed providers tested symptomatic patients and 95% tested children who were either admitted to the hospital and/or undergoing surgery. Only 40-45% of providers would test asymptomatic children who have a known exposure or are at high risk for complications. Inconsistent testing of asymptomatic children in communities that are reopening may give rise to an increase in COVID-19 incidence. The authors conclude that establishing consistent testing guidelines for pediatric asymptomatic patients among public health departments is crucial to ensuring reduced community transmission through asymptomatic vectors and to better understand MIS-C.	Among healthcare providers in the US, only 40-45% said they would test asymptomatic pediatric patients. The authors suggest that it is critical to establish consistent testing guidelines among local and state public health departments to reduce the risk of community transmission through asymptomatic vectors.	Pyle C, Finkel L. Which Pediatric Asymptomatic Patients Should Be Tested for COVID-19?. <i>Pediatr Ann.</i> 2020;49(8):e328. doi:10.3928/19382359-20200625-02
Transmission, psychiatric facility, adolescent	13-Aug-20	A well-controlled Covid-19 cluster in a semi-closed adolescent psychiatry inpatient facility	Clinical Microbiology and Infection	Letter to the Editor	The authors of this letter note that the role of asymptomatic children and adolescents in SARS-CoV-2 transmission is still unknown and represents a major question in time of schools reopening. They report a pauci-symptomatic SARS-CoV-2 positive 14-year-old boy in a semi-closed psychiatric inpatient facility. On day 0, the patient complained of a runny nose and no other symptoms. On day 1, SARS-CoV-2 antigenic test returned positive on a naso-pharyngeal swab. On day 13, an asymptomatic 14-year-old girl also tested positive. Some of the measures taken to prevent the spread within the semi-closed inpatient facility were: healthcare workers had to wear proper PPE before going into that bedroom, access to the bedroom was restricted for any other children, infected patient had to disinfect their hands with hydroalcoholic solution, social distancing was in place, and all materials related to that patient remained specific to the patient.	Managing SARS-CoV-2 pediatric risk and healthcare worker protection is complicated. The authors described a multidisciplinary management of 2 positive cases in a semi-closed child psychiatric inpatient facility.	Tilmanne A, De Crombrugge G, Al-Husni Al-Keilani M, Le Loc'h G, Delvenne V, Smeesters PR. A well-controlled Covid-19 cluster in a semi-closed adolescent psychiatry inpatient facility [published online ahead of print, 2020 Aug 13]. <i>Clin Microbiol Infect.</i> 2020;S1198-743X(20)30486-9.
Focal cerebral arteriopathy, vessel wall imaging, pediatrics, acute infarct	13-Aug-20	Vessel Wall Enhancement and Focal Cerebral Arteriopathy in a Pediatric Patient with Acute	American Journal of Neuroradiology	Research Article	The authors describe vessel wall imaging findings in a 13-year old female presenting with acute stroke in the setting of COVID-19 infection. The patient presented with fluctuating-but-persistent headaches, speech difficulty, and right-sided upper and lower extremity weakness for four days. She tested positive for SARS-CoV-2 qualitative antibodies one month before admission. Her initial vital signs were normal, and an initial head CT showed a	The findings from this study on vessel wall imaging may facilitate the specific diagnosis of focal cerebral arteriopathy (FCA) in children, and perhaps adults with COVID-19. The	Gulko E, Overby P, Ali S, Mehta H, Al-Mufti F, Gomes W. Vessel Wall Enhancement and Focal Cerebral Arteriopathy in a Pediatric Patient with Acute Infarct and COVID-19 Infection [published online ahead of print, 2020 Aug

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		Infarct and COVID-19 Infection			left frontal hypodensity concerning for ischemic infarct. Repeat testing for SARS-CoV-2 RNA by RT-PCR with a nasopharyngeal swab specimen was positive. Of note, vessel wall imaging targeted to the left middle cerebral artery M1 segment demonstrated wall thickening and marked concentric contrast enhancement at the stenosis site. In conjunction with the clinical presentation, these imaging features were consistent with focal cerebral arteriopathy (FCA) of childhood-inflammatory type. Clinically, the patient improved, and the neurologic examination was unremarkable at the time of discharge. A follow-up MRI examination had not yet been performed at the completion of this article. These results suggest FCA as a mechanism of SARS-CoV-2-related acute ischemic stroke in children, although it is unclear whether FCA is a significant cause of ischemic infarction in adults with COVID-19.	authors also note that steroid therapy may improve the outcome in FCA.	13]. AJNR Am J Neuroradiol. 2020;10.3174/ajnr.A6778. doi:10.3174/ajnr.A6778
Child, digital, education, framework, safeguarding, social care, Great Britain	13-Aug-20	Child safety, protection, and safeguarding in the time of COVID-19 in Great Britain: Proposing a conceptual framework [Free Access to Abstract Only]	Child Abuse & Neglect	Original Article	While the pandemic poses a risk to the lives and wellbeing of vulnerable groups, necessary public health measures taken to delay or limit the spread of the virus have led to challenges for prevention, family support, court processes, placement and alternative care. Although new approaches have been implemented to combat the consequences pandemic, there is no comprehensive safety net and the protection of vulnerable children is increasingly dependent on individualized and pathologizing practices. The authors consulted with education and social work professionals about their new framework which consists of two phases: pandemic and aspirational. This framework emphasizes a more holistic perspective of the vulnerability of the child and expands safeguarding policies beyond the programs of the UK government both during and after the pandemic. This framework illuminates the importance of interconnected sectors and multi-agency working, the need for resilient and adaptable support systems, and the need to promote the importance of children's rights and voices.	Despite the rhetoric of placing children and adolescents at the center of support systems, they continue to be obscured or invisible in much research, policy and the processes which intend to safeguard them. The authors propose a framework to address the challenges for children and adolescents as a consequence of COVID-19 in Great Britain.	Levine DT, Morton J, O'Reilly M. Child safety, protection, and safeguarding in the time of COVID-19 in Great Britain: Proposing a conceptual framework [published online ahead of print, 2020 Aug 13]. Child Abuse Negl. 2020;104668. doi:10.1016/j.chiabu.2020.104668
MIS-C, ACovCS, infection	13-Aug-20	The Striking Similarities of Multisystem Inflammatory Syndrome in Children and Myocarditis-like Syndrome in Adults: Overlapping Manifestations of COVID-19	Circulation	Review Article	Two less common clinical presentations of COVID-19 include MIS-C in children and acute COVID19 cardiovascular syndrome (ACovCS) in adults. These two syndromes are reported as distinct entities, but they have several overlapping clinical features, which suggests that these conditions may be due to related pathophysiology in two different age groups. By definition, MIS-C only occurs in individuals less than 21 years of age with a variety of symptoms ranging from fever and mucocutaneous disease (rash, conjunctivitis, oral lesions) to cardiac complications including elevated troponin and cardiogenic shock. Current hypotheses suggest that MIS-C is due to a post-infectious inflammatory state that occurs several weeks after a primary	The striking similarities between MIS-C and the ACovCS myocarditis-like syndrome suggest similar pathogenesis and a spectrum of illness from children to adults. The authors advocate for considering the spectrum of COVID-19 associated cardiovascular complications as a	Most ZM, Hendren N, Drazner MH, Perl TM. The Striking Similarities of Multisystem Inflammatory Syndrome in Children and a Myocarditis-like Syndrome in Adults: Overlapping Manifestations of COVID-19 [published online ahead of print, 2020 Aug 13]. Circulation. 2020;10.1161/CIRCULATIONAHA.120.050166.

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					infection with SARS-CoV-2. There is a range of diverse cardiac manifestations from acute coronary syndrome to a viral myocarditis-like syndrome which experts have termed ACovCS, which parallels MIS-C. In contrast to MIS-C, patients with ACovCS typically have a positive SARS-CoV-2 PCR from a nasal swab and the age range of these patients is between 20 and 60 years.	continuum which includes both MIS-C and ACovCS.	doi:10.1161/CIRCULATIONAHA.120.050166
Pregnancy, adverse outcomes, morbidity, mortality, MERS-CoV, SARS-CoV, transmission	13-Aug-20	Severe Coronavirus Infections in Pregnancy: A Systematic Review	Obstetrics and Gynecology	Review Article	The authors conducted a systematic literature review of case reports of MERS-CoV, SARS-CoV, and SARS-CoV-2 during pregnancy and summarized clinical presentation, course of illness, and pregnancy and neonatal outcomes. Among the 46 publications, eight publications described 12 cases of MERS-CoV infection in pregnancy, seven described 17 cases of SARS-CoV infection, and 31 described 98 cases of SARS-CoV-2 infection. Adverse pregnancy outcomes, including pregnancy loss, preterm deliveries, and small for gestational age, were observed among women whose pregnancies were complicated by MERS-CoV, SARS-CoV, or SARS-CoV-2 infection. The case fatality proportion for SARS-CoV-2 infection in pregnant women was 1%, which was near the range of 1.8–3.4% observed in the general population. Mother-to-child transmission of MERS-CoV or SARS-CoV was not observed in this review; SARS-CoV-2 RNA was detected in seven newborns, and IgM antibodies were detected in one newborn. The authors argue that vertical transmission of SARS-CoV-2 is possible, although the absolute or relative risk, clinical significance, and the route of transmission remain uncertain.	This systematic literature review of case reports of MERS-CoV, SARS-CoV, and SARS-CoV-2 during pregnancy summarizes the clinical presentation, course of illness, and pregnancy and neonatal outcomes.	Galang RR, Chang K, Strid P, et al. Severe Coronavirus Infections in Pregnancy: A Systematic Review. <i>Obstet Gynecol.</i> 2020;136(2):262-272. doi:10.1097/AOG.0000000000004011
Fomites, infection control, daycares, childcare, early childhood education, schools	13-Aug-20	Risk of fomite-mediated transmission of SARS-CoV-2 in child daycares, schools, and offices: a modeling study	medRxiv	Preprint (not peer-reviewed)	Conventional epidemiologic studies cannot distinguish between competing transmission pathways when they act simultaneously. The authors used transmission modeling to explore how fomite transmission varies by location (daycares, schools, and offices), disinfection strategy, and surface type (stainless steel, plastic, and cloth). SARS-CoV-2 can persist on surfaces, suggesting that handwashing alone is not sufficient. Hourly cleaning and disinfection alone could substantially reduce risk in office settings but is inadequate in daycares and schools. The authors suggest high frequency cleaning and decontamination of non-porous surfaces and direct intervention after high-risk shedding events (coughing or sneezing) to mitigate risk.	The authors used transmission modeling to explore how fomite transmission varies by location, disinfection strategy, and surface type. Specific recommendations for high-risk settings such as daycares and schools were provided.	Kraay ANM, Hayashi MAL, Berendes DM, Sobolik JS, Leon JS, Lopman BA. Risk of fomite-mediated transmission of SARS-CoV-2 in child daycares, schools, and offices: A modeling study. [published online, 2020 Jun 13]. medRxiv. doi: 10.1101/2020.08.10.20171629.
Pregnancy, passive immunity	13-Aug-20	A case report to assess passive immunity in a COVID positive pregnant patient	American Journal of Perinatology	Short Communication	The authors explore placental transfer of COVID-19 IgG antibodies during the gestational period through a case report of a 25-year-old woman with red blood cell (RBC) iso-immunization. At 26 weeks of gestation, she tested positive for SARS-CoV-2 by PCR in the presence of mild symptoms without fever or shortness of breath. SARS-CoV-2 specific IgG antibodies were detected at 27 weeks of gestation. Fetal blood samples tested negative for COVID-19 IgG at 27 and 31 weeks of gestation. Upon delivery at	The authors present a case in which maternal SARS-CoV-2 IgG antibodies were not found to cross the placenta. They discuss the possible link between the maternal immune	Toner LE, Gelber SE, Pena JA, et al. A Case Report to Assess Passive Immunity in a COVID Positive Pregnant Patient. 2020 Aug 13. <i>Am J Perinatol.</i> 2020. doi:10.1055/s-0040-1715643

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					33 weeks, an umbilical cord blood sample tested negative for COVID-19 IgG antibodies. The authors concluded that no placental transfer of COVID-19 antibodies occurred, but the findings may have been influenced by her RBC iso-immunization, which may hinder the transfer of antibodies. Existing studies among symptomatic pregnant women show some placental transfer of SARS-CoV-2 specific IgG antibodies, leading the authors to hypothesize on a relationship between disease severity and the maternal antibody response. Further research is warranted to explore diverse populations of pregnant women to better understand antibody dynamics in pregnant women with COVID-19.	response and disease severity.	
Racial inequity, ethnic inequity, health disparities, Hispanic women	13-Aug-20	Prevalence and Severity of Coronavirus Disease 2019 (COVID-19) Illness in Symptomatic Pregnant and Postpartum Women Stratified by Hispanic Ethnicity	Obstetrics & Gynecology	Research Letter	U.S. reports have demonstrated racial and ethnic inequities in COVID-19-related hospitalizations and deaths, maternal mortality, and severe maternal morbidity. The authors conducted a prospective cohort study of women who reported symptoms of COVID-19 infection while pregnant or within 2 weeks postpartum from March 6 to May 4, 2020. For those women who tested positive for SARS-CoV-2, the authors compared disease severity by ethnicity. 136 women were tested; 39 of 54 Hispanic women (72%) and 22 of 82 non-Hispanic women (27%) had positive test results (P<0.001). There were differences in baseline characteristics by ethnicity for women who were symptomatic and those with confirmed COVID-19 infection. The authors found that, although Hispanic women represent just 18% of this population, they accounted for more than 60% of all pregnant women hospitalized for COVID-19 infection to date. The authors note that without detailed demographic information, aggregated data may present an overly optimistic view that the COVID-19 infection curve has been flattened for all populations. This study demonstrates an urgent need for tailored approaches and mitigation strategies to slow the spread among vulnerable groups.	The authors identified inequities in SARS-CoV-2 infection between Hispanic and non-Hispanic pregnant women and warn that aggregated data may present an overly optimistic view that the COVID-19 infection curve has been flattened for all populations.	Goldfarb IT, Clapp MA, Soffer MD, et al. Prevalence and Severity of Coronavirus Disease 2019 (COVID-19) Illness in Symptomatic Pregnant and Postpartum Women Stratified by Hispanic Ethnicity. <i>Obstet Gynecol.</i> 2020;136(2):300-302. doi:10.1097/AOG.0000000000004005
Pregnancy, Cesarean Delivery, birth weights, Wuhan, China	13-Aug-20	Impact of Wuhan Lockdown on the Indications of Cesarean Delivery and Newborn Weights During the Epidemic Period of COVID-19	PLOS ONE	Research Article	In this retrospective study, the authors present the changes in the indications for cesarean delivery (CD) and the birth weights of newborns after the lockdown in Wuhan from 23 January 2020. Pregnant women who gave birth at the Maternal and Child Health Hospital of Hubei Province from 23 January 2020 to 14 March 2020 were enrolled as the observation group, while pregnant women who gave birth from 1 January 2019 to 22 January 2020 were selected as the control group. The authors compared the clinical characteristics, indications for cesarean delivery (CD), and newborn weights between the 3,432 pregnant women in the observation group and the 7,159 pregnant in the control group. The results showed that the difference in the	This study on the impact of the Wuhan lockdown on the indications of CD and newborn weights may provide useful information to guide management practices after a lockdown in other cities or countries, thus enabling better control of the rate of CD on maternal request, reducing fetal distress, and	Li M, Yin H, Jin Z, et al. Impact of Wuhan lockdown on the indications of cesarean delivery and newborn weights during the epidemic period of COVID-19. <i>PLoS One.</i> 2020;15(8):e0237420. Published 2020 Aug 13. doi:10.1371/journal.pone.0237420

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					overall rate of CD between the two groups was not statistically significant ($p>0.05$). Among the indications for CD, CD on maternal request and fetal distress were significantly more common in the observation group than in the control group ($p<0.05$). Furthermore, the neonatal birth weights in the observation group were higher than in the control group among those at ≥ 34 weeks gestation ($p<0.05$). However, there was no significant difference among neonates born at < 34 weeks gestation ($p>0.05$).	controlling newborn weights.	
Pregnant women, vertical transmission, preterm birth, C-section, obesity, USA	13-Aug-20	Characteristics and Outcomes of 241 Births to Women With Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Infection at Five New York City Medical Centers	Obstetrics and Gynecology	Original Research	In this prospective cohort study, 241 pregnant women (median age 32 years, range 18-47 years) with laboratory-confirmed SARS-CoV-2 infection were identified from five New York City medical centers, USA, from March 13th to April 12th, 2020. 61.4% of women were asymptomatic COVID-19 on admission. Throughout the delivery hospitalization, 26.5% of women met WHO criteria for mild COVID-19, 26.1% for severe, and 5% for critical. C-section was the mode of delivery for 52.4% of women with severe COVID-19 and 91.7% with critical COVID-19. The singleton preterm birth rate was 14.6%. Admission to the ICU was reported for 17 women (7.1%), and nine (3.7%) were intubated during their delivery hospitalization. There were no maternal deaths. 236 out of 245 liveborn neonates were documented SARS-CoV-2 test results and 97.5% tested negative for SARS-CoV-2 infection immediately after birth. Women of $BMI \geq 30$ were associated with COVID-19 severity ($p=0.001$). In conclusion, almost one-third of women who were asymptomatic on admission became symptomatic during their delivery hospitalization. The authors also concluded that obesity was associated with COVID-19 severity and disease severity was associated with higher rates of cesarean and preterm birth.	This prospective cohort study of 241 COVID-19 pregnant women conducted in the USA found that almost one-third of women who were asymptomatic on admission became symptomatic during their delivery hospitalization. Obesity was associated with COVID-19 severity and disease severity was associated with higher rates of cesarean and preterm birth.	Khoury R, Bernstein PS, Debolt C, et al. Characteristics and Outcomes of 241 Births to Women With Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Infection at Five New York City Medical Centers. <i>Obstet Gynecol.</i> 2020;136(2):273-282. doi:10.1097/AOG.0000000000004025
Maternal, perinatal, neonatal, vertical transmission	13-Aug-20	Rates of Maternal and Perinatal Mortality and Vertical Transmission in Pregnancies Complicated by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Infection: A	Obstetrics and Gynecology	Systematic Review	This review was conducted to investigate the frequency of maternal and neonatal complications, as well as maternal disease severity, in pregnancies affected by SARS-CoV-2 infection. The analysis was limited to reports with at least 10 pregnant patients with SARS-CoV-2 infection that reported on maternal and neonatal outcomes until April 29th, 2020 in MEDLINE, Ovid, ClinicalTrials.gov, MedRxiv, and Scopus. Of the 99 articles identified, 13 articles were included which contained 538 pregnancies (mean maternal age 30.2 years) complicated by SARS-CoV-2 infection, with reported outcomes on 435 (80.9%) deliveries. Maternal ICU admission occurred in 3.0% of cases (8/263, 95% CI 1.6–5.9) and maternal critical disease in 1.4% (3/209, 95% CI 0.5–4.1). No maternal deaths were reported (0/348, 95% CI 0.0–1.1). The preterm birth rate was 20.1% (57/284, 95% CI 15.8–25.1), the C-section rate was 84.7%	This systematic review found low rates of maternal and neonatal mortality and vertical transmission with SARS-CoV-2 and suggested that the preterm birth rate of 20% and the C-section rate exceeding 80% seems related to geographic practice patterns.	Huntley BJF, Huntley ES, Di Mascio D, Chen T, Berghella V, Chauhan SP. Rates of Maternal and Perinatal Mortality and Vertical Transmission in Pregnancies Complicated by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Infection: A Systematic Review. <i>Obstet Gynecol.</i> 2020;136(2):303-312. doi:10.1097/AOG.0000000000004010

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		Systematic Review			(332/392, 95% CI 80.8–87.9), the vertical transmission rate was 0.0% (0/310, 95% CI 0.0–1.2), and the neonatal death rate was 0.3% (1/313, 95% CI 0.1–1.8). This study showed there are low rates of maternal and neonatal mortality and vertical transmission with SARS-CoV-2 and suggested that the preterm birth rate of 20% and the C-section rate exceeding 80% seems related to geographic practice patterns.		
Intrapartum, cesarean section, pregnancy	13-Aug-20	More on Clinical Characteristics of Pregnant Women with Covid-19 in Wuhan, China	New England Journal of Medicine	Letter to the Editor	This letter is a response to an article by Chen et al., "Clinical Characteristics of Pregnant Women with COVID-19 in Wuhan, China," from the 18 June 2020 edition of New England Journal of Medicine. Per the letter, the original article described outcomes of 118 pregnant COVID-19 positive patients. 95% of births occurred via C-section, and 61% of the cesarean deliveries were performed without obstetric indications. The letter reminds readers that cesarean surgery poses substantial health risks, and therefore urges healthcare providers to practice judicious and evidence-based use of this procedure. The authors of the original article reply to the letter, and they review that the cases described occurred early in the pandemic, when COVID-19 was less understood. Ultimately, they agree with the sentiments shared in the letter, that cesarean delivery should be reserved for extreme cases and obstetric indication.	This letter reminds readers that cesarean surgery in COVID-19 positive patients should only be performed in the case of severe illness or obstetric indications.	Vouga M, Grobman WA, Baud D. More on Clinical Characteristics of Pregnant Women with Covid-19 in Wuhan, China. <i>N Engl J Med.</i> 2020;383(7):696-697. doi:10.1056/NEJMc2016881
Pediatric neuro-psychological evaluation, telehealth	13-Aug-20	Pediatric neuropsychological evaluation via telehealth: Novel models of care	The Clinical Psychologist	Research Article	As the coronavirus pandemic extends across the globe, the impacts have been felt across domains of industry. Neuropsychology services are no exception. Methods for neuropsychological assessments, which typically require an in-person visit, must be modified in order to adhere to social distancing and isolation standards enacted in an effort to slow the pandemic. The authors offer a novel, tiered telehealth model of care, successfully implemented in response to mandated social distancing, in a large, pediatric neuropsychology program. They describe the considerations and challenges to be addressed in transitioning a large neuropsychology department to a new model of care as well. It is important to focus on the patient and make sure to be flexible in meeting their needs.	The rapid transition to telehealth neuropsychological practice for children necessitated by the COVID-19 pandemic has stressed health care resources and brought about many new challenges. The authors argue that a telehealth visit offers parents understanding why a child may be having trouble, and provides ways to support their child's learning and behavior.	Pritchard AE, Sweeney K, Salorio CF, Jacobson LA. Pediatric neuropsychological evaluation via telehealth: Novel models of care [published online ahead of print, 2020 Aug 13]. <i>Clin Neuropsychol.</i> 2020;1-13. doi:10.1080/13854046.2020.1806359
Pediatric, Kawasaki disease, MIS-C, mucocutaneous lymph node	13-Aug-20	Three Cases of Pediatric Multisystem Inflammatory Syndrome Associated with	American Journal of Case Reports	Case Report	The authors describe a new presentation of COVID-19 infection in children consisting of multisystem inflammation with decreased left ventricular function and evidence of lung disease. Three children (ages 5-7 years old) in the USA presented with fever, conjunctivitis, dry and cracked lips, rash, and/or cervical lymphadenopathy for at least five days. Two of these children	The authors present three pediatric cases with a SARS-CoV-2 infection and multi-system inflammation. Two patients required intensive	Heidemann SM, Tilford B, Bauerfeld C, et al. Three Cases of Pediatric Multisystem Inflammatory Syndrome Associated with COVID-19 Due to SARS-CoV-2. [published online,

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syndrome, ECMO, USA		COVID-19 Due to SARS-CoV-2			required mechanical ventilation, one of whom additionally needed extracorporeal membrane oxygenation (ECMO) to support cardiorespiratory function. All had moderate to severe hyponatremia and lymphopenia, which is usually seen in COVID-19. They were treated with intravenous immunoglobulin and high-dose aspirin due to evidence for benefits for vasculitis in Kawasaki disease. All patients recovered. From these cases, the authors conclude that early recognition of children with multisystem inflammation during the COVID-19 pandemic is important because they are at increased risk for deterioration. The development of shock due to cardiac involvement may require ECMO.	support for respiratory function.	2020 Aug 13]. Am J Case Rep.doi:10.12659/AJCR.925779
Epidemiology, children, treatment, radiology, diagnosis, comorbidities	13-Aug-20	Ten key points about COVID-19 in children: the shadows on the wall	Pediatric Pulmonology	Review	Most of the literature on COVID-19 comes from adult patients as children seem to be less affected. However, defining the role of children in the transmission of SARS-CoV-2 is critical as infection control decisions involving children will impact the dynamics of the virus. This work presents an expert review of 243 peer-reviewed and pre-print non-peer-reviewed studies and relevant articles published from January 1 to April 20, 2020 related to COVID-19 in children (< 18 years). The authors summarize the literature in ten key areas: epidemiology, symptomology, laboratory testing, radiology, microbiological diagnosis, co-infections, comorbidities, severe and critical cases, mortality, and treatment.	This review summarizes peer-reviewed and non-peer reviewed literature published between Jan 1 and April 20, 2020 related to COVID-19 in children (< 18 years) and provides ten key points that characterize the disease's presentation.	Escosa-García L, Aguilera-Alonso D, Calvo C, et al. Ten key points about COVID-19 in children: The shadows on the wall. [published online, 2020 Aug 13]. Pediatric Pulmonology. doi: 10.1002/ppul.25025.
Children, prevalence, USA	13-Aug-20	Children and COVID-19: State-Level Data Report	American Academy of Pediatrics	Data Summary	This report collected data from the health department websites of 49 US states, New York City, the District of Columbia, Puerto Rico, and Guam to summarize pediatric COVID-19 data in the USA. Children comprise 406,109 total cases and 9.1% of cases across states reporting cases by age, for a rate of 538 cases per 100,000 children. Data on testing, hospitalizations, and mortality are summarized. Available data indicate that COVID-19 severe illness and associated hospitalization and death are uncommon in children. States should continue to provide detailed reports on COVID-19 cases, testing, hospitalizations, and mortality by age so that the effects of COVID-19 on children's health can be documented and monitored.	This report summarizes state-level data for children with COVID-19 in the USA. 406,109 total child COVID-19 cases were reported, and children represented 9.1% (406,109/4,486,830) of all cases with an overall rate of 538 cases per 100,000 children in the population.	Children and COVID-19: State Data Report [published online 2020 Aug 13]. American Academy of Pediatrics and the Children's Hospital Association.
Assisted reproductive technologies, infertility, reproduction	13-Aug-20	Impact of COVID-19 and other viruses on reproductive health	Andrologia	Review	The possible risk factors of COVID-19 infection on fertility comes from the abundance of angiotensin-Converting Enzyme-2 (ACE2), receptor entry of the virus, on testes, a reduction in important sex hormone ratios and COVID-19-associated fever. This review discusses the potential effect of COVID-19 on male fertility and talk about what needs to be done by the scientific community to tackle the limited understanding of the disease. The authors address what is known so far about the risk of COVID-19 on pregnancy, neonatal health and the vertical transfer of the virus	This review addresses the potential effect of COVID-19 on male fertility, pregnancy, neonatal health, and vertical transfer of the virus between mothers and their neonates.	Batiha O, Al-Deeb T, Al-Zoubi E, Alsharu E. Impact of COVID-19 and other viruses on reproductive health [published online ahead of print, 2020 Aug 13]. Andrologia. 2020;e13791. doi:10.1111/and.13791

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					between mothers and their neonates. Additionally, the authors discuss how assisted reproductive clinics can cope with the pandemic and what guidelines they should follow to minimize the risk of viral transmission.		
Culture, disparities, professional and training issues, race/ethnicity	13-Aug-20	Introduction to the Special Issue: Addressing Health Disparities in Pediatric Psychology	Journal of Pediatric Psychology	Journal Article	This introduction to the special issue on Addressing Health Disparities in Pediatric Psychology provides context for why this special issue is needed, reviews key findings of the accepted articles, and discusses future directions for advancing the field. This special issue addresses how the COVID-19 pandemic systemically infects Black, Indigenous, People of Color, and families of low income.	This introduction to the special issue on Addressing Health Disparities in Pediatric Psychology addresses disparities in health services and how the COVID-19 pandemic systemically impacts racial/ethnic minorities and families of low income.	Valrie C, Thurston I, Santos M. Introduction to the Special Issue: Addressing Health Disparities in Pediatric Psychology [published online ahead of print, 2020 Aug 13]. J Pediatr Psychol. 2020;jsaa066. doi:10.1093/jpepsy/jsaa066
Pneumonia, pediatrics, EVALI, pulmonology, infectious disease	12-Aug-20	A 16-Year-Old Boy With Cough and Fever in the Era of COVID-19	Pediatrics	Case Report	The authors present a 16-year-old boy with a history of chronic lung disease, asthma, and incidental lung nodules who presented in Texas (Spring 2020) with dry cough, shortness of breath, and fever. History revealed no recent travel. However, his mother was a health care worker and sick contacts included a friend with cold-like symptoms. He also had a variety of animals at home and a history of vaping tobacco products. Symptoms were associated with fatigue, chest tightness, abdominal pain, and myalgias. On examination, he was ill appearing and had tachycardia, tachypnea, hypoxia, and diminished breath sounds at the lung bases. A chest radiograph revealed bilateral lower lobe hazy infiltrates. He showed initial improvement over 48 hours with antibiotics, IV fluid resuscitation, oxygen, albuterol, and prednisone. Subsequently, he worsened with persistent high fever, respiratory distress, and severe persistent epigastric pain. As this patient's clinical course evolved, pulmonary medicine and infectious diseases services were consulted to guide diagnostic evaluation and treatment of this patient early in the era of COVID-19. The authors provide a question-and-answer session with consulting providers. Ultimately, after 4 negative SARS-CoV-2 PCR test results, the patient was diagnosed with electronic cigarette, or vaping, product use-associated lung injury (EVALI).	In this case report, the authors present a 16-year-old male in Texas, USA during the COVID-19 pandemic who presented with cough, shortness of breath, and fever. They provide a question-and-answer with consulting pulmonary and infectious disease specialists during the patient's clinical course. Ultimately, the patient was diagnosed with EVALI after 4 negative SARS-CoV-2 tests.	Anderson KR, Villafranco N, Hatzenbuehler Cameron L, et al. A 16-Year-Old Boy With Cough and Fever in the Era of COVID-19. Pediatrics. 2021;147(1). doi:10.1542/peds.2020-008235
Children, adolescents, transmission, infection control, school closures	12-Aug-20	COVID-19, children, and schools: overlooked and at risk	Medical Journal of Australia	Article	Seroprevalence and contact tracing studies show children are similarly vulnerable and transmit SARS-CoV-2 to a meaningful degree. The authors summarize the evidence suggesting school-aged children play a significant role in SARS-CoV-2 transmission and point out limitations of various contradicting studies. A study in South Korea indicated contacts of young pediatric index cases (<10 years) were less likely to become infected than those of adults; however, the attack rate for the contacts of children >10	In this article the authors summarize the evidence suggesting school-aged children play a significant role in SARS-CoV-2 community transmission, and point out limitations of contradicting studies. A	Hyde, Z. COVID-19, children, and schools: overlooked and at risk. Med J Aust. [Published online, 2020 Aug 12].

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					years was higher than any other group. Large clusters in school settings have been reported in Israel and Chile, with implications for the control of community transmission. March 2020 school closings in the US have been found to be temporally associated with a marked decrease in COVID-19 incidence and mortality; this effect was greatest in states which acted earlier when cases were low. In light of this evidence, the authors provide a summary of the Healthy Buildings Program risk-reduction strategies for schools, with recommendations tailored to specific areas (classrooms, school buildings, activities, schedules and policies) so that school districts can adequately prepare for re-opening.	summary of risk-reduction strategies for schools is provided.	
Pediatric, transplantation, healthcare, Europe	12-Aug-20	Pediatric transplantation in Europe during the COVID-19 pandemic: Early impact on activity and healthcare	Clinical Transplantation	Brief Communication	The COVID-19 pandemic has required an unusual allocation of resources that can negatively impact chronically ill patients and high-complexity procedures. Across the European Reference Network on Pediatric Transplantation, the authors conducted a survey to investigate the impact of the COVID-19 outbreak on pediatric transplant activity and healthcare practices in both solid organ transplantation (SOT) and hematopoietic stem cell transplantation (HSCT). The replies of 30 professionals from 18 centers in Europe were collected. 12 of 18 centers (67%) showed a reduction in their usual transplant activity. Additionally, outpatient visits have been modified and restricted to selected ones. The use of telemedicine tools has increased. A total of 14 COVID-19 pediatric transplanted patients were identified at the time of the survey, including eight transplant recipients and six candidates for transplantation. Only two moderate-severe cases were reported, both in HSCT setting. These survey results demonstrate the limitations in healthcare resources for pediatric transplantation patients during early stages of this pandemic. COVID-19 disease is a major worldwide challenge for the field of pediatric transplantation, where there will be a need for systematic data collection and regular discussions to address the long-term consequences for pediatric transplantation candidates, recipients, and their families.	The authors examined the impact of the COVID-19 pandemic on pediatric transplantation and the strain that was put on the healthcare system as a result of the pandemic. The reduction in transplant activity and modified outpatient visits demonstrated the limitations of the resources provided to pediatric transplantation patients in the early stages of the pandemic.	Doná D, Torres Canizales J, Benetti E et al. Pediatric transplantation in Europe during the COVID-19 pandemic: Early impact on activity and healthcare. Clin Transplant. 2020. doi:10.1111/ctr.14063
Children, emotions, social representation, Spain	12-Aug-20	Exploring Children's Social and Emotional Representations of the COVID-19 Pandemic	Frontiers in Psychology	Original Research	In this cohort study, the authors sought to gain insight into Spanish children's (n=250, age range=3-12 years, mean age=7.14 years) emotional responses and intellectual representations of the COVID-19 pandemic. Parents interviewed their children in a free association exercise using provided survey questions, and responses were analyzed using the Reinert method. Results revealed that children viewed the virus as an enemy that the public and doctors are fighting together. Children expressed fear of the coronavirus, especially fear of harming their grandparents; however, they also felt safe at home with their families. Children reported conflicting emotions of happiness regarding increased	According to this cohort study, children in Spain understand the public health implications of COVID-19 and report strong negative emotions linked to post-traumatic stress. The authors recommend strategies for alleviating children's	Idoiaga N, Berasategi N, Eiguren A, et al. Exploring Children's Social and Emotional Representations of the COVID-19 Pandemic. Front Psychol. 2020;11:1952. doi:10.3389/fpsyg.2020.01952

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					time with family and anger, boredom, and sadness regarding social restrictions on seeing friends. The children also expressed wanting to know when they could return back to school and resume their everyday lives. These results indicated that children have an adequate understanding of COVID-19 public health effects; however, they also experience strong negative emotions associated with the development of post-traumatic stress. The authors offer recommendations for discussing the pandemic with children to mitigate emotional distress.	pandemic-related emotional distress.	
Children, adults, household exposure, SARS-CoV-2 IgG, seroprevalence, Italy	12-Aug-20	Seroprevalence of Anti-SARS-CoV-2 IgG Antibodies in Children With Household Exposure to Adults with COVID-19: Preliminary Findings	medRxiv	Preprint (not peer-reviewed)	The authors present preliminary data on anti-SARS-CoV-2 IgG prevalence in children with known household exposure to SARS-CoV-2 and compared this data with adult partners exposed to the same index case, in Italy. A total of 80 household contacts living in the same household were enrolled in the study, of which 53 were children, and 27 were adults. The results showed that anti-SARS-CoV-2 IgG was present in 44 of the 80 (55%) household contacts. Of the 44 household contacts with SARS-CoV-2 antibodies, 16 were adults, and 28 were pediatric contacts (P > 0.05). Furthermore, among the pediatric contacts, children ≥ 5 years of age had a similar probability of having SARS-CoV-2 IgG (53.8%) compared with those < 5 years (50%) (P > 0.05). Interestingly, 35.7% of children and 33.3% of adults with SARS-CoV-2 IgG were previously diagnosed as COVID-19 cases.	Preliminary findings from this study showed that household transmission of SARS-CoV-2 was high in both adults and children, with similar rates of SARS-CoV-2 IgG in all age groups. Given the high rate of IgG in children exposed to SARS-CoV-2, the authors suggest the need to establish appropriate guidelines for school re-openings and other childhood activities.	Buonsenso D, Valentini P, De Rose C, et al. Seroprevalence of Anti-SARS-CoV-2 IgG Antibodies in Children with Household Exposure to Adults with COVID-19: Preliminary Findings. medRxiv. 2020. doi: https://doi.org/10.1101/2020.08.10.20169912
China, Influenza A, pathogenesis, pediatric COVID-19	12-Aug-20	Coronavirus Disease 2019 versus Influenza A in Children: An Observational Control Study in China	Biomedical and Environmental Sciences	Original Research	In this article, the authors aimed to understand the differences in clinical, epidemiological, and laboratory features between COVID-19 and influenza A in children in Beijing, China. They used a cohort of children hospitalized with COVID-19 from January 1-March 28, 2020 (n= 23, mean 5.7 ± 3.8 years old). They compared these cases to age- and sex-matched children hospitalized (n= 69) and outpatient (n=69) with influenza A from January 1-December 30, 2019. Pediatric COVID-19 is associated with a higher incidence of family cluster, milder symptoms, and milder immune responses relative to pediatric influenza A. A comprehensive comparison of clinical and non-clinical features of COVID-19 and influenza A will help in the early diagnosis and treatment of these two diseases, particularly in facilities not performing nucleic acid tests. Features like abnormal coagulation and inflammation manifest in milder forms in pediatric patients as compared to adults, suggesting different pathogenesis of COVID-19. Additionally, the associations and differences between COVID-19 and infectious diseases other than influenza A are still unknown. Therefore, there is a need to investigate the pathogenesis and clinical responses of COVID-19 and develop widely applicable diagnoses and intervention approaches.	Through this observational study, the authors aim to understand the differences in clinical, epidemiological and laboratory features between COVID-19 and Influenza A. They determined that COVID-19 had milder symptoms and immune responses with higher family clustering than Influenza A. However, there is need to investigate the differences between COVID-19 and other viral infections, to develop diagnostic and intervention approaches that are widely applicable.	Zhao Y, Sun DL, Bouchard HC, et al. Coronavirus Disease 2019 versus Influenza A in Children : An Observational Control Study in China. Biomed Environ Sci. 2020;33(8):614-619. doi:10.3967/bes2020.080

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Pediatric hospitals, hospital management, clinical research, USA	12-Aug-20	COVID-19: Impact for pediatric research, evidence-based practice and quality processes and projects	Journal of Pediatric Nursing	Article	Pediatric hospitals have not experienced the increase in patient volume due to COVID-19 that adult hospitals have; however, the disruption of operations and services in pediatric hospitals has been equally palpable. This article details some of the obstacles faced by a pediatric hospital in Wisconsin (USA) and highlights adjustments that have been made to clinical practice, research, continuing education, and operations. In particular, the author discusses alternative processes for clinical research that limit contact and minimize risk.	This article details some of the obstacles faced by a pediatric hospital in Wisconsin (USA) in response to COVID-19 and highlights adjustments that have been made to clinical practice, research, continuing education, and operations.	Galton KS, Korom N, Kavanaugh K, et al. COVID-19: Impact for pediatric research, evidence-based practice and quality processes and projects [published online, 2020 Aug 12]. J Pediatr Nurs. 2020;50882-5963(20)30565-0. doi:10.1016/j.pedn.2020.08.009
Meningoencephalitis, multisystem inflammation syndrome in children, Kawasaki disease, Intravenous immunoglobulin	12-Aug-20	Neurological Involvement Associated with COVID-19 Infection in Children	Journal of the Neurological Sciences	Letter to the Editor	The authors discuss recently published articles on neurological involvement associated with COVID-19 infection in children. SARS-CoV-2 may have neuroinvasive potential because 36% of adult patients are reported to have a variety of neurological manifestations, including headache, dizziness, acute cerebrovascular events, and changes in mental status. According to the latest data from Western countries, non-specific headaches were the only reported neurological symptoms, accounting for 4–28% of COVID-19 infected children. However, another study of 171 Chinese children with COVID-19 infection did not report neurological involvement. When reviewing 187 children from the six latest reports of multisystem inflammation syndrome in children (MIS-C) related to COVID-19 infection, the authors found that these children had an unexpectedly high incidence (34%) of neurological involvement. Of the 187 children, 64 had varying degrees of neurological symptoms, including headaches, positive meningeal signs (meningism), and altered mental status. Accordingly, the clinic-laboratory and neurological characteristics of MIS-C patients strongly suggest a post-infectious immune response, similar to the mechanism of COVID-19-related autoimmune meningoencephalitis recently reported in adult COVID-19 patients. Interestingly, most MIS-C cases treated with the standard treatment regimen for Kawasaki disease (IVIG with or without steroids) recovered uneventfully without neurological sequelae.	The authors suggest that children may exhibit neurological symptoms similar to those reported in adults with SARS-CoV-2 infection. However, the high incidence of neurological complications in children with MIS-C Kawasaki-like disease remains unclear.	Chen TH. Neurological involvement associated with COVID-19 infection in children [published online ahead of print, 2020 Aug 13]. J Neuro Sci. 2020;418:117096. doi:10.1016/j.jns.2020.117096
Neonate, clinical characteristics, vertical transmission, testing, Iran	12-Aug-20	Spectrum of neonatal COVID-19 in Iran: 19 infants with SARS-CoV-2 perinatal infections with varying test results, clinical	The Journal of Maternal-Fetal and Neonatal Medicine	Original Article	This retrospective cohort study of 19 neonates infected with SARS-CoV-2 from 10 hospitals throughout Iran analyzes obstetrical information, familial COVID-19 status, neonatal medical findings, perinatal complications, hospital readmissions, patterns of repeated testing, and clinical outcomes. 11 neonates had family members who were infected. The neonatal mortality rate from COVID-19 was 10.5%. 7 newborns (37%) were discharged from the hospital as healthy but required readmission for symptoms of COVID-19. There were 2 multi-fetal gestations – one set each of twins and triplets, each with disparate testing and	This retrospective cohort study from Iran summarizes clinical findings and outcomes for neonates infected with COVID-19. The mortality rate was 10.5%, and 2 neonates were suspicious for intra-uterine vertical transmission.	Schwartz DA, Mohagheghi P, Beigi B, et al. Spectrum of neonatal COVID-19 in Iran: 19 infants with SARS-CoV-2 perinatal infections with varying test results, clinical findings and outcomes [published online 2020 Aug 12]. J Matern-Fetal Neo M. 2020.

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		findings and outcomes			clinical outcomes. Premature delivery occurred in 12 of 19 infants (63%). Initial testing for COVID-19 was negative in 4 of the 19 neonates (21%) who subsequently became positive. In 2 cases, neonates tested positive at 1 and 2 hours after birth which was suspicious for vertical transmission of SARS-CoV-2. These cases have notable variation. Neonates initially testing negative for COVID-19 may require readmission due to infection. 2 neonates were highly suspicious for intra-uterine vertical transmission. The authors recommend repeat testing of neonates who initially test negative for COVID-19, without which 21% of neonatal infections would have been undiagnosed.		doi:10.1080/14767058.2020.1797672
Pregnancy, childbirth, labor, delivery, postpartum care, respiratory distress syndrome	12-Aug-20	COVID-19 during pregnancy, delivery and postpartum period based on EBM	Ginekologia polska	Review Article	The knowledge gained from previous human coronavirus infection outbreaks suggests that pregnant women and fetuses represent a high-risk population. Moreover, the physiological changes involving immune and cardiopulmonary systems in pregnancy predispose women to respiratory complications of a viral infection. While an increasing number of publications on COVID-19 infection in pregnant women have been published, the available data remains limited. In this review, the authors aim to summarize current knowledge and to discuss recommendations regarding care during pregnancy, delivery and the post-partum period. The authors argue that there is an urgent need to register all the cases of COVID-19 in pregnant women and their clinical course with local, regional, or international registries. This will aid in answering many clinical and scientific questions and in creating guidelines to ensure an adequate level of care for women affected by COVID-19 infection during pregnancy, delivery, and the post-partum period, as well as for their newborns.	Through a review of the current literature, the authors found that COVID-19 infection in pregnant women is usually asymptomatic or mildly symptomatic. Universal screening for SARS-CoV-2 in pregnant women would identify asymptomatic patients, who are under-represented in current studies.	Stanczyk P, Jachymski T, Sieroszewski P. COVID-19 during pregnancy, delivery and postpartum period based on EBM. [published online, 2020 Aug 12]. Ginekol Pol. 2020;91(7):417-423. doi:10.5603/GP.2020.0106
Pediatric transplantation, solid organ transplantation, SOT, hematopoietic stem cell transplantation, HSCT, post-transplant management, Europe	12-Aug-20	Pediatric transplantation in Europe during the COVID-19 pandemic: early impact on activity and healthcare	Clinical Transplantation: The Journal of Clinical and Translational Research	Brief Communication	The COVID-19 pandemic has negatively impacted chronically ill patients and high-complexity procedures. A survey was conducted across the European reference network on pediatric transplantation (ERN-Transplant Child) to investigate the impact of the COVID-19 outbreak on solid organ transplantation (SOT) and hematopoietic stem cell transplantation (HSCT) in pediatric patients (0-17 years). 30 professionals from 18 centers in Europe responded. 12 of 18 centers (67%) showed reduced transplant activity with 6 of 18 (33%) seeing a reduction of 75% or more. 17 of 18 centers (94%) had modified or restricted outpatient care. These results demonstrate the limitations in healthcare for pediatric transplantation patients during this pandemic and highlight the need for systematic data collection to address the long-term consequences for candidates, recipients and their families.	A survey of pediatric transplantation centers was conducted across Europe to measure the impact of COVID-19 on provision of care to transplantation candidates and recipients (0-17 years old). Results showed reduced transplant activity, limited outpatient care, and inconsistent treatment protocols for COVID-19 patients.	Doná D, Torres Canizales J, Benetti E, et al. Pediatric transplantation in Europe during the COVID-19 pandemic: early impact on activity and healthcare [published online, 2020 Aug 12]. Clin Transplant. 2020;e14063. doi:10.1111/ctr.14063

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Infants, hypoxic ischemic encephalopathy, apnea, circumoral cyanosis	12-Aug-20	COVID-19-associated apnea and circumoral cyanosis in a 3-week-old	BMC Pediatrics	Case Report	Data regarding COVID-19 cases and outcomes in infants is quite limited, especially when compared to older pediatric and adult populations. The authors present a 25-day-old male infant with a history of mild hypoxic ischemic encephalopathy (HIE) who was admitted as an inpatient twice for episodes of apnea and perioral cyanosis. The patient tested positive for COVID-19 and negative for other common respiratory viruses at both admissions. These cases of apnea and perioral cyanosis were initially worked up as a brief resolved unexplained event (BRUE) associated with COVID-19. This is, to the authors' knowledge, the first report of apnea and perioral cyanosis associated with COVID-19 in an infant. This case suggests a need for clinicians to consider more subtle presentations in infants to prompt testing for SARS-CoV-2 infection, caregiver testing, and/or recommending quarantine protocol.	This case highlights a previously undocumented COVID-19 presentation and suggests that even mildly symptomatic infants warrant viral diagnostic testing in an effort to prevent further spread of the disease.	Needleman JS, Hanson AE. COVID-19-associated apnea and circumoral cyanosis in a 3-week-old. BMC Pediatr. 2020;20(1):382. Published 2020 Aug 12. doi:10.1186/s12887-020-02282-8
Health disparities, United States, children, socioeconomic status, pediatricians	12-Aug-20	COVID-19: Widening Health Disparities Among Pediatric Populations [Free Access to Abstract only]	American Journal of Public Health	Editorial	Although children are not sickened by COVID-19 at the same rate as adults, the long-term impact of the pandemic will be all-encompassing and will have detrimental effects on children's health and development, especially for at-risk populations such as immigrant and minority families, children with developmental delays, and children living below the poverty line. The authors discuss the prevalent health disparities throughout the USA that result in children from high-risk populations without preventative services, such as vaccination, and access to services such as telemedicine. They discuss the solutions to address these disparities but note how the initiatives and programs need to be further utilized and expanded. The authors emphasize the continued importance of evaluating the impact of the pandemic and other sources of health disparities on the wellbeing of children and work to create targeted interventions in at-risk communities.	The authors discuss the prevalent health disparities throughout the USA that impact high-risk populations without preventative services, and how these disparities are exacerbated by the COVID-19 pandemic.	Gati SB, Bloomhardt HM, McArthur EA. COVID-19: Widening Health Disparities Among Pediatric Populations. Am J Public Health. 2020;110(9):1358-1359. doi:10.2105/AJPH.2020.305815
Neonate, neonatal ICU, critical care, surveillance	12-Aug-20	COVID-19 surveillance for all newborns at the NICU: conditio sine qua non?	European Journal of Pediatrics	Editorial	Their immature immune system makes neonates, especially those in the neonatal ICU (NICU), highly vulnerable to infections generally. Yet there are no universally applicable, evidence-based guidelines for the prevention and management of COVID-19 infection in the pediatric population. In this article, the authors discuss the current data on SARS-CoV-2 transmission and outcomes in neonates. They describe the results of a surveillance study of NICU patients, caregivers, and healthcare team members during the COVID-19 pandemic by Cavicchiolo et al. They note that the outcomes of various types of protective measures against the spread of COVID-19 in the NICU remain unknown. The authors conclude that for now, it seems reasonable to use available COVID-19 protocols and to increase surveillance when case rates rise locally.	Neonates admitted to the NICU are at an increased risk for severe illness from COVID-19. The authors discuss preventative measures against the spread of COVID-19 in the NICU.	de Winter JP, De Luca D, Tingay DG. COVID-19 surveillance for all newborns at the NICU; conditio sine qua non? [published online, 2020 Aug 12]. Eur J Pediatr. doi:10.1007/s00431-020-03773-7

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Seroprevalence, pediatric, school closure, household exposure, transmission, Italy	12-Aug-20	Seroprevalence of anti-SARS-CoV-2 IgG antibodies in children with household exposition to adults with COVID-19: preliminary findings	medRxiv	Preprint (not peer-reviewed)	This study analyzed the prevalence of anti-SARS-CoV-2 IgG in children with known household exposure to SARS-CoV-2 to better characterize the children's susceptibility to SARS-CoV-2 infection. 30 COVID-19 adults living with children <18 years participated in the study and a total of 80 household contacts were enrolled, of which 53 were children (median age 10 years, range 0-18 years) and 27 adult partners (median age 45 years, range 26-56 years). 44 out of 80 household contacts of index patients had of anti-SARS-CoV-2 IgG. In particular, 16 (59.3%) adult partners had IgG antibodies compared with 28 (52.8%) of pediatric contacts ($p > 0.05$). Among the pediatric population, children >5 years had a similar probability of having SARS-CoV-2 IgG (21/39, 53.8%) compared with those < 5 years (7/14, 50%) ($p > 0.05$). This study showed that household transmission of SARS-CoV-2 was high in both adults and children, with similar rates of SARS-CoV-2 IgG in all age groups, including the younger children. Therefore, the authors highlighted the need of establishing appropriate guidelines for school opening and other social activities related to childhood.	In this study from Italy, the household transmission of SARS-CoV-2 was high in both adults and children, with similar rates of SARS-CoV-2 IgG in all age groups, including the younger children.	Buonsenso D, Valentini P, Rose CD, et al. Seroprevalence of anti-SARS-CoV-2 IgG antibodies in children with household exposition to adults with COVID-19: preliminary findings [published online 2020 Aug 12]. medRxiv. doi:10.1101/2020.08.10.20169912
Obesity, immunodeficiencies, children	12-Aug-20	Obesity and immunodeficiencies are the main pre-existing conditions associated with mild to moderate COVID-19 in children	Pediatric Obesity	Letter to the Editor	As the COVID-19 pandemic spreads, it has become a public health need to identify the most common risk factors and pre-existing conditions associated with all the stages of COVID-19. The author of this letter looks at the Mexican Open Registry of patients with COVID-19, which collects the nationwide data of SARS-CoV-2 RT-PCR assays of patients with respiratory distress or severe respiratory infections. The three most common pre-existing conditions in this population were immunodeficiencies (3.8%), asthma (3.8%), and obesity (3.1%). The main finding of this study was that immunodeficiencies were associated with 23% less SARS-CoV-2 infections but obesity increased the probability to 39%. There must be a focus on the prevention of infection and early awareness of possible inpatient complications of these vulnerable populations.	Obesity and immunodeficiencies are the main associated pre-existing conditions seen in children and adolescents in mild and moderate forms of COVID-19 disease. Immune deficiencies were associated with less infections and obesity was associated with more infections.	Leon-Abarca JA. Obesity and immunodeficiencies are the main pre-existing conditions associated with mild to moderate COVID-19 in children [published online ahead of print, 2020 Aug 12]. <i>Pediatr Obes.</i> 2020:e12713. doi:10.1111/ijpo.12713
Clinical guidance, pediatrics, fever, early detection, prevention, China	12-Aug-20	Consideration of the Management of Pediatric fever clinics During the Novel Coronavirus Pneumonia Outbreak	Disaster Medicine and Public Health Preparedness	Clinical guidance	In this article, the authors provide clinical guidance focused on the detection of COVID-19 infection in children, the prevention of cross-infection, and the general management of children presenting to pediatric fever clinics in China during the COVID-19 pandemic. They include in the guidance detailed instructions for pre-examination and triaging of children based on epidemiology and symptomatology, measures for personal protection of healthcare personnel, key components of the history, physical, and laboratory evaluations, and fundamentals of treatment and isolation of confirmed infections. They also include guidance on management of suspected infection in neonates.	The authors provide guidance on the management of pediatric fever clinics in China during the COVID-19 epidemic, and summarize current strategies for pre-diagnosis, triage, diagnosis, treatment, and prevention of COVID-19 infection in children.	Ding H, Shi Z, Ruan Z, et al. Consideration of the Management of Pediatric fever clinics During the Novel Coronavirus Pneumonia Outbreak. <i>Disaster Medicine and Public Health Preparedness</i> , 1-22. 2020. doi:10.1017/dmp.2020.289

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Epidemiology, virology, acute respiratory infection, England	12-Aug-20	COVID-19 in children: analysis of the first pandemic peak in England	Archives of Disease in Childhood	Original Research	This study aims to assess disease trends, testing practices, community surveillance, case-fatality and excess deaths in children as compared with adults during the first pandemic peak in England. Results show that children represented 1.1% (1,408/129,704) of SARS-CoV-2 positive cases between 16 January 2020 and 3 May 2020. In total, 540,305 people were tested for SARS-CoV-2 and 129,704 (24.0%) were positive. In children aged <16 years, 35,200 tests were performed and 1408 (4.0%) were positive for SARS-CoV-2, compared to 19.1%-34.9% of adults (by age groups). Child cases increased from mid-March and peaked on 11 April. Among 2,961 individuals presenting with acute respiratory infection (ARI) in primary care, 351 were children and 10 (2.8%) were positive compared with 9.3%-45.5% in adults. 8 children died and 4 (case-fatality rate, 0.3%; 95%CI 0.07% to 0.7%) were due to COVID-19. There is no evidence of excess mortality in children. Children accounted for a very small proportion of confirmed cases despite the large numbers of children tested. SARS-CoV-2 positivity was low even in children with ARI.	In England, SARS-CoV-2 positivity rates throughout the pandemic peak were low in children compared with adults. The case-fatality rate in children was <0.5% and there was no evidence of excess childhood mortality during the first wave of the pandemic.	Ladhani SN, Amin-Chowdhury Z, Davies HG, et al. COVID-19 in children: analysis of the first pandemic peak in England [published online, 2020 Aug 12]. Arch Dis Child. 2020;archdischild-2020-320042. doi:10.1136/archdischild-2020-320042
COVID-19; masks; school; children	11-Aug-20	Masked education? The benefits and burdens of wearing face masks in schools during the current Corona pandemic	Trends in Neuroscience and Education	Article	The author discusses the benefits and burdens of wearing face masks in schools during the COVID-19 pandemic. Face masks can prevent the spread of SARS-CoV-2, particularly since this spread can occur from asymptomatic individuals. However, covering the lower half of the face reduces the ability to communicate, interpret, and mimic others' expressions during an interaction. Positive emotions become less recognizable, and negative emotions are amplified. Emotional mimicry, contagion, and emotionality, in general, are reduced and thereby bonding between teachers and learners, group cohesion, and learning - of which emotions are a major driver. Furthermore, children's role in spreading the virus is still unclear, with some studies indicating that they are less likely to infect others while others find children to be infectious. The benefits and burdens of face masks in schools should be seriously considered and made evident and clear to teachers and students. The school's specific situation must also inform any decision regarding face mask use.	The author discusses the benefits and burdens of wearing face masks in schools during the COVID-19 pandemic. While face masks help reduce the spread of SARS-CoV-2, they can interfere with the ability to communicate, interpret, and mimic expressions during an interaction. This issue will, in turn, impact bonding between teachers and learners, group cohesion, and learning.	Spitzer M. Masked education? The benefits and burdens of wearing face masks in schools during the current Corona pandemic. Trends Neurosci Educ. 2020;20:100138. doi:10.1016/j.tine.2020.100138.
COVID-19, gastroenterology, SARS-CoV-2, ACE2	11-Aug-20	Coronavirus disease 2019 (COVID-19) and pediatric gastroenterology	Gastroenterology and Hepatology from Bed to Bench	Mini Review	In this article, the authors highlight the gastro-enterological manifestations and pathological findings of SARS-CoV-2 infection in the pediatric cohort. Common clinical presentations include fever, cough, sore throat, malaise, fatigue, and gastro-intestinal (GI) symptoms such as diarrhea, abdominal pain, nausea, and vomiting. Citing previous studies establishing the role of ACE2 in SARS-CoV-2 infection, the authors indicate that the GI tract, pancreas, and liver may be suitable targets for the virus, with its presence in intestinal mucosa being a sign of invasion. They	The authors reported on the gastro-enterological and pathological findings of SARS-CoV-2 in children. They suggest the suitability of the liver and pancreas as targets for the SARS-CoV-2 virus due to the elevated levels of liver and	Rohani P, Ahmadi Badi S, Moshiri A, Siadat SD. Coronavirus disease 2019 (COVID-19) and pediatric gastroenterology. Gastroenterol Hepatol Bed Bench. 2020 Fall;13(4):351-354. PMID: 33244377; PMCID: PMC7682976.

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					recommend that no change in medication or immunosuppression reduction is necessary for the pediatric cohort since the severity of the disease has not shown to increase with the usage of immunosuppressive drugs. Additionally, the authors also reported elevated levels of liver and pancreatic enzymes in children infected with SARS-CoV-2. They also make recommendations for the usage of proper PPE (respirators, hair nets, double latex gloves) for healthcare staff performing endoscopies, identifying the diagnosis, treatment, and isolation of children as the most effective way of curbing the spread of COVID-19.	pancreatic enzymes in children with COVID-19. Additionally, they recommend protective measures to be undertaken by healthcare staff performing endoscopies.	
SARS-CoV-2; Malawi; youth; public health mitigation	11-Aug-20	SARS-CoV-2 in Malawi: Are we sacrificing the Youth in sub-Saharan Africa?	Journal of Global Health	Viewpoint	The authors suggest that mitigation measures to prevent the spread of SARS-CoV-2 in Malawi may have worse outcomes than the pandemic itself. Pediatric bed capacity in one of the largest children's hospitals in Malawi is normally 399 beds, with 24,000 admissions per year. This capacity has been reduced by security restrictions on national and international staff, resulting in a 66% decrease in consultants. Pediatric bed occupancy is down 75%. This decrease in pediatric hospital services creates concerns for increased deaths at home from treatable conditions or arriving at the hospital too late for a successful recovery. These concerns are especially problematic in Malawi, where 67% of the population is under 25 years old. Schools had been closed for 100 days at the writing of this article. The authors state that 4 deaths in Malawi have been attributable to SARS-CoV-2; however, the mortality and morbidity from other diseases with reduced services such as HIV, tuberculosis, and malaria are unknown. The authors urge a pragmatic approach and risk-benefit analysis of closures in populations that may have different courses of SARS-CoV-2 and with other public health concerns.	Mitigation measures to prevent the spread of SARS-CoV-2 in Malawi has unknown consequences on the pediatric population due to decreased hospital bed capacity and reduced availability of international and national consultants. Other concerns such as HIV, tuberculosis, and malaria may outweigh the benefit of closures to prevent the spread of SARS-CoV-2. Risk-benefit analyses are essential to consider health impacts on children.	Nandi B, Schultz A, Huibers MH, Msekandiana A, Chiume-Kayuni M. SARS-CoV-2 in Malawi: Are we sacrificing the Youth in sub-Saharan Africa?. J Glob Health. 2020;10(2):020336. doi:10.7189/jogh.10.020336
Angiotensin-converting enzyme-2, children, immunosenescence, pediatric, smoking, vaccination	11-Aug-20	Exploring the causes of mild COVID-19 involvement in pediatric patients	New Microbes and New Infections	Mini-Review	Existing evidence indicates relatively low incidence and mild severity of COVID-19 in children compared with adults; although the precise underlying reasons for such disparity remain obscure. This article provides general information about COVID-19, epidemiological data of the disease in children, and its clinical manifestations (including MIS-C) in order to explore possible reasons for the low prevalence and mildness of the disease in pediatric patients. Several theories related to immunosenescence, vaccination and trained immunity, co-infection, ACE2 maturation and expression, viral exposure, overall health, and smoking status have been proposed in recent literature. However, due to the novelty of this virus and the lack of information about it, these reasons are not conclusive. Regardless of their apparent resistance to COVID-19, children	The authors review the clinical manifestations of COVID-19 in children and explore possible reasons for the low prevalence and mildness of the disease in pediatric patients.	Naserghandi A, Saffarpour R, Allameh SF. Exploring the causes of mild COVID-19 involvement in pediatric patients. New Microbes and New Infections. 2020. doi: https://doi.org/10.1016/j.nmni.2020.100741.

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					likely play a key role in the transmission chain of SARS-CoV-2 for they have been reported to contain copious viral loads and yet remain asymptomatic.		
Pregnancy, obesity, risk factor, immunity, burden of disease	11-Aug-20	Obesity as a contributor to immunopathology in pregnant and non-pregnant adults with COVID-19	American Journal of Reproductive Immunology	Special Issue Article	In this article, the authors discuss the immunopathologic risk of obesity in pregnant patients with COVID-19. Despite pregnancy not being a significant risk for severe COVID-19, maternal obesity is a co-morbidity associated with poor COVID-19 outcomes. In obese individuals, cytokine signaling is suppressed, and there is a delay in type 1 and III interferons, further slowing down viral clearance. Anti-viral immunity can be further impacted by the changes in systemic immunity brought about by obesity, causing low-grade chronic inflammation. Pro-inflammatory cytokines can also be produced by macrophage activation in adipocyte tissue. In addition, leptin secretion by adipocytes is pro-inflammatory, and high levels of leptin have been associated with mortality in patients with acute respiratory distress syndrome. The synergistic effects of obesity-associated delays in immune control, as well as the mechanical stress of increased adipose tissue can further put obese pregnant women at a higher risk for pulmonary compromise. The authors stress the need for identifying vulnerable populations who may benefit from additional screening measures and healthcare resources. Additionally, the burden of obesity in women of reproductive age can bring about more severity in maternal mortality due to the susceptibility of pregnant women to COVID-19.	Obesity in pregnant and non-pregnant adults poses a significant co-morbidity in COVID-19 due to obesity-associated systemic changes. The authors stress the importance of investigating the relationship between obesity and altered immune responses to SARS-CoV-2 and the subsequent pathogenesis of COVID-19.	McCartney SA, Kachikis A, Huebner EM, Walker CL, Chandrasekaran S, Adams Waldorf KM. Obesity as a contributor to immunopathology in pregnant and non-pregnant adults with COVID-19. Am J Reprod Immunol. 2020;00(e13320). doi:10.1111/aji.13320
United Kingdom, MIS-C, PIMS-TS	11-Aug-20	Multi-system inflammatory syndrome in children & adolescents (MIS-C): A systematic review of clinical features and presentation	Pediatric Respiratory Reviews	Review Article	This paper evaluated reported cases of MIS-C in children and adolescents to further compile data on MIS-C, a new phenomenon reported worldwide with temporal association with COVID-19. 35 published articles reported 783 individual cases of MIS-C from March-June 2020; 55% were male, and the median age was 8.6 years (IQR, 7-10 years; range 3 months-20 years). The most common observed symptoms were gastro-intestinal symptoms (71%) including abdominal pain and diarrhea, and blood parameters showed neutrophilia in 83% of cases and elevated C-reactive protein in 94%. When tested, 59% were confirmed SARS-CoV-2 positive, and 68% of these patients required ICU care. The authors concluded that a higher incidence of gastro-intestinal symptoms were noted in MIS-C, and that in contrast to acute COVID-19 infection in children, MIS-C appears to be a condition of higher severity.	From this review of published MIS-C cases, the authors concluded that MIS-C frequently presents with gastro-intestinal symptoms, and MIS-C is a condition of higher severity than COVID-19 itself.	Radia T, Williams N, Agrawal P, et al. Multi-system inflammatory syndrome in children & adolescents (MIS-C): A systematic review of clinical features and presentation. Paediatr Respir Rev. 2020; doi:10.1016/j.prrv.2020.08.001
Contraception, abortion,	11-Aug-20	The impact of COVID-19 on contraception and abortion care policy and	BMJ Sexual and Reproductive Health	Editorial	The authors examine changes to contraception and abortion care policy and practice during the COVID-19 pandemic. Many countries have recognized contraception provision as essential, with a shift to telemedicine where possible. Innovations include 'click and collect' policies allowing contraceptive prescriptions to	The authors summarize policy and practice changes for provision of contraception and abortion care during the	Bateson DJ, Lohr PA, Norman WV, et al. The impact of COVID-19 on contraception and abortion care policy and practice: experiences from

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		practice: experiences from selected countries			be sent directly to pharmacies after a ‘telephone/video visit’ or a supply of pills to be sent to a person’s home. In many countries, abortion has been designated an essential service, while others have constrained these services. Some limitations to abortion services may lead to a rise in self-managed abortions often carried out safely using online telemedicine services; however, where such services are unavailable, the risk of unsafe abortions may increase. The need to keep people out of the hospital has accelerated a shift from surgical to medical abortion. Task sharing has been an important strategy to enhance access of both contraception and abortion care. Some changes due to the pandemic could potentially reduce inequality of access to services in a range of settings.	COVID-19 pandemic, including the use of telemedicine, self-management of medical abortion, and task sharing among providers. They argue that some changes could reduce inequality of access to services during and following the pandemic.	selected countries [published online 2020 Aug 11]. BMJ Sex Reprod Health. 2020. doi:10.1136/bmj.srh-2020-200709
Gustatory, skin symptoms, taste, children, adolescent, pediatric, Italy	11-Aug-20	A Case of COVID-19 with Late-Onset Rash and Transient Loss of Taste and Smell in a 15-Year-Old Boy	American Journal of Case Reports	Case Report	The authors presented a 15-year-old boy with clinically confirmed COVID-19 who had a late-onset rash and transient taste and smell disorders in Italy. To their knowledge, this was the first report of transient, isolated disorders of taste and skin manifestations of SARS-CoV-2 infection in children. One of his family members was positive for SARS-CoV-2. In the preceding 3 days, the boy’s eating habits had changed; he perceived a metallic taste while eating and had a loss of appetite. He also had erythematous skin lesions on the lower limbs for the 2 previous days. A sore throat, nasal congestion, and a runny nose were reported on head and neck examination. An RT-PCR test was positive for SARS-CoV-2. The authors concluded that SARS-CoV-2 infection in children and adolescents can be asymptomatic, but it can also occur with fever, dry cough, fatigue, and gastrointestinal symptoms.	In this article, the authors presented the first report, to their knowledge, of transient, isolated disorders of taste and skin manifestations of SARS-CoV-2 infection in children.	Maniaci A, Iannella G, Vicini C, et al. A Case of COVID-19 with Late-Onset Rash and Transient Loss of Taste and Smell in a 15-Year-Old Boy. Am J Case Rep. 2020;21:e925813. Published 2020 Aug 20. doi:10.12659/AJCR.925813
Human coronavirus NL63, spike trimer, ACE	11-Aug-20	A 3.4-Å cryo-EM structure of the human coronavirus spike trimer computationally derived from vitrified NL63 virus particles	bioRxiv (not peer-reviewed)	Original Research	Human coronavirus NL63 (HCoV-NL63) is an enveloped pathogen of the family Coronaviridae which is typically associated with mild upper respiratory symptoms in children, elderly and immunocompromised individuals, and on occasion can cause severe lower respiratory illness. The authors present the in situ structure of HCoV-NL63 spike (S) trimer at 3.4-Å resolution by single-particle cryo-EM imaging of vitrified virions without chemical fixative. Using this data, the authors generated a map of the trimer detailing the glycosylation sites at differing amino acid positions, as well as differences in glycan structures. NL63 shares ACE2 as a receptor for viral entry with SARS-CoV and SARS-CoV-2. The authors present evidence that the domain arrangement within a protomer is strikingly different from that of the SARS-CoV-2 S, which may explain their different requirements for activating binding to the receptor. Despite this difference, the fusion mechanics of both strains were extremely similar, providing a potential target for anti-coronavirus therapeutic development.	The authors conduct a rigorous exploration of the spike proteins in Human coronavirus NL63 and developed a map describing the functional aspects of the spike trimer. They hypothesize that assessing the similarities between Human coronavirus NL63 and SARS-CoV-2 could greatly contribute to anti-coronavirus therapeutic developments.	Zhang K, Li S, Pintilie G, et al. A 3.4-Å cryo-EM structure of the human coronavirus spike trimer computationally derived from vitrified NL63 virus particles. Preprint. bioRxiv. 2020;2020.08.11.245696. Published 2020 Aug 11. doi:10.1101/2020.08.11.245696

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Gene expression, reproductive tissues	11-Aug-20	SARS-CoV-2 and the next generations: which impact on reproductive tissues?	Journal of Assisted Reproduction and Genetics	Opinion	To explore effects of SARS-CoV-2 on the urogenital tract, expression patterns of various host molecules possibly involved in viral entry and replication were investigated in human female and male reproductive systems by inquiring online repositories, including the Human Protein Atlas, GTEx, FANTOM5. In the female reproductive system, no tissue showed the presence of ACE2 protein, the same for TMPRSS2, leading authors to hypothesize these tissues could not be susceptible to SARS-CoV-2 infection. Alternatively, findings highlighted that male reproductive tissues could be targeted by SARS-CoV-2 particularly the testis since it co-expresses the receptor (ACE2) and the protease (TMPRSS) needed for viral entry. Physicians and researchers working in the context of reproductive medicine should consider that SARS-CoV-2 is potentially able to infect and possibly replicate in male reproductive tissues with an eventual impact on the infectivity of the semen.	Authors hypothesize that SARS-CoV-2 infection could have repercussions on the fertility status of male individuals. Potential infectivity of SARS-CoV-2 in reproductive tissues should be considered in reproductive medicine and management of in vitro fertilization in present and future generations.	Zupin L, Pascolo L, Zito G, Ricci G, Crovella S. SARS-CoV-2 and the next generations: which impact on reproductive tissues? [published online ahead of print, 2020 Aug 11]. J Assist Reprod Genet. 2020;1-5. doi:10.1007/s10815-020-01917-0
Childcare, early childhood education, infection control, family clustering, Canada	11-Aug-20	Model-based projections for COVID-19 outbreak size and student-days lost to closure in Ontario childcare centres and primary schools	medRxiv	Preprint (not peer-reviewed)	The disruption of professional childcare has emerged as a substantial collateral consequence of the public health precautions related to COVID-19. Proposals to safely reopen childcare while limiting COVID-19 outbreaks remain understudied, and evidence-based scrutiny is needed of proposed plans. This study employed agent-based modeling to predict risk of COVID-19 infection and student-days lost within a hypothetical childcare center hosting 50 children and educators. Based on existing proposals for childcare and school re-opening in Ontario, Canada, six distinct room configurations were evaluated that varied in terms of child-to-educator ratio (15:2, 8:2, 7:3), and family clustering (siblings together vs. random assignment). High versus low transmission rates were also contrasted, yielding 12 distinct scenarios. Simulations revealed that the 7:3 siblings together configuration demonstrated the lowest risk, whereas centers hosting classrooms with more children (15:2) experienced 3 to 5 times as many COVID-19 cases. Across scenarios, having less students per class and grouping siblings together almost always results in significantly lower peaks for number of active infected and infectious cases. The total student-days lost to classroom closure were between 5 and 8 times higher in the 15:2 ratios than for 8:2 or 7:3. These results suggest that current proposals for childcare reopening could be enhanced for safety by considering lower ratios and sibling groupings.	This study employed agent-based modeling to predict risk of COVID-19 infection and student-days lost in a hypothetical childcare center based on existing proposals for childcare and school reopening in Ontario, Canada. Results suggest that current proposals for childcare reopening could be enhanced for safety by lowering child-to-educator ratios and grouping siblings together.	Phillips B, Browne D, Anand M, et al. Model-based projections for COVID-19 outbreak size and student-days lost to closure in ontario childcare centres and primary schools. [published online, 2020 Aug 11]. medRxiv. doi: 10.1101/2020.08.07.20170407
Household contacts, child-to-adult transmission,	11-Aug-20	Burden of illness in Households with SARS-CoV-2 infected Children	Journal of the Pediatric Infectious	Original Research	The authors utilized a prospective registry to identify children (<18 years old) with laboratory-confirmed SARS-CoV-2 between March 16 and June 14, 2020 who were seen by a healthcare provider at a Children's Healthcare of Atlanta (CHOA) facility.	The authors found a higher rate of child-to-adult transmission than described in previous	Teherani MF, Kao CM, Camacho-Gonzalez A, et al. Burden of illness in households with SARS-CoV-2 infected children

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suspected index case, USA			Diseases Society		Only children who presented with symptoms concerning for COVID-19 infection were included and labeled as SARS-infected children who sought care (SICs). A standardized survey which included questions on COVID-19 symptoms and occupational risk factors, was sent to parents or legally authorized representatives (LARs) at least 14 days following the date of the child's positive COVID-19 test. Among the 32 households included in the final analysis, the authors identified 144 household contacts (HCs) consisting of 58 children and 86 adults. Of the total number of HCs, 67 (46.5%) developed symptoms, including 31 (46%) after the SIC's first symptom and 36 (54%) before the SIC's first symptom. The HCs developed symptoms at a median of 4 (IQR 3-10) days after or 4 (IQR 1-11.25) days before the SICs. Of note, potential occupational exposures in adult household contacts to SIC (AHCs) were identified in 14 households, but none of the AHCs worked in a healthcare setting. Furthermore, although the majority of cases originated in an adult household member, 7 cases (22%) of presumed child-to-adult transmission were identified in this cohort.	studies. Because this study occurred during school closures and for 1 month during statewide shelter-in-place orders, the results may not reflect transmission in close-contact settings such as in-person school. Therefore, further ongoing surveillance will be needed to understand child-to-child and child-to-adult transmission if or when schools reopen.	[published online ahead of print, 2020 Aug 11]. J Pediatric Infect Dis Soc. 2020;piaa097. doi:10.1093/jpids/piaa097
Obesity, pregnancy, risk factors, disease severity, immunology	11-Aug-20	Obesity as a contributor to immunopathology in pregnant and non-pregnant adults with COVID-19	American Journal of Reproductive Immunology	Review Article	Several case series and cohort studies have reported an increased severity of COVID-19 in pregnancies complicated by elevated BMI and obesity. In overweight and obese pregnant women, immunologic and metabolic dysfunction likely contributes to the increased severity of COVID-19 disease. Adipose tissue and cytokine-like hormone released from adipocytes, called adipokines, may directly and indirectly impair the pulmonary immune response. The negative impact of obesity on the host response to respiratory viral pathogens may partially derive from an increased availability of glucose to the virus, changes to the adaptive immune system allowing propagation of viruses, as well as a state of increased inflammation, inflammatory stresses, and poor wound healing. Increased abdominal adipose tissue mass may also lead to elevated abdominal pressure and lower lung volume by reducing expiratory reserve and functional residual capacity. As a result of these metabolic, immunologic, and physiologic changes, obesity has emerged as a key risk factor increasing susceptibility of pregnant women to severe COVID-19 disease.	Obesity has emerged as a risk risk factor for severe COVID-19 disease in pregnant women, likely due to metabolic, immunologic, and physiologic changes associated with obesity that affect immune response to viral infection.	McCartney SA, Kachikis A, Huebner EM, Walker CL, Chandrasekaran S, Adams Waldorf KM. Obesity as a contributor to immunopathology in pregnant and non-pregnant adults with COVID-19 [published 2020 Aug 11]. Am J Reprod Immunol. 2020;e13320. doi:10.1111/aji.13320
Infants, biomarkers, myocardial dysfunction, inflammation, malnutrition	11-Aug-20	Myocardial dysfunction in SARS-CoV-2 infection in infants under 1 year of age	World Journal of Pediatrics	Letter to the Editor	In this letter, the author inquires whether Li et al, who observed that 25% of infants in their study had an underlying disease, had noticed any malnutrition in infants with COVID-19. The studies by Sireco et al. and Liu et al. are also discussed, regarding the cardiovascular impacts of COVID-19 in infants and the use of procalcitonin and hs-CRP as indicators of inflammation in infants with SARS-CoV-2. The author wonders about the use of cardiac	The author discusses three studies pertaining to SARS-CoV-2 in infants, and inquires about malnutrition, cardiac biomarkers, and indicators	Taksande A. Myocardial dysfunction in SARS-CoV-2 infection in infants under 1 year of age [published 2020 Aug 11]. World J Pediatr. 2020;1. doi:10.1007/s12519-020-00384-y

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Vaccine, pregnancy, inclusion, immunology	11-Aug-20	Inclusion of pregnant women in COVID-19 vaccine development	The Lancet Infectious Diseases	Viewpoint	biomarkers, such as troponin-T or echocardiography, used to assess myocardial function in infants with SARS-CoV-2. Since the immune responses to vaccination in pregnant women cannot be assumed from that of non-pregnant women and because the assessment of safety of vaccination in pregnancy is unique, the authors argue that pregnant women should be included in appropriately designed vaccine trials. To enable the inclusion of pregnant and lactating women in the development of COVID-19 vaccines, the authors pose three key questions: what is the short-term and long-term burden of COVID-19 in pregnant women, the fetus, and infants (in all populations and ethnic groups); do pregnant women wish to be vaccinated against COVID-19 and participate in such trials; and which of the candidate COVID-19 vaccines are suitable for pregnant women and should be the focus of early clinical trials? An approach that considers this framework will establish the precedent for the inclusion of pregnant women in future vaccine development.	of inflammation in infants with COVID-19. The authors conclude that given the unique immune responses to vaccination in pregnant women and because of the unique need for assessment of safety of vaccination in pregnancy, pregnant women should be included in appropriately designed vaccine trials.	Heath PT, Le Doare K, Khalil A. Inclusion of pregnant women in COVID-19 vaccine development. The Lancet Infectious Diseases. 2020 Aug 11.
Pregnancy, premature birth, lockdown, Denmark	11-Aug-20	Danish premature birth rates during the COVID-19 lockdown	Archives of Disease in Childhood: Fetal and Neonatal	Short report	To explore the impact of the COVID-19 lockdowns on premature birth rates in Denmark, a nation-wide register-based prevalence proportion study was conducted on all 31,180 live singleton infants born in Denmark between March 12 and April 14 from 2015–2020. The distribution of gestational ages (GAs) at birth was significantly different ($p=0.004$) during the lockdown period compared with the previous 5 years. This was driven by a significantly lower rate of extremely premature children (GA $\leq 27+6$ weeks + days) during the lockdown compared with the corresponding mean rate for the same dates in the previous years (OR 0.09, 95% CI 0.01 to 0.40, $p<0.001$). No significant difference between the lockdown and previous years was found for other GA categories. The reasons for this decrease are unclear, and identification of possible causal mechanisms might stimulate changes in clinical practice.	This study found a significant decrease in the birth of extremely premature infants in Denmark during the COVID-19 lockdown, adding to the literature that has found decreases in premature birth during the COVID-19 lockdowns in other countries. The reasons are unclear and a causal link has not been established, but future studies to elucidate the reasons for this decrease should be pursued.	Hedermann G, Hedley PL, Bækvad-Hansen M, et al. Danish premature birth rates during the COVID-19 lockdown [published online 2020 Aug 11]. Arch Dis Child Fetal Neonatal Ed. 2020;fetálneonatal-2020-319990. doi:10.1136/archdischild-2020-319990
Child psychiatry, coronavirus, distance education, lockdown, loneliness, Turkey	11-Aug-20	Factors affecting the anxiety levels of adolescents in home-quarantine during COVID-19 pandemic in Turkey	Asia-Pacific Psychiatry	Original Research	This study investigated the effects of school closures and home-quarantine on adolescents during the COVID-19 pandemic, via cross-sectional self-report questionnaires. Subjects were children in Turkey, 12-18 years old, who completed a sociodemographic form, State-Trait Anxiety Scale, and UCLA Loneliness Survey online. 745 individuals participated, 69.5% were female, and the average age was 16.8 years. Most participants (88.2%) reported that they followed COVID-19 news, primarily through television. Anxiety was higher for participants who had been previously referred for psychiatric treatment (OR=4.39), those who had a close friend or family member with COVID-19 (OR=3.81), and	Adolescents are likely to have increased anxiety and stress related to home-quarantine during the COVID-19 pandemic. This is especially true for those with previous mental health diagnoses, those close to someone with COVID-19, and those who	Kılınçel Ş, Kılınçel O, Muratdağı G, Aydın A, Usta MB. Factors affecting the anxiety levels of adolescents in home-quarantine during COVID-19 pandemic in Turkey [published online ahead of print, 2020 Aug 11]. Asia Pac Psychiatry. 2020;e12406. doi:10.1111/appy.12406

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					those who obtained most of their COVID-19 information from television (OR=2.41). The authors concluded that excessive information about the pandemic can increase stress and anxiety in adolescents; therefore, clear messages and directives are important for this population. It is vital to identify individuals with higher risk of mental health concerns, and offer them proper support.	get their pandemic news from television.	
ARDS, pregnancy, adult intensive care, mechanical ventilation, HELLP syndrome	11-Aug-20	Successful Continuation of Pregnancy in a Patient with COVID-19-related ARDS	British Medical Journal Case Reports	Case Report	The authors describe the case of a 33-year-old pregnant woman admitted at 23+5 weeks gestation with fever and respiratory symptoms. She had a cervical cerclage placed at 22 weeks due to a short cervix and history of preterm delivery, and had no history of hypertension or proteinuria. However, she developed acute respiratory distress syndrome (ARDS), which mandated invasive mechanical ventilation, and was positive for SARS-CoV-2 by RT-PCR. The patient subsequently developed hypertension and biological disorders suggesting pre-eclampsia and HELLP (hemolysis, elevated liver enzyme levels, and low platelet levels) syndrome. Nonetheless, pre-eclampsia was ruled out by a low ratio of serum soluble fms-like tyrosine kinase-1 to placental growth factor. Given the severity of ARDS, the authors contemplated delivery by C-section. However, because the soluble fms-like tyrosine kinase-1 to placental growth factor ratio was normal and the patient's respiratory condition stabilized, delivery was postponed. The patient subsequently recovered after ten days of mechanical ventilation, and spontaneously delivered a healthy boy at 33+4 weeks gestation. Therefore, this case showed a successful continuation of the pregnancy after respiratory stabilization and after ruling out pre-eclampsia.	The authors caution that although clinical and laboratory manifestations of COVID-19 infection can mimic HELLP syndrome, fetal extraction should not be systematic in the absence of fetal distress or intractable maternal disease.	Federici L, Picone O, Dreyfuss D, Sibiude J. Successful continuation of pregnancy in a patient with COVID-19-related ARDS. <i>BMJ Case Rep.</i> 2020;13(8):e237511. Published 2020 Aug 11. doi:10.1136/bcr-2020-237511
Pediatric, malignancy, oncology, prevention, China	11-Aug-20	Prevention of COVID-19 infection in a pediatric oncology ward in Wuhan	Pediatric Blood & Cancer	Research Article	Little has been known about the situation of pediatric cancer patients in the current pandemic. This study retrospectively analyzed 44 patients (median age 6 years, range 1 year 7 months to 15 years) with established hematologic malignancies admitted for chemotherapy from January 23rd to March 27th, 2020 in the Department of Pediatric Hematology of Tongji Hospital, Wuhan, China. Every patient and their caregivers were well educated on personal protection and put it into effect at home and in the hospital. The results of nucleic acid and antibodies (IgM and IgG) testing of all the 44 inpatients and their caregivers were negative for SARS-CoV-2 infection. Abnormal chest CT images were observed in six symptomatic patients, while chest CT images of their caregivers did not show the changes related to viral pneumonia. These symptomatic patients all recovered after antibacterial combined with antifungal treatment, but without any antiviral agents. The author concluded that SARS-CoV-2 infection could be prevented in pediatric patients with	In this study from Wuhan, China, 44 pediatric cancer patients and their caregivers were all tested negative for SARS-CoV-2 infection. The authors concluded that SARS-CoV-2 infection could be prevented in pediatric patients with malignancies if proper protective measures, such as strict screening, were implemented. For patients presenting suspicious symptoms, comprehensive	Zhang A, Hu Q, Liu A, et al. Prevention of COVID-19 infection in a pediatric oncology ward in Wuhan [published online, 2020 Aug 11]. <i>Pediatr Blood Cancer.</i> 2020;e28424. doi:10.1002/pbc.28424

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					malignancies if proper protective measures were implemented and for patients presenting suspicious symptoms, comprehensive examinations should be carried out.	examinations should be carried out.	
Research, testing, home specimen collection, survey, social media	11-Aug-20	SARS-CoV-2/COVID-19 Testing for Research: Willingness to Use Home Specimen Collection Methods	Journal of Medical Internet Research	Original Research	The authors assessed adults' willingness to use different specimen collection modalities for themselves and children as part of a COVID-19 research study. They recruited 1,435 adults ≥18 years of age through online social media advertisements on Facebook, Snapchat, and Twitter between March 27 and April 1, 2020. Participants completed a survey that assessed their willingness to use the following specimen collection testing modalities as part of a research study: a home collection of a saliva sample, home collection of a throat swab, home finger-prick blood collection, drive-through site throat swab, clinic throat swab, and clinic blood collection. Overall, 69.0% of participants said that they would be more likely to participate in a research study if they could provide a saliva sample or throat swab at home compared to going to a drive-through site, and only 4.4% of participants said they would be less likely to participate using self-collected samples. Furthermore, the willingness to have children participate in research was lower for each specimen collection modality. In conclusion, most participants were willing to participate in a COVID-19 research study that involves laboratory testing, but there was a strong preference for home specimen collection procedures over drive-through or clinic-based testing.	This study showed that most adults are willing to participate in home specimen collection for a research study, though the willingness to have children participate was lower. Therefore, the authors suggest that epidemiologic research studies of SARS-CoV-2 infection and immune response should consider home specimen collection methods to increase participation and minimize bias.	Hall EW, Luisi N, Zlotorzynska M, et al. SARS-CoV-2/COVID-19 Testing for Research: Willingness to Use Home Specimen Collection Methods [published online ahead of print, 2020 Aug 11]. J Med Internet Res. 2020;10.2196/19471. doi:10.2196/19471
K-12 school reopening, task force	11-Aug-20	Operational Considerations on the American Academy of Pediatrics Guidance for K-12 School Reentry	JAMA Pediatrics	Viewpoint	There is a general consensus among experts that schools (Kindergarten to 12th grade) should aim to reopen for in-person classes during the 2020-2021 school year. Globally, children constitute a low proportion of COVID-19 cases and are less likely than adults to experience serious illness. Yes, prolonged school closure can exacerbate socio-economic disparities, amplify existing educational inequalities, and aggravate food insecurity, domestic violence, and mental health disorders. The authors suggest that school districts engage key stakeholders to establish a COVID-19 task force, composed of the superintendent, members of the school board, teachers, parents, and health care professionals to develop policies and procedures. They also acknowledge the various considerations that must be taken into account with the American Academy of Pediatrics concerning physical distancing, protective equipment, staggered schedules, and multilevel screening for students and staff. Even with all the precautions in place, COVID-19 outbreaks within schools are still likely, so the authors urge schools to remain flexible and consider temporary closures and be ready to transition to online education. Finally, they recommend that schools should hire	In order to maximize health and educational outcomes, school districts should adopt some or all of the measures on the American Academy of Pediatric guidance and prioritize them after considering local COVID-19 incidence, key stakeholder input, and budgetary constraints.	Wang CJ, Bair H. Operational Considerations on the American Academy of Pediatrics Guidance for K-12 School Reentry. JAMA Pediatr. Published online August 11, 2020. doi:10.1001/jamapediatrics.2020.3871

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					additional nurses, psychologists, or social works for additional support.		
Children, parents, clinical characteristics, vertical transmission	11-Aug-20	Parents' Knowledge and Attitude towards COVID-19 in Children: A Jordanian Study	International Journal of Clinical Practice	Original Paper	The article described the knowledge and attitude of Jordanian parents regarding COVID-19 in children, including clinical signs of the disease, modes of transmission and protection measures. The author conducted a cross-section study among 810 Jordanian parents. The findings indicate that the parents had a good understanding of the clinical signs, mode of transmission, and protection measures and were satisfied with governmental measures. In summary, the author believes that these findings are important for understanding the clinical characteristics and vertical transmission potential of COVID-19 infection in children, from the perspective of parents. The knowledge of parents about COVID-19 in children was considered good in the case of most parents.	A cross-section study among Jordanian parents indicates that the parents had a good understanding of the clinical signs, mode of transmission, and protection measures and were satisfied with governmental measures.	Abuhammad S. Parents' Knowledge and Attitude towards COVID-19 in Children: A Jordanian Study [published online ahead of print, 2020 Aug 11]. Int J Clin Pract. 2020;e13671. doi:10.1111/ijcp.13671
K-12 virtual schooling, obstacles to success, students	11-Aug-20	K-12 Virtual Schooling, COVID-19, and Student Success	JAMA Pediatrics	Viewpoint	The COVID-19 pandemic has significantly affected K-12 education in 2020. The protect students and staff, as well as to flatten the infection curve, parents, teachers, and policy makers endorsed and implemented a modified version of homeschooling in the spring in the US and across the globe. This unprecedented spring transition was an introduction to K-12 online learning for many educators and families. However, K-12 virtual schooling is not suited for all students and families. Individual students need to be motivated and differences in environments can cause significant variations in student success. One of the more recent and promising advantages of virtual K-12 schooling is to meet the educational needs of children with special health care needs.	The COVID-19 pandemic has encouraged many parents to explore educational alternatives, particularly for students who may have health concerns. With online learning becoming more mainstream, obstacles to student success must be taken into account.	Black E, Ferdig R, Thompson LA. K-12 Virtual Schooling, COVID-19, and Student Success. JAMA Pediatr. Published online August 11, 2020. doi:10.1001/jamapediatrics.2020.3800
Pre-eclampsia, hypertension, liver disease, pregnancy, United Kingdom	11-Aug-20	Severe pre-eclampsia complicated by acute fatty liver disease of pregnancy, HELLP syndrome and acute kidney injury following SARS-CoV-2	BMJ Case Reports	Case Report	The SARS-CoV-2 pandemic has presented many diagnostic challenges and uncertainties when determining pathologies complicating pregnancy and how their behavior is modified by the specific presence of SARS-CoV-2. Pregnancy itself can alter the body's response to viral infection, which can cause more severe symptoms. The authors reported the first case of a patient affected with sudden-onset severe pre-eclampsia complicated by acute fatty liver disease, atypical HELLP (hemolysis, elevated liver enzymes and low platelet) syndrome, and acute kidney injury following SARS-CoV-2 infection. A decision was made for immediate induction of labor with prostaglandin. The presence of both pre-eclampsia and COVID-19 in the patient likely had a synergistic effect, which may have led to the severe clinical manifestations (dramatic weight loss, fever, loss of taste, confusion) displayed via the interplay of the renin-angiotensinogen-aldosterone system in their pathologies. This case report highlights the need for health professionals caring for	This case study details the first case of a patient affected with pre-eclampsia after SARS-CoV-2 diagnosis. Healthcare providers should monitor patients with suspected pre-eclampsia as there is a hypothesized synergistic effect between the condition and COVID-19 symptoms that could result in severe manifestations of both pathologies.	Ahmed I, Eltaweel N, Antoun L, Rehal A. Severe pre-eclampsia complicated by acute fatty liver disease of pregnancy, HELLP syndrome and acute kidney injury following SARS-CoV-2 infection. BMJ Case Rep. 2020;13(8):e237521. Published 2020 Aug 11. doi:10.1136/bcr-2020-237521

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					pregnant women to be aware of the complex interplay between SARS-CoV-2 infection and hypertensive disorders of pregnancy.		
Peripheral nerve disease, pregnancy, Bell's palsy, Portugal	11-Aug-20	Peripheral facial paralysis as presenting symptom of COVID-19 in a pregnant woman	BMJ Case Reports	Case Report	Acute facial nerve disease leading to peripheral facial paralysis is commonly associated with viral infections, and prevalence is increased among pregnant women. Though there have not been many described neurological complications due to COVID-19, it may be a potential cause of peripheral facial paralysis, and neurological symptoms could be the first and possibly only manifestation of the disease. The authors report a case of a term pregnancy diagnosed with COVID-19 after presenting with isolated left peripheral facial palsy progressing over a two-day period. Labor progression was normal and SARS-CoV-2 testing on the newborn was confirmed negative. Fifteen days after birth the neurologic deficits slightly improved. The authors hypothesize that this unusual presentation of symptoms was enhanced by the physiologic susceptibility of the pregnancy state, but further studies are needed to comprehend the significance of cranial neuropathies in SARS-CoV-2 infection.	This case report suggests a possible association between SARS-CoV-2 infection and Bell's palsy, a peripheral facial paralysis. The authors further hypothesize that neurological complications may be the only presentation of COVID-19 seen in late-term pregnant mothers.	Figueiredo R, Falcão V, Pinto MJ, Ramalho C. Peripheral facial paralysis as presenting symptom of COVID-19 in a pregnant woman. <i>BMJ Case Rep.</i> 2020;13(8):e237146. Published 2020 Aug 11. doi:10.1136/bcr-2020-237146
Children, MIS-C, Mumbai, India	11-Aug-20	Multisystem Inflammatory Syndrome in Children With COVID-19 in Mumbai, India [Access to Abstract only]	Indian Pediatrics	Original research	This observational study describes the presentation, treatment and outcome of children with MIS-C due to COVID-19 at 4 tertiary hospitals in Mumbai, India, from May 1-July 15, 2020. 23 patients, 11 males and 12 females, with median (range) age of 7.2 (0.8-14) years were included. SARS-CoV-2 RT-PCR and antibody testing were positive in 39.1% and 30.4% of the patients, respectively; 34.8% had a COVID-19 positive contact. 65% of the patients presented in shock; these children were older (P=0.05) and had a significantly higher incidence of myocarditis with elevated troponin, pro-BNP and left ventricular dysfunction. They also had significant neutrophilia and lymphopenia, as compared to those without shock. Coronary artery dilation was seen in 26% of patients overall. Steroids were used most commonly for treatment (96%), often with IVIG (65%). 1 patient died. Further studies and longer surveillance of patients with MIS-C are required to improve our diagnostic, treatment and surveillance criteria.	This study summarizes the presentation, treatment, and outcome of children with MIS-C in Mumbai, India. 65% of patients presented in shock and 1 died.	Jain S, Sen S, Lakshmivenkateshiah S, et al. Multisystem Inflammatory Syndrome in Children With COVID-19 in Mumbai, India [published online 2020 Aug 11]. <i>Indian Pediatr.</i> 2020;S097475591600230.
BCG vaccination, infant, prevention, Japan	11-Aug-20	Impact of Routine Infant BCG Vaccination in Young Generation on Prevention of Local COVID-19 Spread in Japan	Journal of Infection	Original Research	The authors investigated the impact of BCG vaccination on the prevention of local COVID-19 spread in Japan's prefectures. Data on the prevalence of SARS-CoV-2 infection from January to May 1, 2020, annual routine infant BCG vaccine coverage from 1998 to 2017 (represented by the number of BCG vaccinations per live births), and other candidate factors in each prefecture were obtained from the official notifications database in Japan. The authors analyzed the association of BCG vaccine coverage with the prevalence of SARS-CoV-2 infection. The results showed that BCG vaccine coverage in 1999–2002, 2004, and 2012 in five	This study on the relationship between BCG vaccination and SARS-CoV-2 infection in Japanese patients with COVID-19 infection suggests that the routine infant BCG vaccine plays a significant protective role in local COVID-19 spread.	Kinoshita M, Tanaka M. Impact of routine infant BCG vaccination in young generation on prevention of local COVID-19 spread in Japan [published online ahead of print, 2020 Aug 11]. <i>J Infect.</i> 2020;S0163-4453(20)30547-8. doi:10.1016/j.jinf.2020.08.013

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					prefectures with no COVID-19 infections was significantly higher than in five prefectures with a high prevalence of infections. Furthermore, the prevalence of SARS-CoV-2 infection was significantly negatively correlated with BCG vaccine coverage in 2004 and was significantly positively correlated with age groups 20–34 and 40–54 years.		
Adolescent, child, emergency services, mental health, psychiatric, Pennsylvania, USA	11-Aug-20	COVID-19 Outbreak Among Adolescents at an Inpatient Behavioral Health Hospital	Journal of Adolescent Health	Clinical observations	This article reports the COVID-19 outbreak among adolescents at an inpatient behavioral health facility in Pennsylvania, USA. A total of 19 COVID-19 patients aged 11–17 years were identified. Patients most commonly presented with a sore throat (37%) and nausea/vomiting (32%). Only 26% of patients presented with cough, shortness of breath, or fever. The most common medical comorbidity was asthma (32%), and the most common psychiatric comorbidity was posttraumatic stress disorder (63%). Infected patients were collocated and managed together on a separate unit to maintain a therapeutic group milieu. Mental health treatment was modified to limit staff exposure. Patients received daily medical assessment by an in-house pediatrician. 1 patient required intravenous fluids. No patients required transfer to a medical facility. Adolescents in psychiatric inpatient settings may be especially vulnerable to COVID-19 infection. Close collaboration between medical and psychiatric care providers is needed to optimize care for this population and to address admission and disposition options for infected patients.	This is the first report of a COVID-19 outbreak among adolescents at an inpatient behavioral health facility in the US, highlighting challenges in addressing both medical and mental health needs among young people requiring inpatient behavioral health hospitalization.	Krass P, Zimbrick-Rogers C, Iheagwara C, Ford CA, Calderoni M. COVID-19 Outbreak Among Adolescents at an Inpatient Behavioral Health Hospital [published online, 2020 Aug 11]. J Adolesc Health. 2020;S1054-139X(20)30406-7. doi:10.1016/j.jadohealth.2020.07.009
Pregnancy, mental health, trauma-informed care, nursing	11-Aug-20	Promotion of Maternal-Infant Mental Health and Trauma-Informed Care During the Coronavirus Disease 2019 Pandemic	Journal of Obstetric, Gynecologic, and Neonatal Nursing	Commentary	During the pandemic, women are at increased risk for depression, anxiety, posttraumatic stress disorder, and suicidality precipitated by new pandemic-related stressors. The short- and long-term psychological effects of the pandemic have the potential to disproportionately harm women from marginalized and under resourced communities. The authors provide recommendations for nurses and other members of the maternity care team with direction for fostering social support, performing relevant mental health and safety assessments, and offering patient-centered education specific to uncertainty and unexpected care experiences that result from the pandemic. They emphasize the use of a trauma-informed approach and propose that nurses are uniquely positioned to provide these interventions because of their sustained contact and relationships with women and their infants during the continuum of maternity care. By using a trauma-informed perspective and addressing mental health needs, nurses can promote positive mother and infant outcomes in the midst of pandemic stressors.	Pregnant women are at increased risk of psychological stress and harm during the COVID-19 pandemic. The authors provide nurses with recommendations for a trauma informed approach to perinatal care in an effort to promote positive mother and infant outcomes.	Choi K, Records K, Low LK, et al. Promotion of Maternal-Infant Mental Health and Trauma-Informed Care During the Coronavirus Disease 2019 Pandemic [published 2020 Aug 11]. J Obstet Gynecol Neonatal Nurs. 2020; doi:10.1016/j.jogn.2020.07.004
Weight gain, obesity, children, quarantine	11-Aug-20	Weight Gain in Children During the COVID-19	Journal of Pediatrics and Child Health	Letter to the Editor	In this letter, the authors discuss how recent research on COVID-19 has highlighted psychological and emotional effects of the disease and quarantine. In Turkey specifically, between March	There have been various psychological and emotional effects of	Baysun Ş, Akar MN. WEIGHT GAIN IN CHILDREN DURING THE COVID-19 QUARANTINE PERIOD

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		Quarantine Period			and June, children < 18 years were under strict restrictions and had very little, if any, outside time. The authors believe that the children's excessive weight gain in the 3 months may be linked to the mother's/grandmother's effect. Because children are constantly at home, the mother's/grandmother's focus is more on the child's diet. Children's physical activity was also heavily limited which may also be a contributing factor to weight gain. These observations are important as they may contribute to the wellbeing of children.	COVID-19, including weight gain in children and adolescents. These effects have been especially drastic in Turkey, where serious quarantine measures were taken.	[published online ahead of print, 2020 Aug 11]. J Paediatr Child Health. 2020;10.1111/jpc.15105. doi:10.1111/jpc.15105
Mental health, school closures, children, social distancing	10-Aug-20	School Closures and Mental Health Concerns for Children and Adolescents during the COVID-19 Pandemic	Psychiatra Danubina	Letter to the Editor	School closures resulting from COVID-19 outbreaks have disrupted the daily lives of around 1.3 billion children and adolescents worldwide. Children need clear and honest communication about the COVID-19 pandemic to give context around these disruptions and to prevent misunderstanding and self-blame. The authors express concern over disrupted social-emotional learning, loss of special education services, and increased exposure to domestic violence and parental conflict. Examples of specific social distancing measures that may mitigate risk of transmission in schools are provided, such as closure of playing areas or school grounds, deferring non-essential school meetings, strictly maintaining distance between students in classrooms, reducing number of school days per week, classes on alternate days, appropriate meal break timings with social distancing. Further research is needed to measure the psychological impact of this pandemic on children and adolescents worldwide and to better inform future mental health interventions.	This letter provides evidence of possible psychological impacts on children and adolescents as a result of school closures and recommends implementing social distancing strategies that may allow schools to re-open or remain open.	Joseph SJ, Bhandari SS, Ranjitkar S, Dutta S. School Closures and Mental Health Concerns for Children and Adolescents during the COVID-19 Pandemic. [published online, 2020 Aug 10]. Psychiatr Danub. 2020;32(2):309-310.
Pediatric, neonatal, bio-repository, MIS-C	10-Aug-20	Establishment of a Pediatric COVID-19 Biorepository: Unique Considerations and Opportunities for Studying the Impact of the COVID-19 Pandemic on Children	Research Square (pre-print)	Letter	Collecting high-quality bio-specimens from infants, children and adolescents in a standardized manner during the COVID-19 pandemic is essential to establish a biologic understanding of the disease in the pediatric population. Formation of this biorepository enables compilation of data from pediatric centers around the world in order to address specific pediatric and neonatal COVID-19-related questions. This article outlines a protocol stressing the importance of establishing collaborations between clinical and research teams, and strict protocols for patient recruitment and sample collection, processing, and storage. A total of 327 total neonatal and child patients with an average age of 11 (\pm 8) years for the child (n = 242) / adolescent patients and an average of 1.3 (\pm 1.3) days (n = 85) for the neonatal cohort were enrolled in the study. Equal gender distribution was seen between the enrolled patients. The authors are hopeful that in creating this biorepository, information regarding viral transmission by children, the differences between child and adult susceptibility, and factors driving MIS-C can be	The authors advocate for a pediatric and neonatal COVID-19 biorepository in order to foster collaboration between clinical and research study of SARS-CoV-2 infection. Establishment of this repository would gather data that could provide answers to disease pathogenesis and susceptibility.	Lima R, Gootkind E, Flor D, et al. Establishment of a Pediatric COVID-19 Biorepository: Unique Considerations and Opportunities for Studying the Impact of the COVID-19 Pandemic on Children. Preprint. Res Sq. 2020;rs.3.rs-42030. Published 2020 Aug 10. doi:10.21203/rs.3.rs-42030/v1

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					learned. They assert that creation of a pediatric biorepository is crucial in order to develop future treatment and vaccination strategies.		
Emergency department, urgent care, children, critical illness, public health intervention, SARS-CoV-2, United States, Cincinnati	10-Aug-20	The impact of public health interventions on critical illness in the pediatric emergency department during the SARS-CoV-2 pandemic	Journal of the American College of Emergency Physicians Open	Original Article	In children, patient volume decreases have been seen in multiple settings of health care during the SARS-CoV-2 pandemic, but there are no published studies that have focused on changes in critical illness presenting to the pediatric emergency department (PED). The authors conducted an interrupted time series analysis at a single tertiary PED in Cincinnati, USA to determine the impact of SARS-CoV-2 related public health interventions on emergency healthcare utilization and frequency of critical illness in children. All patients evaluated by a provider from December 31-May 14, 2015-2020 were included. Total patient visits (ED and urgent care), shock trauma suite (STS) volume, and measures of critical illness were compared between the SARS-CoV-2 period (December 31, 2019 to May 14, 2020) and the same period for the previous 5 years combined. Following the initiation of local public health interventions, total patient volume had a daily decline rate of -19.4% (95% CI -22.6%, -14.1%), and STS volume had a daily decline rate of -9.9% (95% CI -18.9%, -0.85%). Total visits, STS volume, and volume of critical illness were all significantly lower during the SARS-CoV-2 period. During the height of public health interventions, the odds of having a 24-hour period without a single critical patient were >5 times higher. The authors found that public health interventions in a metropolitan area without significant community seeding of SARS-CoV-2 led to profound and persistent decreases in PED utilization, including for critical illness and injury.	The authors found that total visits, shock trauma suite (STS) volume, and volume of critical illness were all significantly lower during the SARS-CoV-2 period at a single tertiary pediatric emergency department (PED) in Cincinnati, USA. The authors found that public health interventions in a metropolitan area without significant community seeding of SARS-CoV-2 led to profound and persistent decreases in PED utilization, including for critical illness and injury.	. Dean P, Zhang Y, Frey M, et al. The impact of public health interventions on critical illness in the pediatric emergency department during the SARS-CoV-2 pandemic [published online ahead of print, 2020 Aug 10]. J Am Coll Emerg Physicians Open. 2020. doi:10.1002/emp2.12220
Pregnancy, fetal outcomes, neonate, immunology, pregnancy complications	10-Aug-20	Potential effects of SARS-CoV-2 infection during pregnancy on fetuses and newborns are worthy of attention	Journal of Obstetrics and Gynaecology Research	Review Article	The authors review SARS-CoV-2 and immune-related data on pregnant women, fetuses, and newborns. They also provide an overview of the physiological and immunological changes that induce complications in pregnancy. According to the limited available literature, SARS-CoV-2 utilizes angiotensin converting enzyme 2 (ACE2) as its receptor to infect host cells. Insufficiency of ACE2 in pregnant women and the effects of hypoxia on the placental oxygen supply can lead to severe perinatal complications. Additionally, SARS-CoV-2 infection may disrupt maternal-fetal immune tolerance and cause immunological damage to fetuses. Therefore, complications such as fetal demise or premature birth, pre-eclampsia, intra-uterine growth restriction, respiratory dyspnea, nervous system dysplasia, and immune system defects are likely to occur in pregnant women with COVID-19 or their newborns. The authors argue that pregnant women infected with SARS-CoV-2 should be treated as a special group and given special attention. Fetuses and	The authors identify the potential adverse effects of maternal SARS-CoV-2 infection on fetuses and neonates. The underlying mechanisms of these complications are hypoxemia, a decrease in ACE2 in pregnancy, and immune-related injuries caused by SARS-CoV-2 infection.	Dang D, Wang L, Zhang C, Li Z, Wu H. Potential effects of SARS-CoV-2 infection during pregnancy on fetuses and newborns are worthy of attention [published online, 2020 Aug 10]. J Obstet Gynaecol Res. doi:10.1111/jog.14406

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					newborns of SARS-CoV-2-infected pregnant women should be given more protection to reduce the occurrence of adverse events.		
Ultrasound, pneumonia, pregnant women	10-Aug-20	Ultrasound in Pregnant Women With Suspected COVID-19 Infection	Journal of Ultrasound in Medicine	Letter to the Editor	At a medical facility in Spain, chest ultrasounds were conducted in women at 6, 9, 19, and 25 gestational weeks who presented with respiratory symptoms consistent with COVID-19. Two patients showed images comparable with interstitial pneumonia as a result of COVID-19. One of these patients also showed evidence of sub-pleural consolidation in posterior hemithorax. Both patients, positive for pathologic ultrasound findings, were also positive for SARS-CoV-2. The authors highlight the use of ultrasound as a first-line diagnostic tool for suspicion of pneumonia, especially in pregnant women as it enables safe diagnosis and early treatment. This non-invasive method of diagnosis was apt at diagnosing pregnant women with SARS-CoV-2 infection.	Women at various stages of pregnancy were diagnosed with pneumonia as a result of COVID-19 using ultrasound methods, leading to a possible new method of diagnosis of SARS-CoV-2 that is non-invasive and safe for pregnant mothers.	Gil-Rodrigo A, Llorens-Soriano P, Ramos-Rincón JM. Ultrasound in Pregnant Women With Suspected COVID-19 Infection [published online ahead of print, 2020 Aug 10]. J Ultrasound Med. 2020;10.1002/jum.15419. doi:10.1002/jum.15419
Pediatric endocrinology, type 1 diabetes, DKA, Italy	10-Aug-20	Has COVID-19 Delayed the Diagnosis and Worsened the Presentation of Type 1 Diabetes in Children?	Diabetes Care	Original Article	At its peak, COVID-19 significantly reduced pediatric emergency department (ED) access in Italy. To ascertain the effect of delayed care on the diagnosis and presentation of pediatric type 1 diabetes, a cross-sectional, web-based survey of all Italian pediatric diabetes centers collected data on diabetes, diabetic ketoacidosis (DKA), and COVID-19 in patients (0-15 years) with new or established type 1 diabetes between 20 February and 14 April 2020 and compared with the same time period in 2019. 53 of 68 centers (77.9%) responded. There was a 23% reduction in new diabetes cases in 2020 compared with 2019. Among newly diagnosed patients who presented with DKA, the proportion with severe DKA was 44.3% in 2020 vs. 36.1% in 2019 (P = 0.03). There were no differences in acute complications. Eight patients with asymptomatic or mild COVID-19 had lab-confirmed SARS-CoV-2. Delayed diagnosis of type 1 diabetes during the COVID-19 pandemic might have altered diabetes presentation and DKA severity. Preparing for any “second wave” requires strategies to educate and reassure parents about timely ED attendance for non-COVID-19 symptoms.	A cross-sectional, web-based survey of pediatric diabetes centers in Italy collected data on newly diagnosed type 1 diabetes and DKA severity in patients (0-15 years). Results suggest delayed diagnosis of type 1 diabetes during the COVID-19 pandemic, leading to altered presentation and higher severity of DKA.	Rabbone I, Schiaffini R, Cherubini V, et al. Has COVID-19 Delayed the Diagnosis and Worsened the Presentation of Type 1 Diabetes in Children? [published online 2020 Aug 10]. Diabetes Care. 2020;dc201321. doi:10.2337/dc20-1321
Pediatric, MIS-C, Kawasaki disease, hyperinflammation, PIMS-TS	10-Aug-20	Multi-System Inflammatory Syndrome in a Child Mimicking Kawasaki Disease	Journal of Tropical Pediatrics	Case Report	There have been recent reports of children presenting with severe multi-system hyperinflammatory syndrome resembling Kawasaki disease (KD) during the COVID-19 pandemic. The exact pathophysiology of this condition is unknown; however, most of the children have multi-organ dysfunction. Respiratory system involvement is less common compared to adults. Further, these patients have characteristic laboratory parameters distinct from those seen in KD. The authors report a 7-year-old girl who presented with fever, rash and other manifestations mimicking classic KD and fulfilling the case definition for pediatric MIS-C. RT-	MIS-C is an emerging condition with still limited information available. The authors describe a pediatric case and argue that a multi-disciplinary approach is required to identify cases and to initiate early treatment	Gupta A, Gill A, Sharma M, Garg M. Multi-System Inflammatory Syndrome in a Child Mimicking Kawasaki Disease [published online, 2020 Aug 10]. J Trop Pediatr. doi:10.1093/tropej/fmaa060

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					PCR for SARS-CoV-2 was negative, and serology testing was not performed. She had lymphopenia, thrombocytopenia and hyponatremia in the absence of macrophage activation syndrome, similar to MIS-C patients reported from UK and Italy. Clinical manifestations resolved and laboratory parameters improved with intravenous immunoglobulin and corticosteroids. Early recognition is important for rapid administration of immunomodulatory therapy, which can be life saving for these patients.	with immunomodulatory therapy.	
Personal protective equipment; polymerase chain reaction; pregnancy, Japan	10-Aug-20	Survey on the Use of Personal Protective Equipment and COVID-19 Testing of Pregnant Women in Japan	The Journal of Obstetrics and Gynaecology Research	Original Research	The authors surveyed personal protective equipment (PPE) usage in core facilities and affiliated hospitals of the Obstetrics and Gynecology Training Program located in 46 prefectures throughout Japan and hospitals of the National Perinatal Medical Liaison Council, between April 27 and May 1, 2020. Questionnaire responses from 294 facilities were analyzed and included in the study. Full PPE was defined as gown-type or one-piece prevention wear, N95 masks, goggles, double gloves, caps, and shoe covers, while standard protection during vaginal delivery for asymptomatic women was defined as a standard gown apron, surgical mask, and goggles or face shield. The results showed that doctors used full PPE and standard PPE in 7.1% and 65% of facilities, respectively, while midwives used full PPE and standard PPE in 6.8% and 73.5% of facilities, respectively. Of note, regardless of the characteristics and locations of facilities, in-hospital stockpiling of standard gowns or aprons was sufficient in only 36.5% of facilities, whereas stockpiling of N95 masks and goggles or face shields were sufficient only in 10.5% and 14.6% of facilities, respectively. Also, 61% of the facilities administered less than 50 PCR tests per week, indicating that most facilities were limited in their capacity for PCR testing.	This study highlighted the alarming shortage of PPE in Japan and the need for sufficient stockpiling of PPE to prevent disruptions in medical care due to nosocomial infections. Furthermore, the authors suggest that appropriate guidelines for PPE usage by medical providers and COVID-19 testing for pregnant women before delivery are necessary in Japan.	Umazume T, Miyagi E, Haruyama Y, et al. Survey on the use of personal protective equipment and COVID-19 testing of pregnant women in Japan [published online ahead of print, 2020 Aug 10]. J Obstet Gynaecol Res. 2020;doi:10.1111/jog.14382
Pregnancy, diagnosis, treatment	10-Aug-20	Covid-19 pandemic and pregnancy	The Journal of Obstetrics and Gynaecology Research	Original Article	The authors review the history, genetics, and pathophysiology of COVID-19 infection, and also outline diagnostic methods and treatment possibilities. They contend that immune function is adequate in pregnancy, and that fear of COVID-19 infection due to pregnancy-induced immunosuppression is ill-founded. Reports differ regarding prevalence of COVID-19 in pregnancy, and this article attributes these discrepancies to differences in testing mechanisms and case definitions. The authors argue that some severe COVID-19 complications might be explained more by social and community factors, than by infection itself. The authors acknowledge that pneumonia may be more likely in pregnancy, due to mechanical changes in the respiratory system. Therefore, they recommend diligent handwashing and self-isolation when possible, for pregnant women. Finally, the article reviews that overall, 90.1% of deliveries to COVID-19-positive	This article briefly explores data and research on COVID-19 in pregnancy to date. It recommends basic hygiene and isolation measures as the best means to prevent COVID-19 in pregnancy, and paints a hopeful picture of medicine's capability to detect and treat COVID-19 illness.	Hayakawa S, Komine-Aizawa S, Mor GG. Covid-19 pandemic and pregnancy [published online ahead of print, 2020 Aug 10]. J Obstet Gynaecol Res. 2020;10.1111/jog.14384. doi:10.1111/jog.14384

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					members have been via cesarean delivery. However, this varies by country because national guidelines differ.		
Pediatric, PPE, simulation scenario, multi-disciplinary team	10-Aug-20	Management of a suspected case of 2019 novel coronavirus infection in a 4-year old child: A simulation scenario	Journal of Pediatrics and Child Health	Instructive Case	The authors present a case scenario that requires the correct approach for the strict implementation of standard prevention measures in three main targets (the pediatric patient, the parents, and the health-care worker). This simulation scenario was used in Italy during a dedicated program in the early phase of COVID-19 outbreak that aimed to train pediatric residents in handling suspected cases of COVID-19. The correct management of children with COVID-19 is crucial to limit the spreading of the infection to more vulnerable family members, therefore playing a key role in a wider health policy perspective. Overall, this scenario aims to provide a holistic training exercise in order to prepare pediatric residents and physicians for practice in the challenging context of the COVID-19 outbreak. It is also adaptable for any highly contagious respiratory disease training.	The authors describe a case scenario for use in training on the management of suspected pediatric cases of COVID-19. They also discuss the skills reviewed by the simulation including PPE use, the differential diagnosis process, and multi-disciplinary teamwork.	Monzani A, Genoni G, Binotti M et al. Management of a suspected case of 2019 novel coronavirus infection in a 4-year old child: A simulation scenario [published online, 2020 Aug 10]. J Paediatr Child Health. doi:10.1111/jpc.15022
Pregnancy, stillbirth, neonatal mortality, intrapartum care, Nepal	10-Aug-20	Effect of the COVID-19 pandemic response on intrapartum care, stillbirth, and neonatal mortality outcomes in Nepal: a prospective observational study	The Lancet Global Health	Original Research	In this prospective observational study, the authors assessed data from 20,354 pregnant women who gave birth between Jan 1 and May 30, 2020, from nine hospitals in Nepal. They assessed the number of institutional births, their outcomes, and quality of intrapartum care before and during the national COVID-19 lockdown. The average weekly reduction in institutional births during lockdown was 7.4%, with a total decrease of 52.4% by the end of lockdown. The risk ratio of preterm birth for during lockdown versus before lockdown was 1.30 (95% CI 1.20–1.40), after adjusting for ethnicity, maternal age, and complication during admission. The institutional stillbirth rate increased from 14 per 1000 total births to 21 per 1000 total births during lockdown, with an adjusted risk ratio of 1.46 (95% CI 1.13–1.89). The institutional neonatal mortality rate increased from 13 deaths per 1000 live births to 40 deaths per 1000 live births, with an adjusted risk ratio of neonatal mortality during the lockdown of 3.15 (95% CI 1.47–6.74). During lockdown there was a decrease in intrapartum fetal heart rate monitoring during labor and a decrease in breastfeeding within 1 hour of birth, but improvement in skin-to-skin contact and hand hygiene practice.	In Nepal, institutional childbirth reduced by more than half during the COVID-19 lockdown, with increases in institutional stillbirth rate and neonatal mortality. Several metrics of quality of care decreased during lockdown, including fetal heart rate monitoring and breastfeeding within 1 hour of birth.	Ashish KC, Gurung R, Kinney MV, et al. Effect of the COVID-19 pandemic response on intrapartum care, stillbirth, and neonatal mortality outcomes in Nepal: a prospective observational study [published 2020 Aug 10]. Lancet Glob Health. 2020. doi:10.1016/S2214-109X(20)30345-4
Pregnancy, mother-infant separation, breastfeeding, New York City, USA	10-Aug-20	Impact of Maternal SARS-CoV-2 Detection on Breastfeeding Due to Infant Separation at Birth	The Journal of Pediatrics	Original Article	This observational longitudinal cohort study of SARS-CoV-2 PCR-positive mothers and their infants at 3 New York City, USA, hospitals from March 25-May 30, 2020, assessed the impact of separation of SARS-CoV-2 PCR-positive mother-newborn dyads on breastfeeding outcomes. Mothers were surveyed by telephone. Of the 160 mother–newborn dyads, 103 mothers were reached by telephone, and 85 consented to participate. No significant difference was observed in pre-delivery feeding plan between the separated and unseparated dyads (P = .268). Higher	This observational study found lower rates of breastfeeding both in the hospital and at home among mother-newborn dyads who had been separated during their hospitalization due to	Popofsky S, Noor A, Leavens-Maurer J, et al. Impact of Maternal SARS-CoV-2 Detection on Breastfeeding Due to Infant Separation at Birth [published online 2020 Aug 10]. J Pediatr. 2020;S0022-3476(20)30986-0. doi:10.1016/j.jpeds.2020.08.004

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					rates of breastfeeding were observed in the unseparated dyads compared with the separated dyads in the hospital ($p < 0.001$), and at home ($p = 0.012$). 2 mothers in each group reported expressed breast milk as the hospital feeding source (5.6% of unseparated vs 4.1% of separated). COVID-19 was more commonly cited as the reason for change of feeding plan among the separated compared with the unseparated group (49.0% vs 16.7%, $p < 0.001$). In the setting of COVID-19, separation of mother–newborn dyads impact breastfeeding outcomes, with lower rates of breastfeeding both during hospitalization and at home following discharge compared with unseparated mothers and infants.	maternal COVID-19 infection.	
Pregnancy, maternal health, Nepal	10-Aug-20	Providing maternal health services during the COVID-19 pandemic in Nepal	The Lancet Global Health	Commentary	This commentary summarizes the findings published by Ashish KC, et al, in a prospective observational study of intra-partum care, stillbirth and neonatal mortality outcomes across 9 hospitals in Nepal from January–May 2020. They describe the timing and effects of COVID-19 lockdown measures. They note a sharp increase in maternal mortality from March–May 2020, with institutional births decreasing by 52.4% over this time frame and women in relatively disadvantaged ethnic groups being affected more. They show increases in neonatal deaths and institutional stillbirths and decreases in intra-partum fetal heart rate monitoring and early initiation of breastfeeding. The authors comment that the Nepalese Government should take note of this Article, monitor real-time essential services coverage levels, and be prepared to modify restrictions to enable women to again access timely and quality maternal health services.	This commentary summarizes findings of the impact of the first two months of COVID-19 lockdown on maternal health services in Nepal, showing increases in maternal mortality, neonatal deaths, and stillbirths.	Karkee R, Morgan A. Providing maternal health services during the COVID-19 pandemic in Nepal [published online 2020 Aug 10]. Lancet Glob Health. 2020. doi:10.1016/S2214-109X(20)30350-8
Child abuse, child neglect, reporting, child endangerment, school closures, child mental health, India	10-Aug-20	Psycho-social impact of COVID-19 pandemic on children in India: The reality [No Abstract and Article not available for free]	Child Abuse and Neglect	Letter to the Editor	Child physical and sexual abuse is already underreported in India, and the impact of India's national lockdown has made children more vulnerable. Approximately 300,000 calls were received between March 20th – March 31st, 2020 to India's CHILDLINE helpline, showing a nearly 50% increase in calls in just 10 days. 30% of calls were to report child abuse, 11% calls were related to physical health, 8% of calls reported child labor, and 8% reported missing children. The author argues the increase in calls reflects increased child endangerment, which can be attributed to financial strain, uncertainty, and frustration among adult household members. School closures have further isolated children and eliminated the first line of defense in recognizing abuse. The author recommends widespread training of school staff on recognizing and reporting abuse and appointing school counselors in every school in India.	The author highlights evidence of increased child endangerment during India's national lockdown and urges schools and communities to become more informed in recognizing and reporting abuse.	Dave H, Yagnik P. Psycho-social impact of COVID-19 pandemic on children in india: The reality. Child Abuse Negl. 2020;108:104663. [published online, 2020 Aug 10]. doi: 10.1016/j.chiabu.2020.104663.
Pregnancy, gestational diabetes mellitus,	10-Aug-20	Options for screening for gestational	Australian and New Zealand Journal of	Clinical Perspectives	The balance between avoiding exposure to SARS-CoV-2 and reducing clinical risk of pregnancy complications remains unclear with respect to gestational diabetes mellitus (GDM) testing. One	Recommendations for gestational diabetes mellitus (GDM) aim to	Simmons D, Rudland VL, Wong V, et al. Options for screening for gestational diabetes mellitus

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screening, macrosomia		diabetes mellitus during the SARS-CoV-2 pandemic	Obstetrics and Gynaecology		aspect of GDM evaluation of immediate concern is the 75g two-hour oral glucose tolerance test (OGTT) used in diagnosis. In this article, the authors seek to summarize the options and the rationale behind GDM recommendations designed to minimize the risks to pregnant women during the COVID-19 pandemic. Recent recommendations promote diagnostic approaches that limit collection of samples but may increase the number of undiagnosed GDM cases. The most sensitive approach to detecting GDM at 24–28 weeks beyond the two-hour OGTT is the one-hour OGTT (88% sensitivity). Less sensitive approaches are fasting glucose alone (≥ 5.1 mmol/L: misses 44–54% of GDM cases) or asking ~20% of women for a second visit (fasting glucose 4.7–5.0 mmol/L (62–72% sensitive). Choices should emphasize local and patient decision-making.	reduce risk of SARS-CoV-2 by using non-oral glucose tolerance test (OGTT) approaches. The authors discuss alternative diagnostic approaches which should identify the majority of women with GDM while limiting the potential within-laboratory exposure to the virus.	during the SARS-CoV-2 pandemic [published online, 2020 Aug 10]. Aust N Z J Obstet Gynaecol. doi:10.1111/ajo.13224
Pediatric, myocarditis, MIS-C, PIM-TS, Pakistan	10-Aug-20	Multisystem inflammatory syndrome associated with COVID-19 in children in Pakistan	The Lancet	Correspondence	In this article, the authors describe their experience with MIS-C at a pediatric hospital in Pakistan. They identified eight children (age < 15 years old) who matched the case definitions of MIS-C and PIM-TS and who were admitted between May 15-June 30, 2020. The patients were predominately male (1 female, 7 males). They all tested positive for SARS-CoV-2 antibodies, and three were positive for SARS-CoV-2 by PCR. Six patients presented as atypical or typical Kawasaki disease and two presented more severely with low cardiac output or shock. Although previous studies suggest features of acute myocarditis in PIM-TS, the endemic prevalence of acute myocarditis in Pakistan is an added challenge in determining the true burden of this feature. Coronary artery dilation in five (62.5%) patients was higher than in other reports, suggesting coronary involvement may play a larger role in Pakistani populations. The authors state that limited resources and a poor referral system may have led to an underestimation of MIS-C cases in Pakistan and request that pediatric and cardiology facilities continue to be mindful of this condition.	The authors describe eight MIS-C cases in a pediatric hospital in Pakistan and suggest that the clinical presentation may be different in Pakistani populations, including an increased risk of coronary involvement.	Sadiq M, Aziz OA, Kazmi U, et al. Multisystem inflammatory syndrome associated with COVID-19 in children in Pakistan. Published 2020 Aug 10. The Lancet. doi:10.1016/S2352-4642(20)30256-X.
Children, school closures, modeling, public health, USA	10-Aug-20	Modeling the Impact of School Closures on COVID-19 Incidence and Mortality	NEJM Journal Watch	On the Horizon	The authors summarized recent studies that explored the impact of school closures in March 2020 on COVID-19 incidence and mortality in the USA. Modeling studies by Auger et al., Dibner et al., and Donohue et al., assessed school closure impact during a ten-day period in March when all 50 states closed Kindergarten to 12th grade schools. The model adjusted for other interventions such as stay-home-orders, facility closures, testing capacity, and population demographics. Given these model inputs, school closures were significantly associated with a decline in COVID-19 incidence and mortality. However, the model may not have the capacity to parse out the precise impact of school closures due to simultaneous implementation of safety mandates. The impacts of hand hygiene, mask use, and caregiver	The authors summarize a model suggesting school closures in March 2020 played a role in significantly reducing COVID-19 incidence and mortality. Decisions for future school closures should also consider child development and academic progress.	Nelson S, Gandhi RT. Modeling the Impact of School Closures on COVID-19 Incidence and Mortality. [published online, 2020 Aug 10]. NEJM Journal Watch.

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					contacts was not explored. The authors conclude that despite reducing COVID-19 incidence and mortality, the decision to close schools again should take a holistic approach and consider child social and emotional development, academic advancement, and mental health.		
Pregnancy, neonate, management, Brazil	10-Aug-20	Care recommendations for parturient and postpartum women and newborns during the COVID-19 pandemic: a scoping review	Revista Latino-Americana de Enfermagem	Review article	This scoping review sought to map the current knowledge on recommendations for labor, childbirth, and newborn care in the context of COVID-19. 19 papers were reviewed and grouped into 2 categories: recommendations for labor and delivery, which address indications to anticipate delivery, route of delivery, and preparation of staff and birth room, and recommendations for post-partum care, which address breastfeeding, newborn care, hospital discharge, and care provided to the newborn at home. A table summarizes the recommendations for each of the above elements. The authors indicate that further studies are needed to resolve current controversies regarding directed pushing in labor, instrumental delivery, delayed umbilical cord clamping, and immediate bathing of the newborn.	This review summarizes available recommendations for management of both labor and delivery and the post-partum period in the context of the COVID-19 pandemic. Of note: the authors recommend COVID-19 infected mothers to breastfeed provided that they wear surgical masks and observe hand hygiene, and if impossible, to express or pump breast milk.	Mascarenhas VHA, Caroci-Becker A, Venâncio KCMP, et al. Care recommendations for parturient and postpartum women and newborns during the COVID-19 pandemic: a scoping review. Rev Lat Am Enfermagem. 2020;28:e3359. doi:10.1590/1518-8345.4596.3359
Pediatrics, multi-system inflammatory syndrome, Pakistan	10-Aug-20	Multisystem inflammatory syndrome associated with COVID-19 in children in Pakistan	The Lancet Child and Adolescent Health	Letter	The authors conducted a prospective review of their pediatric admissions at the Children’s Hospital of Lahore, Pakistan. Children (aged 0–16 years) who fulfilled the WHO criteria for MIS-C and required admission to hospital were prospectively identified, between May 15 and June 30, 2020. Eight children (7 male, 1 female) between the ages of 5-15 (median 9.5) years were diagnosed with MIS-C and they all fulfilled also the case definition for PIMS-TS). Three of the patients were positive for SARS CoV-2 using PCR while all patients were positive with antibody testing. The two main presentations were Kawasaki disease (KD) among 6 out of the 8 patients, and shock or low cardiac output with the remaining two. Coronary artery dilatation was seen in five of the patients among whom two presented with shock-like presentation. It was noted that two of the patients with KD exhibited no abnormalities with their coronary arteries.	The authors indicate that this is the first report of MIS-C pediatric cases in South Asia. Although the small sample size was noted as a limitation in this study, the reported incidence of coronary artery involvement was higher than in other settings such as Italy, France, the UK, and the USA among pediatric populations with MIS-C.	Sadiq M, Aziz OA, Kazmi U, et al. Multisystem inflammatory syndrome associated with COVID-19 in children in Pakistan. The Lancet Child & Adolescent Health. 2020;0(0). doi:10.1016/S2352-4642(20)30256-X
Pregnancy, children, neonate, health outcomes, public health	10-Aug-20	Clarifying the Sweeping Consequences of COVID-19 in Pregnant Women, Newborns, and Children With Existing Cohorts	JAMA Pediatrics	Viewpoint	In this Viewpoint, the authors argue that the agile reconfiguration of existing, large birth cohort studies may be the only way to capture the long-term consequences of the COVID-19 pandemic for pregnant women, neonates, and children. They state that there is a need to understand the outcomes of the pandemic, both in those with and without an infection as all will bear the burdens of altered health services, psychosocial stress, and economic downturn. Specifically, the authors emphasize the importance of the following issues: the true incidence of COVID-	The authors argue that reconfiguration of existing birth cohort studies will allow for the best evaluation of outcomes related to the COVID-19 pandemic in pregnant women, neonates, and children.	Hu YJ, Wake M, Saffery R. Clarifying the Sweeping Consequences of COVID-19 in Pregnant Women, Newborns, and Children With Existing Cohorts. [published online, 2020 Aug 10]. JAMA Pediatr. doi:10.1001/jamapediatrics.2020.2395

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					19, mother-to-child transmission, breastfeeding recommendations, long-term effects on fetal development/child health, and long-term health services outcomes. They argue that answering these questions will require an appropriate pregnancy and birth cohort. Some of these cohorts already exist and are ready to incorporate a focus on COVID-19. This would provide a sustainable infrastructure to minimize adverse outcomes associated with the current pandemic for mothers and infants while maximizing knowledge to help address future outbreaks.		
Neonate, breastfeeding, childbirth, maternal health, USA	10-Aug-20	Newborns of COVID-19 mothers: short-term outcomes of colocating and breastfeeding from the pandemic's epicenter	Journal of Perinatology	Comment	The authors seek to describe their experience caring for newborns of COVID-19 positive women delivering at a large public hospital in Queens, New York, USA. They performed a retrospective cross-sectional study of live births to women who were tested for SARS-CoV-2 from 19 March-22 April 2020 at their center. Among 118 live births, 45 (38%) neonates were born to SARS-CoV-2 positive mothers. The majority of positive mothers (27, 60%), were asymptomatic. Seven (16%) newborns were admitted to the neonatal ICU (NICU) due to prematurity or suspected sepsis. None of the 45 newborns needed NICU admission for COVID-19-related symptoms. Of those born to SARS-CoV-2 positive mothers, 73% (33/45) co-located with their mothers, including 31 (94%) who were breastfed within one hour of birth. Three newborns tested positive for SARS-CoV-2, and they were monitored in the NICU. The authors conclude that in their experience, there were no short-term adverse neonatal outcomes with skin-to-skin care, rooming-in, or breastfeeding in newborns of SARS-CoV-2 positive mothers.	The authors identified 45 neonates born to SARS-CoV-2 positive mothers in the USA. Rooming-in and breastfeeding after delivery provided a critical educational opportunity for new mothers to learn strategies to reduce the risk of transmission of SARS-CoV-2 to their newborn.	Patil UP, Maru S, Krishnan P, et al. Newborns of COVID-19 mothers: short-term outcomes of colocating and breastfeeding from the pandemic's epicenter [published online, 2020 Aug 10]. J Perinatol. doi:10.1038/s41372-020-0765-3
Neonate, NICU, clinical characteristics, vertical transmission, Turkey	10-Aug-20	A multicenter study on epidemiological and clinical characteristics of 125 newborns born to women infected with COVID-19 by Turkish Neonatal Society	European Journal of Pediatrics	Original article	This multi-center cohort study was conducted among newborns born to 125 mothers with COVID-19 in 34 neonatal ICUs (NICUs) in Turkey from March 15-June 15, 2020, to evaluate the epidemiological and clinical characteristics of newborns born to women infected with COVID-19. C-section, prematurity, and low-birthweight infant rates were 71.2%, 26.4%, and 12.8%, respectively. 8 mothers (6.4%) were admitted to an ICU for mechanical ventilation, and 6 died (4.8%). A majority of the newborns (86.4%) were followed in isolation rooms in the NICU. 56.8% were fed with formula, and 36% with expressed breast milk. 4 of 120 newborns (3.3%) had a positive RT-PCR test result, and 5 asymptomatic newborns could not be tested. Although samples taken on the first day were negative, 1 neonate became positive on the second day and 2 on the fifth day. A sample from deep tracheal aspirate was positive on the first day in an intubated case, the fourth case that tested positive. Based on this cohort study, the maternal mortality, higher rates of preterm birth and C- section, suspected risk of vertical transmission, and	This cohort study found a 3.3% prevalence of COVID-19 infection among infants born to mothers with COVID-19. The authors advocate for family support to be a part of the care these newborns receive while in the NICU under isolation precautions.	Oncel MY, Akin IM, Kanburoglu MK, et al. A multicenter study on epidemiological and clinical characteristics of 125 newborns born to women infected with COVID-19 by Turkish Neonatal Society [published online 2020 Aug 10]. Eur J Pediatr. 2020;1-10. doi:10.1007/s00431-020-03767-5

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					low rate of breastfeeding show that family support should be a part of the care in the NICU.		
Pregnancy, clinical characteristics, outcomes, vertical transmission	10-Aug-20	COVID-19 and pregnancy: A review of clinical characteristics, obstetric outcomes and vertical transmission	Australian and New Zealand Journal of Obstetrics and Gynecology	Systematic review	This systematic review sought to describe the current understanding of COVID-19 illness in pregnant women, obstetric outcomes and identify gaps in the existing knowledge. 60 articles published through May 23, 2020, were included, with a total of 1,287 confirmed SARS-CoV-2 positive pregnant cases. Where universal testing was undertaken, asymptomatic infection occurred in 43.5-92% of cases. In symptomatic patients, fever was the most common sign. In the cohort studies, severe and critical COVID-19 illness rates approximated those of the non-pregnant population. C-section was commonly performed, with incidence ranging from 40-100%. 8 maternal deaths, 6 neonatal deaths, 7 stillbirths and 5 miscarriages were reported. 13 neonates were SARS-CoV-2 positive, confirmed by RT-PCR of nasopharyngeal swabs. The authors concluded that vertical transmission appears possible, but it was unclear from these studies whether infection occurred in utero, intra-partum, or post-partum.	This review adds to the growing body of literature for obstetric outcomes for pregnant women with COVID-19 and concludes that vertical transmission may be possible but further data are needed.	Pettiroso E, Giles M, Cole S, et al. COVID-19 and pregnancy: A review of clinical characteristics, obstetric outcomes and vertical transmission [published online 2020 Aug 10]. Aust N Z J Obstet Gynaecol. 2020. doi:10.1111/ajo.13204
reply, comment, vertical transmission, pregnancy, neonate, COVID-19, SARS-CoV-2	9-Aug-20	Re: Maternal transmission of SARS-COV-2 to the neonate, and possible routes for such transmission: A systematic review and critical analysis	British Journal of Gynecology (BJOG)	Letter	This response to a systematic review published by Walker et al. on 22 July 2020 notes that the original paper provided important information about mode of delivery selection for SARS-CoV-2-infected pregnant patients and suggested that neonatal infection rates were not different between C-section and vaginal deliveries; however, the severity of the patients' COVID-19 was not considered. The author of this comment notes that pregnant patients with more severe COVID-19 appear to prefer C-section rather than vaginal delivery. Therefore, any potential beneficial effects of C-sections in reducing transmission of SARS-CoV-2 may not be apparent, and this selective bias would weaken the conclusions of current studies. According to the author of this letter, a prospective evaluation on the safety of mode of delivery during SARS-CoV-2 infection is required.	This response to a systematic review published by Walker et al. on 22 July 2020 notes that pregnant patients with more severe COVID-19 seem to prefer C-section rather than vaginal delivery, which may weaken the original study's findings that neonatal infection rates between the two delivery methods do not differ.	Xue RH. Re: Maternal transmission of SARS-COV-2 to the neonate, and possible routes for such transmission: a systematic review and critical analysis. BJOG. 2020;127(13):1713. doi:10.1111/1471-0528.16433
Nigeria, obstetrics, PP, testing	9-Aug-20	COVID-19 and obstetric practice: A critical review of the Nigerian situation	International Journal of Gynecology and Obstetrics	Review Article	This article reviews what is known about COVID-19 and highlights gaps in the context of Nigerian obstetric practice as research data is sparse in Africa. The authors identified the gaps in Nigerian practices, and provide recommendations in order to improve the handling of the COVID-19 pandemic in Nigerian obstetric practice, including organization of more comprehensive PPE, increasing Nigeria's capacity for COVID-testing, and increasing the budget allocation for health resources. The authors state that the obstetrician in Nigeria has not only an under-equipped and under-funded healthcare system to contend with, but also stringent working conditions and poor physical infrastructure. They further state that the pandemic has exposed the gross	The authors review the current literature through the lens of Nigeria's obstetric practice and conclude that basic healthcare needs such as PPE and COVID-testing are baseline necessities that are lacking in obstetrics.	Ijarotimi OA, Ubom AE, Olofinbiyi BA, et al. COVID-19 and obstetric practice: A critical review of the Nigerian situation. Int J Gynaecol Obstet. 2020 Jul 22. doi: 10.1002/ijgo.13325.

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					inadequacies in Nigeria's healthcare system and is therefore a wake-up call to the need for a complete overhaul of infrastructure and services.		
Adenotonsillar hypertrophy, lockdown, OSAS, Therapy, URTIs, Italy	9-Aug-20	COVID-19: Effects of Lockdown on Adenotonsillar Hypertrophy and Related Diseases in Children	International Journal of Pediatric Otorhinolaryngology	Original Research	The authors sought to assess whether symptoms related to adenotonsillar hypertrophy had changed during the COVID-19 lockdown period in Italy after March 5, 2020. 120 children aged 3 to 13 years old and awaiting surgery for adenotonsillar hypertrophy at the Department of Otolaryngology at the University Hospital of Foggia, Italy, were included in the analysis. The participants' parents were asked to complete a questionnaire on their children's symptoms via telephone interview 60 days after the start of the lockdown period. The parents were also asked to score their children's general assessment before and during the lockdown period, using a scale ranging from 0 (remission) to 10 (maximum symptomatology). The authors analyzed the symptoms related to the ear, breathing, and snoring, before and during the lockdown period. The results showed an improvement in the overall symptomatology of children during the lockdown period. Furthermore, the value attributed by parents to the children's general assessment during the lockdown period decreased significantly, indicating improved parental satisfaction.	This study on the effects of the COVID-19 lockdown on adenotonsillar hypertrophy symptoms in children in Italy showed that preventing children's exposure to infectious disease significantly improves their symptoms and parents' overall satisfaction about the health of their children.	Gelardi M, Giancaspro R, Fiore V, Fortunato F, Cassano M. COVID-19: Effects of lockdown on adenotonsillar hypertrophy and related diseases in children [published online, 2020 Aug 9]. Int J Pediatr Otorhinolaryngol. 2020;138:110284. doi:10.1016/j.ijporl.2020.110284
Maternal child health, surveillance, database	9-Aug-20	A Surveillance System for the Maternal and Child Health (MCH) Population During the COVID-19 Pandemic	International Journal of MCH and AIDS	Commentary	The measures to mitigate the spread of SARS-CoV-2, such as lockdowns, limited healthcare access, and school-closure, have negatively affected the Maternal and Child Health (MCH) population. However, no surveillance system exists to enhance understanding of SARS-CoV-2 transmission among the MCH population to guide policy decisions during the COVID-19 pandemic. Based on reports of community and household spread, the authors propose a family-centered surveillance system for the MCH population to capture the dynamics of disease transmission. Health information will be collected at an individual level consisting of socio-demographic characteristics, health information, and travel information. While community level data elements will include information about the built environment, resource availability, and social behaviors. A Type 1 database infrastructure will consist of individual level data elements, and a Type 2 database infrastructure will comprise both individual and community level data elements. Data elements from both Type 1 and Type 2 database infrastructure will be reported to the local, state, and federal government and non-governmental agencies to inform current and future MCH public health policy making.	The authors propose a family-centered surveillance system that captures individual and community-level data for the MCH population. This surveillance system could be used to inform stakeholder, policy makers, and health officials about how to effectively serve the MCH population during the COVID-19 pandemic.	Ajewole VB, Ngujede AE, Oduguwa E, et al. A Surveillance System for the Maternal and Child Health (MCH) Population During the COVID-19 Pandemic. Int J MCH AIDS. 2020;9(3):350-353. doi:10.21106/ijma.411

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Infant, sickle cell disease, D-dimer	9-Aug-20	SARS-CoV-2 infection in pediatric patient with hemoglobin SC disease	Pediatric Blood and Cancer	Letter to the Editor	In this letter, the authors describe the case of a 6-month-old boy with hemoglobin sickle cell disease (SC) who contracted SARS-CoV-2. Upon admission, the patient showed elevated levels of D-dimer, which has been correlated with COVID infection. An X-ray of the patient's chest showed perihilar streaky opacities consistent with the viral process. Throughout his 2-day inpatient stay, the child remained medically stable. The authors postulate that elevated D-dimers should be monitored in patients with SC disease as they may correlate to disease severity. This mild presentation is promising as it suggests that not all infants born with premorbid conditions will develop more severe SARS-CoV-2 infections. The authors are hopeful that this confers the notion that infants with pre-existing health conditions can safely recover from SARS-CoV-2 infection.	This is the first reported case of SARS-CoV-2 in a pediatric sickle cell patient, providing evidence that infants with pre-existing health conditions can safely recover from SARS-CoV-2 infection.	Dagalakis U, Hammershaimb E, McArthur MA, Macatangay RA. SARS-CoV-2 infection in pediatric patient with hemoglobin SC disease [published online ahead of print, 2020 Aug 9]. <i>Pediatr Blood Cancer</i> . 2020;e28430. doi:10.1002/pbc.28430
pediatric; sickle cell; anemia; splenic sequestration	9-Aug-20	A pediatric patient with sickle cell disease presenting with severe anemia and splenic sequestration in the setting of COVID-19	Pediatric Blood & Cancer	Letter to the Editor	The authors report in this letter the first documented case of a child with sickle cell disease complicated by splenic sequestration and concomitant COVID-19 infection. A 2-year 9-month-old male with sickle cell disease presented with transient fever and no other respiratory symptoms. He had an elevated serum ferritin of 4655 ng/mL, and an undetectable hemoglobin level. He was empirically treated with ceftriaxone, had an enlarged spleen on ultrasound, and tested positive for COVID-19. The patient was transfused with packed red blood cells, and his hemoglobin improved to 10.3 g/dL, while ferritin decreased to 867 ng/mL. His splenomegaly improved. The boy never had any other COVID-19 symptoms, either during hospitalization or for 6 weeks afterward. The authors conclude that practitioners should consider possible COVID-19 infection, even when patients do not present with typical symptoms.	This letter documents the case of a pediatric patient with sickle cell disease presenting with splenic sequestration and COVID-19 infection. The child had an isolated fever, but notably showed no other classic COVID-19 symptoms.	Jacob S, Dworkin A, Romanos-Sirakis E. A pediatric patient with sickle cell disease presenting with severe anemia and splenic sequestration in the setting of COVID-19 [published online ahead of print, 2020 Aug 9]. <i>Pediatr Blood Cancer</i> . 2020;e28511. doi:10.1002/pbc.28511
postpartum; obstetric; newborn; skin-to-skin; breastfeeding	9-Aug-20	Skin-to-Skin Contact at Birth in the COVID-19 Era: In Need of Help!	American Journal of Perinatology	Editorial	Skin-to-skin contact (SSC) of mothers and neonates offers many benefits, including improved bonding, infant blood glucose regulation, and newborn temperature stabilization. During the COVID-19 pandemic, some maternity units have discouraged SSC, due to concerns for infant exposure/infection. These authors report that no current data support an increased risk of neonatal COVID-19 infection after SSC, and that the benefits of SSC usually outweigh the theoretical risks. This editorial recommends that, as long as infection prevention measures are followed, the only COVID-positive mothers who should not practice SSC, are those with such severe cases that they physically cannot perform it. This agrees with the stance of the World Health Organization.	With rare exceptions, this editorial recommends that skin-to-skin contact of infants and mothers should continue during the COVID-19 pandemic.	Davanzo R, Merewood A, Manzoni P. Skin-to-Skin Contact at Birth in the COVID-19 Era: In Need of Help! [published online ahead of print, 2020 Aug 9]. <i>Am J Perinatol</i> . 2020;10.1055/s-0040-1714255. doi:10.1055/s-0040-1714255
Anxiety, children, social isolation, Brazil	9-Aug-20	Children's Anxiety and Factors Related to the COVID-19	International Journal of Environmental	Original Research	This study assesses the prevalence of anxiety among Brazilian children and its associated factors during social distancing during COVID-19. 157 girls and 132 boys (n=289) between the ages of 1-12 years were enrolled in a cross-sectional online survey study.	The social consequences of the COVID-19 pandemic have greatly affected children's mental health,	Garcia de Avila MA, Hamamoto Filho PT, Jacob FLDS, et al. Children's Anxiety and Factors Related to the COVID-19

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		Pandemic: An Exploratory Study Using the Children's Anxiety Questionnaire and the Numerical Rating Scale	Research and Public Health		The Children's Anxiety Questionnaire (CAQ) and Numerical Rating Scale (NRS) were used to measure anxiety. The authors report the prevalence of anxiety based on the CAQ was 19.4% (n=56), and higher among children with parents with essential jobs and children who were social distancing without parents. Based on the NRS, the presence of anxiety was 21.8% (n=63). These results are higher than the prevalence reported for children under normal conditions (6.5% according to NRS). However, correlations between a child's anxiety and other factors including age and education of the parents, were only seen in the CAQ scores. These findings suggest the necessity of implementing public health actions targeting these parents and their children at the population level.	with primary triggers including social distancing and those children whose parents are essential workers. This study investigates the effect of these factors on the anxiety prevalence of Brazilian children.	Pandemic: An Exploratory Study Using the Children's Anxiety Questionnaire and the Numerical Rating Scale. Int J Environ Res Public Health. 2020;17(16):E5757. Published 2020 Aug 9. doi:10.3390/ijerph17165757
Gestational diabetes mellitus, self-care, self-management, telehealth, telemedicine	8-Aug-20	COVID-19 and self-care strategies for women with gestational diabetes mellitus	Diabetes & Metabolic Syndrome	Review	Women with gestational diabetes mellitus (GDM) are at increased risk of COVID-19. Due to both the importance of quarantine and social distancing in this population and the need for ongoing monitoring and medical care for GDM patients, the authors conducted a literature review to evaluate self-care strategies for women with GDM during the COVID-19 pandemic. Their results showed that while there is benefit to training women to perform self-care activities during the pandemic through telemedicine services, some situations, such as the first consultation for a new diabetes diagnosis or major changes in prescriptions, are better served by face to face consultation. Overall, self-care programs provided by telemedicine services have demonstrated improvement in maternal and neonatal outcomes in women with GDM.	The authors conducted a literature review to evaluate the self-care strategies for women with gestational diabetes mellitus (GDM) during the COVID-19 pandemic. Self-care programs provided by telemedicine services have demonstrated improvement in maternal and neonatal outcomes in women with GDM.	Moradi F, Ghadiri-Anari A, Enjazab B. COVID-19 and self-care strategies for women with gestational diabetes mellitus. Diabetes Metab Syndr. 2020;14(5):1535-1539. doi:10.1016/j.dsx.2020.08.004
Pediatric, Kawasaki disease, vasculitis, acquired heart disease, MIS-C	8-Aug-20	Kawasaki disease fact check: Myths, misconceptions and mysteries [Free Access to Abstract only]	Journal of Paediatrics and Child Health	Review Article	Kawasaki disease (KD) is an important cause of childhood vasculitis and a common cause of acquired heart disease in children world-wide. The emergence of MIS-C, a hyperinflammatory syndrome associated with SARS-CoV-2 that appears to be distinct from KD, makes this a timely review. Although KD was first described over 50 years ago, there is still no specific diagnostic test and the etiology remains elusive. This article summarizes the latest evidence, highlights important myths and misconceptions, as well as discusses what remains unknown about this disease. While recognizing areas of uncertainty, the authors state that clinicians should have a high index of suspicion for KD, particularly in those outside the typical age range of 1–5 years. Treatment with intravenous immunoglobulin (IVIG) and aspirin remains the mainstay of treatment. The authors note that follow-up and long-term cardiovascular morbidity are determined by presence and severity of coronary artery dilatation.	MIS-C is a hyperinflammatory syndrome recently recognized in children in countries with a high prevalence of COVID-19 that appears to be distinct from Kawasaki disease (KD). The authors provide an review of KD including misconceptions about this condition.	Butters C, Curtis N, Burgner DP. Kawasaki disease fact check: Myths, misconceptions and mysteries [published online, 2020 Aug 8]. J Paediatr Child Health. doi:10.1111/jpc.15101

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Children, clinical characteristics, cardiac manifestations, myocarditis, New York City, USA	8-Aug-20	Cardiac involvement in a pediatric patient with COVID-19: Looking beyond the nonspecific global cardiac injury	Echocardiography	Case report	The authors report the case of a 17-year-old healthy male who presented with multi-system hyper-inflammatory shock temporally associated with COVID-19. Cardiac involvement was suspected based on evidence of significant cardiac injury (elevated cardiac biomarkers, electrocardiographic and echocardiographic abnormalities). Cardiac MRI was performed and demonstrated global bi-ventricular systolic dysfunction, as well as a small area of T2 hyper-intensity and mid-wall late gadolinium enhancement. Clinical laboratory values, EKG, and imaging results are included. This case discusses the varied cardiac involvement in pediatric patients with COVID-19 infection and highlights that cardiac injury is not just limited to hyper-inflammatory syndrome-related global dysfunction, but a more focal myocarditis can also be seen.	The authors present a pediatric case of COVID-19 infection with cardiac injury, and discuss the varied cardiac involvement seen in pediatric cases of COVID-19.	Bhansali S, Minocha P, Phoon C, et al. Cardiac involvement in a pediatric patient with COVID-19: Looking beyond the nonspecific global cardiac injury [published online 2020 Aug 8]. Echocardiography. 2020. doi:10.1111/echo.14814
Children, asymptomatic transmission, PPE, USA	8-Aug-20	COVID-19 and Children: Adding Another Piece to the Puzzle	Clinical Infectious Diseases	Commentary	The authors describe the rapidly evolving information available for understanding SARS-CoV-2 infections in children, particularly regarding frequency of asymptomatic infection and likelihood of transmitting infection. They summarize a study from Poline, et al, which found that 45% of children who tested positive for COVID-19 while hospitalized were asymptomatic at hospital admission, higher than has been found in prior studies. They further summarize that it is still largely unknown how likely children are to transmit infection to others, particularly in a hospital setting. PPE recommendations in light of this uncertainty are challenging to make, especially given the tension between protecting healthcare workers and logistical challenges of PPE shortages.	The authors summarize the current challenge posed by the uncertainty of degree of COVID-19 infection transmission from asymptomatic children, and how best to protect health care workers from possible exposure.	Ristagno EH, Bryant KA. COVID-19 and Children: Adding Another Piece to the Puzzle [published online 2020 Aug 8]. Clin Infect Dis. 2020. doi:10.1093/cid/ciaa1182
Chilblains, pernio, serology, Italy	8-Aug-20	All that glisters is not COVID: low prevalence of seroconversion against SARS-CoV-2 in a pediatric cohort of patients with Chilblain-like lesions	Journal of the American Academy of Dermatology	Research Letter	Previous reports have suggested that chilblains-like lesions (CLL) might be a clinical symptom of SARS-CoV-2 infection. To test this hypothesis, the authors of this article performed serologic and stool/rectal SARS-CoV-2 testing on a cohort of children in Italy with CLL, between 8 March and 30 April 2020. The study included 24 participants with CLL, with a mean age of 13 years. Four (12.5%) of the children tested positive for SARS-CoV-2; none of the four had a fever, two had a cough, and one had diarrhea. This study does not confirm a direct link between SARS-CoV-2 and CLL. The authors suggest that another cause may be responsible for recent CLL cases.	These authors questioned whether CLL may be a manifestation of SARS-CoV-2 infection. The cohort of children with CLL in this study demonstrated low prevalence of SARS-CoV-2, showing no direct connection between CLL and SARS-CoV-2 infection.	Denina M, Pellegrino F, Morotti F, et al. All that glisters is not COVID: low prevalence of seroconversion against SARS-CoV-2 in a pediatric cohort of patients with Chilblain-like lesions [published online ahead of print, 2020 Aug 8]. J Am Acad Dermatol. 2020;S0190-9622(20)32409-9. doi:10.1016/j.jaad.2020.08.021
Visitation restrictions, ethical considerations, solutions	8-Aug-20	Visitation restrictions: is it right and how do we support families in the NICU during COVID-19?	Journal of Perinatology	Review	Although the COVID-19 pandemic has largely not clinically impacted infants in neonatal intensive care units, it has affected how care is provided. Most hospitals have reduced parental and family visitation privileges, but there is limited information discussing repercussions of limitations to visitation rights. From an ethical perspective, the restriction of parental visitation in settings where infectious disease risk is difficult to understand. The review details how NICUs are currently supporting families of	The authors present a number of mechanisms that NICUs can utilize to ensure that families and infants continue to be supported both in the hospital and when they	Murray PD, Swanson JR. Visitation restrictions: is it right and how do we support families in the NICU during COVID-19? [published online ahead of print, 2020 Aug 8]. J Perinatol. 2020;1-6. doi:10.1038/s41372-020-00781-1

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					their patients via different mechanisms. The authors discuss the ways NICUs can support parents and families when they are home and when they are in the NICU as well as provide infants the support needed when family members are not able to visit.	are away from the hospital.	
Breast milk, breastfeeding, case series, donor breast milk, infant formula, Spain	8-Aug-20	Breastfeeding mothers with COVID-19 infection: a case series	International Breastfeeding Journal	Case Series	The potential for viral transmission from mother to newborn through breastmilk remains uncertain. Consequently, various health organizations disagree on breastfeeding management in confirmed COVID-19 patients. In this retrospective study, authors present a series of representative cases of 22 newborns delivered by mothers with COVID-19 infections from March 14th to April 14th, 2020, in Spain who were then followed for a median period of 1.8 consecutive months. Out of 22 mothers, 20 (90.9%) chose to breastfeed their infants during hospital admission. Timely initiation and skin-to-skin contact at delivery room was performed in 54.5% and 59.1%, respectively. 82% of newborns to mothers with COVID-19 were fed with breast milk after 1 month, decreasing to 77% at 1.8 months. Six of 22 (37.5%) mothers with COVID-19 required transitory complementary feeding until exclusive breastfeeding was achieved. During follow-up period, there were no major complications, and no neonates were infected during breastfeeding. As a result, authors concluded that breastfeeding in newborns of mothers with COVID-19 is safe with the adequate infection control measures to avoid mother-infant contagion, including but not limited to respiratory hygiene, routine cleaning of surfaces and infant feeding equipment, and thorough hand washing before and after contact with the newborn.	The authors from a study in Spain argue that whenever possible, breastfeeding by COVID-19 confirmed mothers should be encouraged at any time. With adequate infection control measures to avoid mother-infant contagion, breastfeeding in newborns of mothers with COVID-19 infections remains safe.	Pereira A, Cruz-Melguizo S, Adrien M, et al. Breastfeeding mothers with COVID-19 infection: a case series. Int Breastfeed J. 2020;15(1):69. Published 2020 Aug 8. doi:10.1186/s13006-020-00314-8
Children, Spain, heart disease, Infants	8-Aug-20	Fatal outcome of COVID-19 disease in a 5-month infant with comorbidities	Revista Espanola de Cardiologia	Letter to the Editor	The authors of this letter review the case of a child diagnosed with heart failure and mucopolysaccharidosis type I-Hurler syndrome at one month of age. He received heart failure treatment and was discharged to home with continuing enzyme replacement therapy. At 5 months of age, the boy was again hospitalized with fever, respiratory symptoms, and vomiting, and tested positive for SARS-CoV-2. His condition deteriorated within 72 hours of admission, and the patient suffered a fatal cardiac arrest. This letter notes that little has been reported about infants with SARS-CoV-2 infections and a comorbidity of severe heart disease and suggests that such research be performed.	This letter discusses the fatal case of a child with severe heart disease and SARS-CoV-2. The authors suggest further investigation into SARS-CoV-2 infections in pediatric patients with cardiac comorbidities.	Climent FJ, Calvo C, García-Guereta L, et al. Fatal outcome of COVID-19 disease in a 5-month infant with comorbidities. Rev Esp Cardiol (Engl Ed). 2020;73(8):667-669. doi:10.1016/j.rec.2020.04.011
Herd immunity, healthcare, Sweden	8-Aug-20	COVID-19—a very visible pandemic	The Lancet	Correspondence	The author responds to Giesecke's letter in which he argues for a "relaxed strategy" or the development of herd immunity as the way forward in dealing with the COVID-19 pandemic. The author disagrees with Giesecke's recommendation and explains how the relaxed strategy is entirely predicated on the trajectory of COVID-19 cases in Sweden, which is quite different from the rest of the world. He also explains how proposing a relaxed strategy	The author disagrees with Giesecke's "relaxed strategy" to combat the COVID-19 pandemic and suggests that the optimal strategy, even in a setting with scarce resources,	Ramachandran R. COVID-19—a very visible pandemic. The Lancet. 08 Aug 2020;396(10248):e13-e14. doi:10.1016/s0140-6736(20)31673-1

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					overlooks the real possibility of health-care systems being overwhelmed, especially in countries with susceptible populations and limited resource settings. He believes that a hard lockdown strategy will only slow down and delay, but not entirely eliminate, cases of the infection and that testing, isolating, and contact tracing are crucial.	would be to test, isolate, and contact trace, alongside an emphasis on universal mask-wearing, hand hygiene, and physical distancing.	
Infants, intussusception, Wuhan, London	8-Aug-20	Intussusception in two children with SARS-CoV-2 infection in children	Journal of the Pediatric Infectious Diseases Society	Brief report	This report compares intussusception as likely associated with SARS-CoV-2 infection in 2 infants that presented in Wuhan, China and London, UK. The presentation and clinical course of both infants are presented. The intussusception in Wuhan was reduced by enemas, and the outcome was fatal. The intussusception in London was not reduced by enemas and required surgery, with a favorable outcome. The authors urge front-line pediatricians to consider SARS-CoV-2 infection when managing a child with intussusception and to consider taking appropriate precautions, watching for any possible respiratory deterioration.	The authors summarize two cases of intussusception in infants with a possible association to SARS-CoV-2 infection, encouraging pediatricians to consider possible SARS-CoV-2 infection when managing an infant with intussusception.	Mafrinioti H, Mac Donald A, Lu X, et al. Intussusception in two children with SARS-CoV-2 infection in children [published online 2020 Aug 8]. J Pediatric Infect Dis Soc. 2020. doi:10.1093/jpids/piaa096
Israel, children, pediatricians, mask-wearing	8-Aug-20	Masked pediatricians during the COVID-19 pandemic and communication with children	Journal of Pediatric Child Health	Brief Communication	Extensive use of face masks during the COVID-19 pandemic poses a challenge for pediatric clinicians who rely on facial expression to engage with patients and overcome fear of apprehension. Because the only previous study to address this excluded younger children, who may be the most fearful, and did not compare to a control group, the authors assessed the experience of pediatric health professions on the effect of mask-wearing on engaging with patients and factors associated with increased difficulty and clinicians' ideas for overcoming this difficulty. They distributed a survey throughout networks of pediatric health professionals in Israel in May 2020. Out of 356 respondents, the majority agreed that mask-wearing interrupts their ability to interact with children (82%), and that children are more fearful of mask-wearing clinicians (63%). Over half experienced difficulty effectively assessing or treating patients while wearing a mask (59%). There were significant differences in clinicians' reported difficulty in engaging with patients when comparing mask-wearing during the pandemic to previous routine practice ($p < 0.005$). This effect was more pronounced at younger ages; for patients aged 6 months to 2 years, 20% of all clinicians reporting their experiences as 'difficult' or 'very difficult' with mask-wearing during the pandemic, as opposed to 4% during previous routine practice. The majority of respondents picked strategies focused on non-verbal communication (57%) as a tool to effectively compensate for the added difficulty posed by mask-wearing.	The authors highlight the multitude of communication challenges posed by mask-wearing (particularly while treating infants), and a need for further research on compensatory strategies for pediatric clinicians.	Shack AR, Arkush L, Reingold S, Weiser G. Masked paediatricians during the COVID-19 pandemic and communication with children [published online ahead of print, 2020 Aug 8]. J Paediatr Child Health. 2020;10.1111/jpc.15087. doi:10.1111/jpc.15087

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COVID-19; vaccine hesitancy; parental attitudes	7-Aug-20	Willingness to Vaccinate Children against Influenza after the Coronavirus Disease 2019 Pandemic	The Journal of Pediatrics	Original Research	This study aims to better understand how COVID-19 has influenced attitudes toward influenza vaccination by examining characteristics of caregivers who plan to immunize their children in 2020-2021, especially those who did not vaccinate against influenza last year. An online survey of caregivers accompanying their children aged 1-19 years old in 17 pediatric emergency departments (ED) in 6 countries (USA, Canada, Israel, Japan, Spain, and Switzerland) was carried out. The survey included caregiver and child demographic information, vaccination history and future intentions, and concern about the child and caregiver having COVID-19 at the time of the ED visit. There were 2422 respondents; the median age of caregivers was 40 years (SD=7.6), and the median age of the children was 8.3 years (SD=4.6). 1314 caregivers (54.2%) stated they plan to vaccinate their child against influenza in 2020-2021, a 15.8% increase from the previous year. Of 1459 caregivers who did not vaccinate their children in 2019, 418 (28.6%) plan to do so in 2020-2021. Factors predicting willingness to change and vaccinate included child's up-to-date vaccination status (aOR=2.03, 95% CI=1.29-3.32, P=0.003), caregivers' influenza vaccine history (aOR=3.26, 95% CI=2.41-4.40, P<0.010), and level of concern their child had COVID-19 (aOR=1.09, 95% CI=1.01-1.17, P=0.022). Changes in risk perception due to COVID-19 and previous vaccination may influence decision-making among caregivers regarding influenza vaccination in the coming season. Public health programs can use this information to promote influenza vaccination among children.	This study aims to better understand how COVID-19 has influenced attitudes toward influenza vaccination by examining characteristics of caregivers who plan to immunize their children in 2020-2021, especially those who did not vaccinate against influenza last year. A 15.8% increase in caregivers intending to vaccinate their children was observed. Changes in risk perception due to COVID-19 and previous vaccination may influence decision-making among caregivers regarding influenza vaccination in the coming season.	Goldman RD, McGregor S, Marneni SR. Willingness to Vaccinate Children against Influenza after the Coronavirus Disease 2019 Pandemic. J Pediatr. 2021;228:87-93.e2. doi:10.1016/j.jpeds.2020.08.005.
Pregnancy, placenta, clots, vertical transmission, ACE2	7-Aug-20	COVID-19 unlikely to cause birth defects, but doctors await fall births	Science	Report	In this article, the author discusses the effects of SARS-CoV-2 infection during pregnancy, focusing on the possibility of vertical transmission and the impact of the virus on the placenta. The author describes a case study of nearly 700 pregnant women admitted to three New York (USA) hospitals for delivery, in which all 71 infants born to infected mothers were uninfected themselves. Another study demonstrated that placental cells rarely simultaneously express a pair of molecules that the virus relies on to invade cells: ACE2 and TMPRSS-2. These indicate that vertical transmission, if possible, is unlikely. The author also shares data on placental findings: in one study, clots in blood vessels on the fetal side of the placenta were present in nearly half (14/29) of COVID-19–infected mothers. Only 11% of placentas (12/106) from uninfected mothers had similar clots. Another study found significantly more blood vessel injury and clots on the maternal side of the placenta in infected women than in controls. Finally, the author concludes that there are few	In this article, the author shares data on SARS-CoV-2 infection in pregnancy, focusing on data regarding vertical transmission and on placental changes. There is little data on the impact of viral infection with SARS-CoV-2 during the first trimester.	Wadman M. COVID-19 unlikely to cause birth defects, but doctors await fall births. Science. 2020 Aug 7;369(6504):607. doi: 10.1126/science.369.6504.607.

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					data on the impact of maternal infection during the first trimester.		
Pregnancy, kidney injury, nephrology, clinical course	7-Aug-20	COVID-19 Pandemic and Pregnancy in Kidney Disease	Advances in Chronic Kidney Disease	Original Article	In this review, the authors outline the clinical course, pregnancy outcomes, and management of women with COVID-19 in pregnancy and share the nephrologist perspective, focusing on those with kidney involvement. They provide the following conclusions: Social distancing, hand hygiene, and delivery of antenatal care via telemedicine can help in reducing the exposure to SARS-CoV-2 in pregnant women. Clinical manifestations of COVID-19 in pregnant women are similar to non-pregnant patients; however, they should be closely monitored for worsening of the disease. Symptomatic women with COVID-19 have an increased frequency of preterm births and C-section. Pregnant women with COVID-19 are at risk of developing acute kidney injury which needs to be differentiated from other causes of pregnancy-related acute kidney injury. Pregnant women with COVID-19 and underlying chronic kidney disease and kidney transplant are at a higher risk for maternal and fetal complications and warrant close monitoring.	The authors summarize the clinical course of COVID-19 in pregnancy, adding considerations from the nephrologist perspective regarding kidney involvement.	Bajpai D, Shah S. COVID-19 pandemic and pregnancy in kidney disease. <i>Advances in Chronic Kidney Disease</i> . 2020 Aug 7.
Asthma, children, Iran, foreign body	7-Aug-20	Challenges in a child with asthma and COVID-19	New Microbes and New Infections	Case Report	The authors report the case of a child with asthma with an initial diagnosis of COVID-19 pneumonia whose clinical course revealed an underlying condition. On 28 March 2020, a 7-year-old boy was referred to a pediatric emergency department in Iran presenting with dry cough, fever, headache, malaise and dyspnea for 3 days, with no gastro-intestinal symptoms. CT images did not reveal any lung abnormalities. He had a 2-year history of asthma and allergy with intermittent treatment with salbutamol and fluticasone sprays. Physical examination revealed tachypnoea and oxygen saturation of 90%. Reduced breath sounds in left lung and diffuse wheezing in right lung were detected. He was admitted to the pediatric ICU and isolated. Lab results revealed a white blood cell count of 12 500/ μ L with 10% lymph, C-reactive protein 58 mg/L, erythrocyte sedimentation rate 48 mm/h and lactate dehydrogenase 418 U/L. Arterial blood gas showed mild respiratory acidosis. RT-PCR assay was positive for SARS-CoV-2 and pneumonia was detected by chest x-ray. The patient was treated with vancomycin, meropenem, salbutamol and fluticasone sprays, IV hydrocortisone and pantoprazole, along with chloroquine and oseltamivir after COVID-19 diagnosis. Bronchoscopy showed a 0.5 cm mass in the left main bronchus, 2 cm away from the carina. A pathology report affirmed it was a nonviable foreign body consisting mainly of dietary fibers. On the 8th day, the patient improved clinically and was discharged with amoxicillin clavulanate syrup and chloroquine tablets. The	The authors report the case of a 7-year-old child in Iran with asthma and an initial diagnosis of COVID-19 pneumonia whose clinical course revealed an underlying condition.	Kamali Aghdam M, Sadeghzadeh M, Sadeghzadeh S, Namakin K. Challenges in a child with asthma and COVID-19. <i>New Microbes and New Infect</i> . 2020 Sep;37:100740. doi: 10.1016/j.nmni.2020.100740. Epub 2020 Aug 7. PMID: 32834903; PMCID: PMC7411421.

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					authors caution that in pandemics such as COVID-19, underlying hidden causes other than COVID-19 must not be neglected.		
Breastfeeding, infants, safety	7-Aug-20	Infant feeding at the time of COVID-19: Is it safe to breastfeed?	Journal of Clinical Neonatology	Letter to the Editor	Recommendations regarding mother-infant contact and breastfeeding for mothers with COVID-19 are conflicting. Most reports and recommendations, however, acknowledge that postpartum contact with infants and breastfeeding might present potential risks for viral transmission from mothers with COVID-19 through respiratory droplets. The options discussed by the author in this letter include: (1) expressed breast milk, (2) accepting the potential risk of breastfeeding, (3) bottled formula, and (4) donor milk. While the beneficial effects of breastfeeding are fully recognized, a well-balanced discussion with the parents for or against breastfeeding should enable an informed decision. This guidance should address: risks and benefits of breastfeeding, potential presence of viral antibodies, risk of infection via health-care providers, and the care needed during handling the neonate to avoid infection, as well as the alternative feeding options.	The author of this letter discusses potential risks, options, and alternatives for breastfeeding neonates during the COVID-19 pandemic. The importance of fully informed parental decision-making facilitated by health-care providers is also detailed.	Mosalli R. Infant feeding at the time of COVID-19: Is it safe to breastfeed?. J Clin Neonatol. 2020;9(3):229. doi:10.4103/jcn.jcn_64_20
herbal, ACE2, TMPRSS2, treatment	7-Aug-20	Medical Plants as Sources of Active Molecules Against COVID-19	Frontiers in Pharmacology	Review Article	Since the beginning of the COVID-19 pandemic, different traditional herbal medicines with promising results have been used alone or in combination with conventional drugs to treat infected patients. This article reviews recent findings regarding the use of natural and herbal products as a means of treating and preventing COVID-19, as well as the biological mechanisms responsible for the observed effect. Evidence suggests that the different herbal extracts and purified molecules may directly inhibit virus replication or entry. Additionally, some products may block the ACE2 receptor or TMPRSS2 (serine protease required for infection), and some were shown to inhibit the SARS-CoV-2 life-cycle related proteins such as papain-like or chymotrypsin-like proteases. The authors suggest that the evidence supports the use of natural products as alternative medicines to treat/prevent COVID-19.	This review summarizes the effects of natural and herbal remedies for the treatment and prevention of COVID-19. Most notably, these methods can inhibit virus entry or replication, and some may also inhibit vital proteins needed for the viral life cycle.	Benarba B, Pandiella A. Medicinal plants as sources of active molecules against COVID-19. Frontiers in pharmacology. 2020; doi: 10.3389/fphar.2020.01189.
Pregnant women, opioid use disorder, telehealth, mental health, USA	7-Aug-20	Unintended consequences of the transition to telehealth for pregnancies complicated by opioid use disorder during the coronavirus disease 2019 pandemic	American Journal of Obstetrics and Gynecology	Research Letter	This report described the impact of the implementation of telehealth services for a cohort of pregnant women with opioid use disorder (OUD). This study analyzed 13 patients who had enrolled in the obstetrical OUD treatment program with stable medication-assisted therapy (MAT) dosing 4 weeks before the first case of COVID-19 in Ohio, USA and continued prenatal care through virtual-only (April 1, and May 26, 2020) and combined in-person and virtual care (reopening phase, after May 27, 2020) periods. Findings showed that when compared with in-person sessions, attendance to group therapy sessions virtually was significantly lower by more than 3-fold. Besides, the total number of patients requiring up-titration in MAT dosage increased significantly because of intensified cravings during the period of	This report of 13 pregnant women with opioid use disorder in Ohio, USA suggested that the switch from in-person to virtual-only group visits compounded change within this population and led to decreased attendance of therapy sessions and up-titration of medication-assisted	McKiever ME, Cleary EM, Schmauder T, et al. Unintended consequences of the transition to telehealth for pregnancies complicated by opioid use disorder during the coronavirus disease 2019 pandemic [published online, 2020 Aug 7]. Am J Obstet Gynecol. 2020;S0002-9378(20)30831-0. doi:10.1016/j.ajog.2020.08.003

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					virtual-only sessions and there was a notable trend toward higher emergency department and/or obstetrical triage visits, reported assaults, and craving scores. 2 (15%) women reported Impact of Event Scale-Revised scores of >34 (IES-R score≥33 means a probable diagnosis of PTSD), which is concerning for COVID 19-specific distress. The authors concluded that the switch from in-person to virtual-only group visits compounded change within this population and led to decreased attendance of therapy sessions and up-titration of MAT secondary to cravings.	therapy secondary to cravings.	
Down's Syndrome, breast cancer	7-Aug-20	Down's syndrome, breast cancer and COVID-19	Science Direct	Clinical Report	In this clinical report, authors present the case of 38-year-old women with Down's Syndrome who in February 2019 was diagnosed with invasive ductal carcinoma. On March 15, 2020, the patient was admitted to the emergency department and subsequently tested positive for COVID-19. While the patient was discharged 9 days after admission, authors conclude a probable increase in the severity of the COVID-19 infection in patients with Down's Syndrome, particularly those with an additional history of cancer.	The association of two possible risk factors for a severe case of COVID-19, a history of cancer and Down's Syndrome, makes it essential to protect this vulnerable group so as to avoid a possible fatal COVID-19 infection.	Alvarez M.A.L, Marino A.M, Perez M.P; Down's syndrome, breast cancer and COVID-19, Science Direct, Published Online August 7, 2020, https://doi.org/10.1016/j.mcpsp.2020.100153
Infant outcome, maternal outcome	7-Aug-20	Potential Effect of COVID-19 on Maternal and Infant Outcome: Lesson From SARS	Frontiers in Pediatrics	Review Article	Given the close relationship between SARS-CoV-2 and SARS-CoV viruses, these authors seek to compare the transmission and effects in pregnant women and infants, of COVID-19 infection to SARS infection from the 2002-2003 outbreak. They review several reports on COVID-19, comprising a total of 80 pregnant patients and 80 infants. (Note: The authors did not include information on their methodology for gathering or choosing their included reports.) COVID-19 spreads more easily than SARS, but has a lower case fatality rate. This article reports no cases of vertical transmission for SARS, and no conclusive evidence for vertical transmission for COVID-19, but the authors urge further research on this topic. In the cases the authors reference, there were no positive SARS-CoV-2 RT-PCR results in neonates within 24 hours of birth, but a few showed IgM antibodies to SARS-CoV-2. The authors hypothesize that inflammation from a COVID-19 infection in pregnancy may disrupt the placental or amniotic barrier, thus facilitating the transport of antibodies to the fetus.	Given the close relationship between SARS-CoV-2 and SARS-CoV viruses, these authors seek to compare the transmission and effects in pregnant women and infants, of COVID-19 infection to SARS infection from the 2002-2003 outbreak.	Wang Y, Wang Y, Han X, Ye J, Li R. Potential Effect of COVID-19 on Maternal and Infant Outcome: Lesson From SARS. <i>Front Pediatr.</i> 2020;8:511. Published 2020 Aug 7. doi:10.3389/fped.2020.00511
Family, food insecurity, health behavior, stress, Canada, young children	7-Aug-20	The Impact of COVID-19 on Health Behavior, Stress, Financial and Food Security among Middle to High Income Canadian Families with Young Children	Nutrients	Original Article	The purpose of the study was to understand how health-related behaviors, level of stress, financial and food security have been impacted by the COVID-19 pandemic among a sample of Canadian families with young children. The authors collected data from an online survey administered between April 20-May 15, 2020 among parents (mothers, n = 235 and fathers, n = 126) from 254 families. More than half of the families reported that their eating and meal routines have changed since COVID-19; most commonly reported changes were eating more snack foods and spending more time cooking. Screen time increased among 74%	This is one of the first studies in Canada to identify the impact of COVID-19 on health-related behaviors and stress levels among families with young children. The majority of families reported increased screen time,	Carroll N, Sadowski A, Laila A, et al. The Impact of COVID-19 on Health Behavior, Stress, Financial and Food Security among Middle to High Income Canadian Families with Young Children. <i>Nutrients.</i> 2020;12(8):E2352. Published 2020 Aug 7. doi:10.3390/nu12082352

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					of mothers, 61% of fathers, and 87% of children, and physical activity decreased among 59% of mothers, 52% of fathers, and 52% of children. Key factors influencing family stress include balancing work with childcare/homeschooling and financial instability.	decreased physical activity, and changes in eating. Key stressors include balancing work with childcare/homeschooling and financial instability.	
Food insecurity, socio-economic status, race/ethnicity, neighborhood, US	7-Aug-20	Food insecurity in households with young children: A test of contextual congruence	Social Science and Medicine	Original Research	Though rates of food insecurity in the US declined to pre-recession levels just prior to the COVID-19 pandemic, they are now once again increasing. Insufficient attention has been paid to the neighborhood conditions that increase or decrease children's vulnerability to food insecurity. This study used geo-coded data from the Early Childhood Longitudinal Study-Kindergarten Class of 2010–2011 (ECLS-K) for children in families with incomes below 400% of the federal poverty line (N = 8600). Results show that congruence between household and neighborhood education and race/ethnicity associates with a lower likelihood of food insecurity. For example, households with non-Hispanic black children in neighborhoods with high proportions of non-Hispanic blacks experience less food insecurity than similar households living in neighborhoods with smaller black populations. Similarly, food secure children live in neighborhoods with greater educational heterogeneity. Future research and policy efforts should consider the differential impact of neighborhood conditions on households based on congruence, rather than as absolute and independent risk factors.	This study measured childhood food insecurity (kindergarten age) in US households with incomes 400% below the poverty level. Results indicate that household food insecurity for black children was lower in neighborhoods with more black residents.	Denney JT, Brewer M, Kimbro RT. Food insecurity in households with young children: A test of contextual congruence [published online, 2020 Aug 7]. Soc Sci Med. 2020;263:113275. doi:10.1016/j.socscimed.2020.113275
Pregnancy, pneumonia, inflammation, cardiovascular, Brazil	7-Aug-20	COVID-19: A New Challenge In Pregnancy and Heart Disease	Brazilian Archives of Cardiology	Review Article	Epidemiological data indicate worse evolution and higher mortality for patients with COVID-19 that also have chronic diseases. The Brazilian Ministry of Health has expanded this high-risk group to pregnant women, puerperal women, and women after an abortion. This review explores the effects of SARS-CoV-2 infection on the cardiorespiratory system. The authors posit that COVID-19 can lead to cardiac injury by multiple mechanisms, resulting in an extreme inflammatory response, which could result in increased risk of atherosclerotic plaque rupture and acute myocardial infarction. They also link the ACE2 receptor, which has been shown to be a receptor for the SARS-CoV-2 virus, as playing a key role in blood pressure and cardiovascular physiology in pregnant women. The authors highlight the need for clinicians to be prepared to prevent and treat cardiovascular complications during pregnancy in those infected with SARS-CoV-2.	Inflammatory response due to SARS-CoV-2 infection in pregnant women could result in severe cardiovascular complications. A review conducted in Brazil highlights the need for specific attention to cardiac-related symptoms in pregnant women.	Avila WS, Carvalho RC. COVID-19: A New Challenge in Pregnancy and Heart Disease. COVID-19: Um Novo Desafio para a Cardiopatia na Gravidez. Arq Bras Cardiol. 2020;115(1):1-4. doi:10.36660/abc.20200511

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Children, clinical characteristics, cardiac manifestations, myocarditis, MIS-C	7-Aug-20	Cardiac Involvement in Children With COVID-19	Indian Pediatrics	Special article	This review summarizes cardiac manifestations, diagnosis and management in pediatric cases of COVID-19 infection. Currently available data indicate that cardiac involvement in children with COVID-19 is not common in general, but it is common and can be severe among children with MIS-C. In MIS-C, cardiac manifestations can include perturbation of cardiac chamber size and/or function, coronary artery abnormalities, and elevated cardiac biomarkers. The authors conclude that electrocardiography, cardiac imaging, and cardiac biomarkers may be helpful in diagnosis, and that IVIG may have a role in treatment of children with cardiac involvement, with steroids or immuno-modulators as options for patients with a sub-optimal response to IVIG. The authors also express that inotropes should be initiated in children with MIS-C if clinically indicated.	The authors characterize cardiac involvement in children with COVID-19, with a description of cardiac manifestations in MIS-C and a summary of treatment options.	Kohli U, Lodha R. Cardiac Involvement in Children With COVID-19 [published online 2020 Aug 7]. Indian Pediatr. 2020;5097475591600222.
Pregnancy, maternal health, osteopathy	7-Aug-20	Osteopathic Considerations for the Pregnant Patient with COVID-19	The Journal of the American Osteopathic Association	Review Article	This narrative review evaluates the literature on coronaviruses, including COVID-19, on maternal health outcomes. It describes physiologic changes in pregnancy that are protective and those that are potentially adverse. It further summarizes fetal consequences seen thus far with COVID-19. It also summarizes management of pregnant women with COVID-19, with an emphasis on osteopathic manipulative treatment (OMT) modifications that can be used for pregnant women with COVID-19 in inpatient and outpatient settings. The authors conclude that OMT is safe and effective for many symptoms associated with COVID-19 and employing these techniques with appropriate modifications in pregnancy may be beneficial.	The authors review the literature of management of COVID-19 in pregnant patients and describe modifications to osteopathic manipulative treatment that could be used in treating these patients.	Gray KM, Murphy L, Buckner B. Osteopathic Considerations for the Pregnant Patient with COVID-19 [published online 2020 Aug 7]. J Am Osteopath Assoc. 2020. doi:10.7556/jaoa.2020.112
School closures, K-12, San Francisco Bay Area, California, USA, infection control	7-Aug-20	The effect of school closures and reopening strategies on COVID-19 infection dynamics in the San Francisco Bay Area: a cross-sectional survey and modeling analysis	medRxiv	Preprint (not peer-reviewed)	Large-scale school closures have been implemented worldwide to curb the spread of COVID-19 but the impact of school closures and re-opening on infection dynamics remains unclear. This study simulated COVID-19 transmission dynamics in the San Francisco Bay Area, USA using an individual-based stochastic model and social-contact data of school-aged children from household surveys. Observed conditions and counterfactual intervention scenarios were used to evaluate various reopening strategies for the fall 2020 in kindergarten through 12th grade. Findings between March 17-June 1 estimated school closures averted a similar number of infections (13,842 cases; 95% CI: 6,290, 23,040) as workplace closures (15,813; 95% CI: 9,963, 22,617) and social distancing measures (7,030; 95% CI: 3,118, 11,676). The authors estimate that fall 2020 school reopenings will increase symptomatic illness among high school teachers (an additional 40.7% with symptomatic infection, 95% CI: 1.9, 61.1), middle school teachers (37.2%, 95% CI: 4.6, 58.1), and elementary school teachers (4.1%, 95% CI: -1.7, 12.0). A hybrid-learning approach is	This study incorporated cross-sectional survey data and modeling analysis to simulate COVID-19 transmission in kindergarten through 12th grade schools. Various school reopening strategies for the San Francisco Bay Area were evaluated.	Head JR, Andrejko K, Cheng Q, et al. The effect of school closures and reopening strategies on COVID-19 infection dynamics in the San Francisco Bay Area: a cross-sectional survey and modeling analysis. [Published online, 2020 Aug 7]. medRxiv. doi:10.1101/2020.08.06.20169797

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					recommended with class sizes of 10 students in high schools and 20 students in elementary schools.		
Transmissibility, risk factors, contact tracing, children, school setting	7-Aug-20	Infectivity, susceptibility, and risk factors associated with SARS-CoV-2 transmission under intensive contact tracing in Hunan, China	medRxiv	Preprint (not peer-reviewed)	The authors collected data from SARS-CoV-2 infected individuals (n=1,178) and their contacts (n=15,648 tested, 471 positive for SARS-CoV-2) from 13 January-2 April 2020 in Hunan Province, China. Infectiousness was estimated to peak 1.8 days before symptom onset, with 95% of transmission events occurring between 7.6 days before and 7.3 days after the date of symptom onset. The proportion of pre-symptomatic transmission was estimated to be 62.5%. SARS-CoV-2 transmissibility was not significantly different between working-age adults (15-59 years old) and other age groups (0-14 years old: p=0.16). Susceptibility to SARS-CoV-2 infection was estimated to increase with age (p=0.03). Cases aged 0-19 years presented milder or no clinical symptoms, while patients aged 40 years and older had more severe illness (p<0.001). The authors conclude that these findings warn of the possible relevant contribution of children to SARS-CoV-2 transmission. Therefore, with the relaxation of lockdown measures, other settings (including schools) could bear a higher risk of transmission.	In a study of SARS-CoV-2 transmission and infection in China, the authors found no statistical evidence of differential transmissibility by age group. They conclude that this finding supports that policies which increase the number of contacts among children, such as re-opening of schools or summer camp, should be evaluated cautiously.	Hu S, Wang W, Wang Y, et al. Infectivity, susceptibility, and risk factors associated with SARS-CoV-2 transmission under intensive contact tracing in Hunan, China. Preprint. [Published online, 2020 Aug 7]. medRxiv. doi:10.1101/2020.07.23.20160317
Ethics, perinatal, neonatal, justice	7-Aug-20	Professionally responsible advocacy for women and children first during the COVID-19 pandemic: guidance from World Association of Perinatal Medicine and International Academy of Perinatal Medicine	Journal of Perinatal Medicine	Commentary	Numerous ethical dilemmas have arisen during the COVID-19 pandemic. The authors delineate an ethical framework for the responsible clinical management of pregnant, fetal, and neonatal patients by perinatal physicians. The ethical framework is rooted in the theoretical tenants of ethical reasoning, which includes the principles of beneficence, respect for autonomy, and justice, along with professional integrity and self-sacrifice. These professional ethical obligations should guide decision making with patients and parents. The COVID-19 pandemic has revealed specific ethical challenges, such as counseling patients about a hospital or home birth. Perinatal physicians should employ evidenced-based strategies to articulate medical risk while balancing ethical respect of autonomy. Furthermore, as healthcare systems experience increased clinical strain during the pandemic, perinatal physicians may need to so-called frameshift their patient management. Frameshifting applies medically reasonable decision making on a population-level to ensure the healthcare organization maximizes its resources and ability to manage many patients. This may dictate how perinatal physicians ethically allocate clinical space, medication, and life-sustaining treatment throughout the pandemic.	This paper provides perinatal physicians with an ethically justified approach to providing care for women and children during the COVID-19 pandemic. However, frameshifting may be necessary to put the lives and health of the population served by the healthcare system first.	Chervenak FA, McCullough LB, Grünebaum A, et al. Professionally responsible advocacy for women and children first during the COVID-19 pandemic: guidance from World Association of Perinatal Medicine and International Academy of Perinatal Medicine [published online, 2020 Aug 7]. J Perinat Med. doi:10.1515/jpm-2020-0329
UK, MIS-C, PIMS-TS, cardiac, echocardiography	7-Aug-20	Multimodality cardiac evaluation in children and	The European Heart Journal of	Original Research	A novel multisystem inflammatory syndrome associated with prior exposure to SARS-CoV-2 infection has been observed in children and young adults. This novel syndrome is termed pediatric inflammatory multisystem syndrome temporally	This study demonstrates that the extent of cardiac involvement in PIMS-TS is greater than initially	Theocharis P, Wong J, Pushparajah K, et al. Multimodality cardiac evaluation in children and young adults with

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		young adults with multisystem inflammation associated with COVID-19 [Free Access to Abstract only]	Cardiovascular Imaging		associate with SARS-CoV-2 infection (PIMS-TS) or multisystem inflammatory syndrome in children (MIS-C). While significant cardiac involvement is reported in cases of PIMS-TS, a detailed description of the cardiac manifestation of this inflammatory syndrome is lacking. This is a single-center study that used multimodality cardiac imaging to trace the cardiac trajectory of PIMS-TS in 20 patients (mean age 10.6) from the UK. The authors used echocardiography at admission (median day 5 of illness), on the day with worst cardiac function (median day 7), and the day of discharge (median day 15). Cardiac computed tomography (CT) and cardiac magnetic resonance imaging (CMR) were also performed to assess dysfunction. The imaging revealed that on admission almost all patient had abnormal strain and tissue Doppler. An ejection fraction (EF) < 55% was observed in half the patients. Valvular regurgitation (75%) and small pericardial effusions (10%) were also detected. Serial echocardiography showed that the mean EF deteriorated but improved at discharge. Left main coronary artery dimensions were significantly larger at discharge than at admission. CMR identified abnormal strain in all patients with global dysfunction (35%) and myocardial edema (50%). The authors conclude that pan carditis with cardiac dysfunction associated with myocardial edema is common in patients with PIMS-TS. Therefore, these patients require close monitoring due to coronary artery dilation and potential risk of thrombotic myocardial infarction.	reported and is accompanied with evolving cardiac impairment and coronary changes. Patient that present with PIMS-TS should be screen with basic and advanced echocardiography and multimodality cardiac imaging.	multisystem inflammation associated with COVID-19 [published online, 2020 Aug 7]. Eur Heart J Cardiovasc Imaging. doi:10.1093/ehjci/jeaa212
Blood disorders, cancer, children	7-Aug-20	COVID-19 in Children With Blood and Cancer Disorders: What Do We Know So Far?	Journal of Pediatric Hematology/Oncology	Letter to the Editor	COVID-19 started in December 2019 in Wuhan, China and was declared a pandemic on March 11, 2020. Nearly 5.5 million people have been affected worldwide as of May 25, 2020 and 345,000 have died. The authors provide an update on the incidence, treatment, and outcome of children with blood and cancer disorders with COVID-19. 171 children in Wuhan were detected to have COVID-19 of 1391 children tested, with the most common symptom being fever. 12 had pneumonia, 3 needed mechanical ventilation, and 1 died. Data from children in the US show that a total of 510 children were admitted to the ICU of which 29 died. Out of patients with Sickle Cell Disease, 7.4% of 188 patients died. There have been a total of 146 cases of COVID-19 in patients suffering from hematologic malignancies. A total of 103 cases of COVID-19 after bone marrow transplant have been reported. With regard to children with cancer, a total of 114 cases have been reported from 19 countries.	The COVID-19 pandemic has been devastating on so many levels. It has been especially difficult for children with blood and cancer disorders, and in this letter the authors provide an update on information regarding the incidence, treatment, and outcomes of such children.	Yadav SP. COVID-19 in Children With Blood and Cancer Disorders: What Do We Know So Far?. J Pediatr Hematol Oncol. 2020;42(6):413-414. doi:10.1097/MPH.0000000000001872

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Multisystem inflammatory syndrome, children, adolescents	7-Aug-20	COVID-19–Associated Multisystem Inflammatory Syndrome in Children – United States, March–July 2020	Morbidity and Mortality Weekly Report (MMWR)	Original Report	MIS-C is a rare but severe condition that occurs approximately 2-4 weeks after the onset of COVID-19 in children and adolescents. Between 2 March–18 July 2020, 570 cases of MIS-C were reported in the USA. Of 565 patients who underwent SARS-CoV-2 testing, all had a positive result by RT-PCR or serology. Hispanic and Black patients accounted for the largest proportion (73.6%) of cases. In this study, 203 (35.6%) patients had a clinical course consistent with previous MIS-C reports, characterized by shock, cardiac dysfunction, abdominal pain, and markedly elevated inflammatory markers. The remaining 367 (64.4%) MIS-C patients had manifestations overlapping with acute COVID-19, had a less severe clinical course, or had features of Kawasaki disease. MIS-C in 490 (86%) patients involved four or more organ systems. Approximately two thirds of patients did not have pre-existing underlying medical conditions before MIS-C onset. ICU care was required for 364 patients (63.9%) and ten patients (1.8%) died. Patients could be organized by into three classes, each of which had significantly different manifestations that are described in this article. The authors conclude that as the COVID-19 pandemic continues to expand, healthcare provider awareness of MIS-C will facilitate early recognition, early diagnosis, and prompt treatment.	Analysis of reported cases can enhance understanding of MIS-C and improve characterization of the illness for early detection and treatment. The authors describe the findings from 570 cases of MIS-C in the USA including clinical manifestations, SARS-CoV-2 testing, treatment, and outcomes.	Godfred-Cato S, Bryant B, Leung J, et al. COVID-19–Associated Multisystem Inflammatory Syndrome in Children — United States, March–July 2020. MMWR Morb Mortal Wkly Rep. ePub: 7 August 2020. DOI: http://dx.doi.org/10.15585/mmwr.mm6932e2external icon
Children, epidemiology, infection, pregnancy	7-Aug-20	A Pediatric Infectious Disease Perspective on COVID-19	Clinical Infectious Diseases	Review Article	This review highlights the clinical and epidemiologic characteristics of COVID-19 in children and neonates and describes disease presentation in children with cancer, maternal-fetal transmission, and a comparison in the severity of disease in childhood compared to adulthood, as well as the comparison to other viral infections. Disease presentation of SARS-CoV-2 is infrequent and mild in children, and there are still no distinctive clinical characteristics of infection that can allow for diagnosis without laboratory testing. Overall, the presentation of the disease is less common, and has a lower morbidity rate in children than has been seen in adults, and is seen to cause a less severe disease in children with cancer. Additionally, when pregnant cohorts were compared to non-pregnant cohorts, there was no deviance in the range of severity of infection. Generally, there seems to be an emerging theme of less severe disease in individuals with modulated immune systems. A down-regulated immune response may be responsible for the milder clinical manifestations of the disease.	The authors highlight the clinical and epidemiological characteristics of SARS-CoV-2 in children, neonates, and pregnant women. A common theme is emerging linking less severe disease presentation and modulated immune systems.	Wald ER, Schmit KM, Gusland DY. A Pediatric Infectious Disease Perspective on COVID-19 [published online ahead of print, 2020 Aug 7]. Clin Infect Dis. 2020;ciaa1095. doi:10.1093/cid/ciaa1095

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SARS-CoV-2, human metapneumovirus, infection, children, Iran	7-Aug-20	Report of death in children with SARS-CoV-2 and Human metapneumovirus (hMPV) co-infection: is hMPV the trigger?	Journal of Medical Virology	Original Research	Analysis for co-infection of SARS-CoV-2 and other viral diseases was conducted on 74 COVID-positive dead patients, with results conferring simultaneous viral infections. Of these patients, three were children, all of which presented with co-infection of Human metapneumovirus (hMPV). Interestingly, no adults showed co-infection with hMPV. hMPV infection can directly lead to inflammation and can cause a change in interferon secretion patterns in the respiratory tract. Increased interferons can causally increase ACE2 receptors which have been suggested to be a SARS-CoV-2 receptor. hMPV may also play a role in secondary disease causation such as asthma. Further studies are needed in order to understand the correlation between hMPV infection and increased chance of infection and death due to SARS-CoV-2.	Co-infection of SARS-CoV-2 positive patients with other viral infections is observed in adults and children. hMPV co-infection was seen in children positive for SARS-CoV-2, suggesting a potential link between the two viral infections.	Hashemi SA, Safamanesh S, Zadeh-Moghaddam HG, et al. Report of death in children with SARS-CoV-2 and Human metapneumovirus (hMPV) co-infection: is hMPV the trigger? [published online ahead of print, 2020 Aug 7]. J Med Virol. 2020;10.1002/jmv.26401. doi:10.1002/jmv.26401
Neonate, universal screening, intensive care, NICU, Italy	7-Aug-20	Universal screening of high-risk neonates, parents, and staff at a neonatal intensive care unit during the SARS-CoV-2 pandemic	European Journal of Pediatrics	Original Article	The authors report the results of a multi-timepoint surveillance for SARS-CoV-2 of all neonates admitted to the neonatal ICU (NICU), their parents, and all healthcare providers in an Italian region with a high prevalence of COVID-19. The intervention consisted of (a) parental triage on arrival at the neonatal ward; (b) universal testing with nasopharyngeal swabs and blood testing for SARS-CoV-2 IgM and IgG antibodies; and (c) use of continuous PPE at the NICU by parents and staff. A total of 6726 triage procedures were performed on 114 parents, and 954 nasopharyngeal swabs were collected from 226 individuals. Five asymptomatic individuals tested positive. Of 75 admitted newborns, there were no positive SARS-CoV-2 results. With universal screening of neonates, parents, and staff, there were no cases of SARS-CoV-2 infection among in the NICU in an area with a high incidence of SARS-CoV-2. This experience could be compared with other strategies with a view to developing future evidence-based guidelines for managing high-risk neonates in case of new epidemics.	The authors conducted universal screening for SARS-CoV-2 by RT-PCR and antibody testing of neonates, parents, and staff members in an Italian NICU. No cases of SARS-CoV-2 were identified in the NICU.	Cavicchiolo ME, Trevisanuto D, Lolli E, et al. Universal screening of high-risk neonates, parents, and staff at a neonatal intensive care unit during the SARS-CoV-2 pandemic [published online, 2020 Aug 7]. Eur J Pediatr. 2020;1-7. doi:10.1007/s00431-020-03765-7
Pediatric, immunology, antibody response, viral clearance, viral shedding, USA	7-Aug-20	Kinetics of viral clearance and antibody production across age groups in SARS-CoV-2 infected children	medRxiv	Pre-print (not peer-reviewed)	The authors sought to improve understanding of the transition from viral infection to viral clearance as well as antibody response in pediatric patients with SARS-CoV-2 infection. They performed a retrospective analysis of children (age ≤ 22 years old) tested for SARS-CoV-2 by RT-PCR (n=6369) and antibody testing (n=215) at a quaternary-care pediatric hospital in the USA between 13 March- 21 June 2020. The rate of positivity varied over time due to viral circulation in the community and transition to more universal screening of hospitalized patients. Median duration of viral shedding (RT-PCR positivity) was 19.5 days and RT-PCR negativity from positivity was 25 days. Median time to seropositivity from RT-PCR positivity was 18 days while median time to reach adequate levels of neutralizing antibodies was 36	Among children with COVID-19 in the USA, the authors found that patients aged 6 - 15 years demonstrated a longer period of RT-PCR positivity to negativity compared to those aged 16 to 22 years (p=0.015).	Bahar B, Jacquot C, Delores Mo Y et al. Kinetics of viral clearance and antibody production across age groups in SARS-CoV-2 infected children. [published online, 2020 Aug 7]. medRxiv. doi:https://doi.org/10.1101/2020.08.06.20162446

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					days. The authors conclude that the majority of pediatric patients demonstrated a prolonged period of viral shedding. Only 17 of 33 patients demonstrated neutralizing antibodies, suggesting that some patients may not mount significant immune responses to infection.		
Pediatric, MIS-C, PIMS-TS, single-cell RNA seq, immunology	7-Aug-20	Single-cell RNA-seq reveals profound monocyte changes in Pediatric Inflammatory Multisystem Syndrome Temporally associated with SARS-CoV-2 infection (PIMS-TS)	medRxiv	Pre-print (not peer-reviewed)	Pediatric inflammatory multisystem inflammatory syndrome temporally associated with SARS-CoV-2 infection (PIMS-TS), also known as MIS-C, is a new disease with overlapping features of Kawasaki disease (KD) and toxic shock syndrome. The authors performed an unbiased single cell RNA sequencing (RNA seq) analysis of peripheral blood mononuclear cells from PIMS-TS (n=7) and KD (n=2) patients in the UK. Disease severity varied markedly in the study population. Neither of the KD patients were admitted to the pediatric ICU whereas five (71%) PIMS-TS patients required intensive care. Their RNA seq results demonstrated that monocytes are the main source of pro-inflammatory cytokines released in both PIMS-TS and KD. They also found large changes in the frequency of classical, intermediate, and non-classical monocytes occur in both diseases. The authors conclude that given the well-known role of monocytes in KD animal models as well as in cardiac inflammation and repair, the observed changes are likely to be highly relevant.	The authors state that this study is the first to reveal that KD and PIMS-TS are both characterized by profound changes in monocyte gene expression and frequencies of key monocyte subpopulations.	Syrimi E, Fennell E, Richter A et al. Single-cell RNA-seq reveals profound monocyte changes in Pediatric Inflammatory Multisystem Syndrome Temporally associated with SARS-CoV-2 infection (PIMS-TS). [published online, 2020 Aug 7]. medRxiv. doi:https://doi.org/10.1101/2020.08.06.20164848
Burkina Faso, Italy, epidemiology, global child health	7-Aug-20	Possible Impact of COVID-19 on Children in Africa. Reflections from Italy and Burkina Faso	Journal of Tropical Pediatrics	Brief Report	With less than 100,000 of the over 5,800,00 confirmed infections with SARS-CoV-2 at the 1st of June 2020, Africa is the WHO-region least affected by the pandemic and related deaths. There are many factors that may lead to this such as population density, the shape of the population pyramid, overweight prevalence, climate differences, and lifestyle choices. The authors focused on many differences in epidemiological, geographical, demographical, cultural, and medical conditions to highlight how a full-blown war on the pandemic can impact other, equally important aspects of global child health. The authors noted that children are less affected by the virus but may be more affected by the aftermath of it and the fight against it. Unfortunately, experiences with Ebola reveal how even a successful full-scale fight against an epidemic has a number of deadly side-effects on children, food insecurity, missed prenatal care and vaccinations, undertreatment of acute and chronic pathologies, thus multiplying the victims that the epidemic reaps directly. The authors state that In Italy, by the end of May 2020 more children died for not presenting to an Emergency room for fear of SARS-CoV-2, than from confirmed COVID-19, and expect the same being probably true for Burkina Faso. They urge that the fight of	Africa is the WHO-region least affected by SARS-CoV-2 pandemic. The authors compared the situation in severely hit Italy with that in less hit Burkina Faso and focused on various differences.	Ouedraogo P, Schumacher RF. Possible Impact of COVID-19 on Children in Africa, Reflections from Italy and Burkina Faso [published online ahead of print, 2020 Aug 7]. J Trop Pediatr. 2020;fmaa055. doi:10.1093/tropej/fmaa055

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					the new pandemic must not stop the ongoing war on child mortality.		
Children, bronchoscopy, PPE, South Africa	7-Aug-20	Bronchoscopy in children with COVID-19: A case series	Pediatric Pulmonology	Original article	The authors describe their experience with the use of modified full-face snorkel masks for pediatric bronchoscopy procedures in 4 COVID-19 infected children when filtering face pieces/respirators were in limited supply. Bronchoscopy was urgently required in 4 children, and modified full-face snorkel masks (SEAC® Libera, SEAC, Italy) were worn by the bronchoscopy team. Each mask was fitted with an O-ring, adaptor and heat and moisture exchanger filter. To date, there have been no COVID-19 infections among the bronchoscopy team staff, whereas the overall hospital staff COVID-19 prevalence rate has exceeded 13.5% (667/4949). The authors conclude that emergency bronchoscopy procedures on COVID-19 infected patients or patients with unknown infection status can be safely performed using modified full-face snorkel masks.	The authors describe their experience safely using modified full-face snorkel masks for pediatric emergency bronchoscopy procedures on COVID-19 infected patients.	Goussard P, Van Wyk L, Burke J, et al. Bronchoscopy in children with COVID-19: A case series [published online 2020 Aug 7]. <i>Pediatr Pulmonol.</i> 2020. doi:10.1002/ppul.25015
Oral health, PMIS-TS, pediatrics, early recognition, dentists	7-Aug-20	Pediatric Multisystem Inflammatory Syndrome Temporarily Associated With SARS-COV-2: Oral Manifestations and Implications	International Journal of Pediatric Dentistry	Letter to the Editor	The authors summarize consequences of Pediatric Multi-system Inflammatory Syndrome Temporarily Associated with SARS-COV-2 (PMIS-TS) from an oral health perspective, with an emphasis on Kawasaki-like symptoms. Lips and mucosal changes were detected in 87%, 53%, 50%, and 29%, of the reported cases in France, USA, Italy and UK respectively. Besides the typical Kawasaki disease (KD) criteria of the strawberry tongue (prominent lingual papillae); dry, erythematous or cracked lips, and erythema of the oropharyngeal mucosa, less frequent oral symptoms were observed in PIMS-TS cases including sore throat and swelling of the lips which used to appear rarely in KD cases. The authors conclude that pediatric dentists and general dental practitioners may have a life-saving role in early diagnosis of PMIS-TS through identification of these symptoms.	Pediatric Multi-System Inflammatory Syndrome Temporarily Associated with SARS-COV-2 (PMIS-TS) has been shown to cause oral mucosal changes similar to Kawasaki Disease. An emphasis on recognition by oral health providers could lead to early recognition and better outcomes.	Riad A, Boccuzzi M, Sagiroglu D, Klugar M, Krsek M. Pediatric Multisystem Inflammatory Syndrome Temporarily Associated With SARS-COV-2: Oral Manifestations and Implications [published 2020 Aug 7]. <i>Int J Paediatr Dent.</i> 2020 doi:10.1111/ipd.12694
Children, anxiety, gestational diabetes mellitus, physical activity	7-Aug-20	Children's Anxiety and Physical Activity during COVID-19 in Relation to Prenatal Exposure to Gestational Diabetes	medRxiv	Preprint (not peer-reviewed)	The authors sought to determine the relationship between anxiety levels, physical activity and in utero exposure to gestational diabetes mellitus (GDM) in children aged 9 to 17 years, during the COVID-19 pandemic. Prenatal exposure to GDM is associated with increased risk for psychiatric disorders, so children exposed to GDM may be more vulnerable to heightened anxiety during the pandemic. Children who reported higher levels of moderate to vigorous physical activity or vigorous physical activity reported lower anxiety symptoms. Children exposed to GDM in utero reported lower engagement in vigorous physical activity and higher anxiety scores compared to unexposed children. The pathway through which children exposed to GDM in utero reported higher anxiety was partially explained by reduced engagement in vigorous physical activity (75%, p=0.05). The authors conclude that engaging in physical activity during the	The authors note that engaging in physical activity can have the beneficial effect of reducing anxiety, particularly for children exposed to GDM in utero, who have increased risk for psychiatric disorders and adverse psychological outcomes during the COVID-19 pandemic.	Alves J, Yunker, A, DeFindis A, et al. Children's anxiety and physical activity during COVID-19 in relation to prenatal exposure to gestational diabetes. medRxiv. 2020; doi.org/10.1101/2020.08.06.20169565

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
					COVID-19 pandemic may be beneficial for reducing anxiety, particularly for children exposed to GDM in utero, who are at increased risk for adverse psychological outcomes.		
Pediatric, anesthesia, clinical guidance	7-Aug-20	Unique challenges in pediatric anesthesia created by COVID-19	Journal of Anaesthesia	Review article	The authors conducted a review of the literature on July 7th, 2020, that set out to investigate the influence of COVID-19 on peri-operative risk among positive patients undergoing anesthesia. Eight publications met the eligibility criteria of the review that described 20 patients across all selected studies who underwent general anesthesia. Nine patients reported pre-operative symptoms related to COVID-19 and one peri-operative death was reported. The authors noted that guidelines on anesthetic administration and techniques remain unclear with currently limited data.	The authors note that further research is needed to ascertain evidence-based recommendations and best practices for the preoperative, induction, extubation, and post-operative stages of anaesthesiology. Such guidance would also safeguard providers in the course of the introduction of anesthesia.	Gai N, Maynes JT, Aoyama K. Unique challenges in pediatric anesthesia created by COVID-19 [published online ahead of print, 2020 Aug 7]. J Anesth. 2020;1-5. doi:10.1007/s00540-020-02837-0
Pediatric, severe infection, hospitalization, public health, USA	7-Aug-20	Hospitalization Rates and Characteristics of Children Aged <18 Years Hospitalized with Laboratory-Confirmed COVID-19 – COVID-NET, 14 States, March 1–July 25, 2020	Morbidity and Mortality Weekly Report (MMWR)	Early Release	From March 1–July 25, 2020, 576 pediatric COVID-19 cases were reported to the COVID-19–Associated Hospitalization Surveillance Network (COVID-NET) in the USA. These data showed that the cumulative COVID-19-associated hospitalization rate among children aged <18 years was 8.0 per 100,000 population, with the highest rate among children aged <2 years (24.8). Hispanic or Latino and non-Hispanic Black children had higher cumulative rates of COVID-19–associated hospitalizations (16.4 and 10.5 per 100,000, respectively) than did non-Hispanic White children (2.1). Among 208 (36.1%) hospitalized children with complete medical chart reviews, 69 (33.2%) were admitted to an ICU, and 12 (5.8%) required invasive mechanical ventilation. One patient died during hospitalization. Overall, one in three hospitalized children were admitted to the ICU, similar to the proportion among adults. Continued tracking of SARS-CoV-2 infections among children is important to characterize morbidity and mortality. Reinforcement of prevention efforts is essential in congregate settings that serve children, including childcare centers and schools.	This report found the highest rates of COVID-19-associated hospitalization among Hispanic children. Additionally, 42% of children in this analysis had one or more underlying medical conditions, with higher prevalence among Hispanic and Black children.	Kim L, Whitmaker M, O'Halloran A et al. Hospitalization Rates and Characteristics of Children Aged <18 Years Hospitalized with Laboratory-Confirmed COVID-19 – COVID-NET, 14 States, March 1–July 25, 2020. [published online, 2020 Aug 7]. MMWR Morb Mortal Wkly Rep. doi:http://dx.doi.org/10.15585/mmwr.mm6932e3external icon
SARS-CoV-2, Children, epidemiology, clinical, China	6-Aug-20	Epidemiological and clinical features of pediatric COVID-19	BMC Medicine	Research Article	This study sought to uncover the epidemiological and clinical characteristics of SARS-CoV-2 in children aged 0-14 years. Between January 15 - March 15 2020, 341 children aged 4 days to 14 years (median age=7 years) from mainland China were included in this study. Patients had at least 2 consecutively positive SARS-CoV-2 results via nucleic acid test. Authors used web crawler to collect data via websites and portals of local health administration departments. They found that compared to adults, children are more frequently exposed via family clusters, have longer incubation times (median 9 days, 0-20 day range vs.	Authors used web crawler to analyze data from 341 children (0-14 years) in mainland China to assess epidemiological and clinical characteristics of SARS-CoV-2 in this population. They found that the disease course is distinct, particularly in the	Guo CX, He L, Yin JY, et al. Epidemiological and clinical features of pediatric COVID-19. BMC Med. 2020;18(1):250. Published 2020 Aug 6. doi:10.1186/s12916-020-01719-2

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					4 days, 0-24 day range), and tend to have higher incidence of asymptomatic diagnosis (5.9% vs. 1%) and lower incidence of severe disease (0.6% vs. 14%). Importantly, therapeutic management was relatively uncomplicated and consisted of antiviral therapy, traditional Chinese medicine, and symptom relief. This study adds detailed clinical findings of pediatric COVID-19 and a large sample size with comprehensive survey of disease characteristics.	mode of transmission, the incubation period, and severity of disease.	
Children, coronavirus, meta-analysis	6-Aug-20	A systematic review and meta-analysis of children with coronavirus disease 2019 (COVID-19)	Journal of Medical Virology	Review article	While the majority of children experience mild COVID-19 symptoms, few systematic meta-analyses study the characteristics of children with COVID-19. The authors conducted a meta-analysis according to PRISMA guidelines and selected 48 studies with 5829 pediatric patients from 25 December 2019 to 30 April 2020. They aimed to provide a systematic analysis of demographic characteristics, clinical symptoms, laboratory findings, and imaging features of COVID-19 in pediatric patients. The analysis revealed that children of all age groups were susceptible to SARS-CoV-2 infection, and the majority of them experienced asymptomatic, mild, or moderate illness. The most common clinical manifestations were fever (51%) and cough (41%). Up to 70% of children had a normal leukocyte count. A reduction of lymphocytes occurred in 16% of children, which was a lower prevalence than that of adults. CT imaging was diverse, and normal imaging occurred in 41% of pediatric patients. The frequency of severe illness was 7% in children with COVID-19, compared to 25.6% in adults. The critical illness rate in children under 1 year old was 14%, which was much higher than 5% in all children (0-18 years old). 33% of children under 1 year old experienced vomiting. Clinicians should pay particular attention to COVID-19 in children under 1 year old due to the higher risk of critical cases.	Compared to adults, pediatric patients with COVID-19 may experience milder illness, with atypical clinical manifestations and rare lymphopenia. Children under 1 year old with COVID-19 seem to experience a higher incidence of critical illness and emesis, which warrants further research.	Cui X, Zhao Z, Zhang T, et al. A systematic review and meta-analysis of children with coronavirus disease 2019 (COVID-19). J Med Virol. 2020 Aug 6:10.1002/jmv.26398. doi: 10.1002/jmv.26398. Epub ahead of print. PMID: 32761898; PMCID: PMC7436402.
Antibody, intrauterine infection, China	6-Aug-20	Possible intrauterine SARS-CoV-2 infection: Positive nucleic acid testing results and consecutive positive SARS-CoV-2-specific antibody levels within 50 days after birth	International Journal of Infectious Diseases	Case Report	The authors report the case of a full-term neonate born to a mother who developed symptoms of COVID-19 at 32 weeks of gestation. The placental pathology showed slight local inflammation, and serial antibody measurements in the neonate showed elevated levels of IgM and IgG antibodies on the day of birth, with gradual decline of IgM to negative levels within 28 days after birth. IgG testing was still positive on day 50 of life. Despite PCR testing for SARS-CoV-2 being positive on day 7 of life, the neonate displayed no symptoms of COVID-19. The child tested negative on day 14. The authors state that this case presents a favorable prognosis for the neonate with long-term exposure to maternal COVID-19, despite a high possibility of intra-uterine infection.	This case report details a SARS-CoV-2 positive neonate born to a mother who displayed symptoms of COVID-19. The neonate presented with gradually decreasing IgM and persistent IgG antibodies and was asymptomatic.	Gao J, Hu X, et al. Possible intrauterine SARS-CoV-2 infection: Positive nucleic acid testing results and consecutive positive SARS-CoV-2-specific antibody levels within 50 days after birth. International Journal of Infectious Diseases. 2020; doi: https://doi.org/10.1016/j.ijid.2020.07.063 .

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France, ECMO, pregnancy, postpartum, rescue therapy	6-Aug-20	Successful Use of Extracorporeal Membrane Oxygenation Postpartum as Rescue Therapy in a Woman With COVID-19	Journal of Cardiothoracic and Vascular Anesthesia	Case Report	This case report summarizes the clinical course of a 31-year-old previously healthy black woman in France who presented at 31 weeks of gestation with a dry cough and fever. An initial nasopharyngeal swab tested negative for SARS-CoV-2, but SARS-CoV-2 infection was later confirmed by radiologic findings and a second nasopharyngeal swab. On day 3, her symptoms worsened, and she required ICU admission. The patient was mechanically ventilated, and an urgent C-section was performed. After delivery, mechanical ventilation, use of neuromuscular blockade, inhaled nitric oxide and prone positioning were all ineffective, and veno-venous ECMO was initiated. After 7 days of ECMO support, respiratory function improvement allowed for successful weaning off of ECMO. The patient was extubated 1 week later and upon follow-up after discharge, the infant was in good health and the mother presented with only moderate shortness of breath on effort. The authors state that there are no current guidelines for ECMO treatment in pregnant patients with COVID-19 and assert that ECMO experts should be consulted if treatment is being considered.	After other respiratory treatments failed to lessen the symptoms of COVID-19, a postpartum woman in France was given extracorporeal membrane oxygenation as rescue therapy and subsequently recovered. The authors highlight the need for ECMO guidelines as a treatment for COVID-19 respiratory symptoms in pregnant patients as there currently are none.	Fiore A, Piscitelli M, Adodo DK, et al. Successful Use of Extracorporeal Membrane Oxygenation Postpartum as Rescue Therapy in a Woman With COVID-19. J Cardiothorac Vasc Anesth. 2020; doi:10.1053/j.jvca.2020.07.088
Epidemiology, clinical features, symptoms, infants, breastfeeding, USA	6-Aug-20	Epidemiology, clinical features, and outcomes of hospitalized infants with COVID-19 in the Bronx, New York	Archives de Pédiatrie	Letter to the editor	In this letter, the authors discussed the epidemiology, clinical characteristics, and outcomes of infants ≤1 year of age who had a positive RT-PCR test result for SARS-CoV-2 and were admitted to Lincoln Medical Center, New York, USA before April 26th, 2020. A total of 5 infants were identified (median age 3 months, range 10 days - 10 months). Three (60%) infants were healthy, one infant had congenital heart disease (ventricular septal defects), and one infant was born prematurely and had a history of neonatal respiratory distress syndrome and gastro-esophageal reflux. Two (40%) infants were obese. Four infants (80%) had a history of contact with someone who was sick, of whom one infant's mother had recently died from suspected SARS-CoV-2 pneumonia. Two (40%) infants were breastfed. The most prevalent presenting symptoms were fever (4 infants, 80%) and nasal congestion (3 infants, 60%). The median duration from symptom onset to admission was 3 days (range 1–3 days). Three (60%) infants had neutropenia with lymphocytosis. All the infants had favorable prognoses and were discharged home safely. The authors argued that the benign course of COVID-19 in infants in this study could relate to low expression of angiotensin-converting enzyme receptors in infant lungs and immaturity of the infant immune system.	The authors discussed the epidemiology, clinical characteristics, and outcomes of 5 infants with SARS-CoV-2 infection in Lincoln Medical Center, New York, USA and found a more favorable clinical course of COVID-19 in infants than in adults.	Suwanwongse K, Shabarek N. Epidemiology, clinical features, and outcomes of hospitalized infants with COVID-19 in the Bronx, New York [published online, 2020 Aug 6]. Arch Pediatr. 2020;S0929-693X(20)30169-X. doi:10.1016/j.arcped.2020.07.009

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PRRT2 mutations, afebrile seizures, benign familial infantile epilepsy, non-febrile seizures	6-Aug-20	Case Report: Benign Infantile Seizures Temporally Associated With COVID-19	Frontiers in Pediatrics	Case Report	The authors present the case of a previously healthy 3-month-old girl admitted to the pediatric emergency department on April 1, 2020, with non-febrile repeated seizures in the setting of COVID-19. She initially had a mild fever and cough for two days, but subsequently developed two focal motor seizures with impaired consciousness and awareness. All investigations ruled out signs of meningo-encephalitis or active epilepsy, including normal electro-encephalogram and cerebral MRI. However, PCR from nasal and throat swabs was positive for SARS-CoV-2, and remarkably, blood ferritin and D-dimer levels were elevated. On April 4, the patient was started on Hydroxychloroquine as compassionate use after developing another afebrile motor seizure despite pre-dosing therapeutic blood levels of levetiracetam, with excellent tolerance. Additionally, the authors performed whole-exome sequencing on the patient and her mother, which revealed a pathogenic frameshift mutation in the PRRT2 gene in both the mother and the infant. A subsequent review of maternal family history disclosed that the mother could have had two convulsions during late infancy, related to mild infections and fever, with normal development afterward. Following discharge, the patient presented with normal neurological development and an absence of seizures at outpatient follow up.	This case report suggests that the hyperimmune response described in adult cases with COVID-19 can be seen in infants, even in the absence of respiratory symptoms. Moreover, COVID-19 may present in infants as non-febrile seizures, triggering early-onset seizures in infants with a genetic predisposition.	García-Howard M, Herranz-Aguirre M, Moreno-Galarraga L, et al. Case Report: Benign Infantile Seizures Temporally Associated With COVID-19. <i>Front Pediatr.</i> 2020;8:507. Published 2020 Aug 6. doi:10.3389/fped.2020.00507
Vaccination, children, disruptions, malaria, pneumonia, diarrhea, West Africa, Sierra Leone	6-Aug-20	Child Healthcare and Immunizations in Sub-Saharan Africa During the COVID-19 Pandemic	Frontiers in Pediatrics	Brief Research Report	Of recent concern are the indirect impacts of the COVID-19 pandemic on child healthcare and immunization services. The authors performed a retrospective cross-sectional study to evaluate the number of children (< 5-years-old) vaccinated or diagnosed for the most common diseases in a peripheral village in Sierra Leone between the same period in 2020 and 2019 (March 1 – April 26). The most common diseases diagnosed are malaria, pneumonia, and diarrhea. The findings suggest a 50-80% drop in vaccination in 2020 compared to 2019 (p<0.0005). Further, the authors note the immunization reduction is evident for booster vaccinations, which suggests that parents are not bringing their children to health facilities possibly due to fears of contracting COVID-19. Additionally, the authors saw a drop in common diagnoses comparing 2020 and 2019, but results were not significant (p>0.05). The authors conclude by suggesting that efforts to increase active surveillance in low-resource settings is necessary to ensure continuation of immunization programs.	The authors perform a retrospective cross-sectional study in a rural village in Sierra Leone to explore the indirect impacts of COVID-19. Their findings suggest a reduction in both vaccination rates and diagnoses of common diseases.	Buonsenso D, Cinicola B, Kallon MN, et al. Child Healthcare and Immunizations in Sub-Saharan Africa During the COVID-19 Pandemic. <i>Front Pediatr.</i> 2020;8:517. Published 2020 Aug 6. doi:10.3389/fped.2020.00517
Denmark, pediatric, dermatitis, eczema, hand washing, hygiene	6-Aug-20	COVID-19 reopening causes high risk of irritant contact	Danish Medical Journal	Original Research	The re-opening of schools and daycares after COVID-19 closures equates to increased hand hygiene for children. This observational study evaluated the risk of pediatric irritant contact dermatitis (ICD) due to COVID-19 re-openings. A 20-item questionnaire on hand hygiene and dermatitis was sent to	More frequent hand washing was associated with higher rates of irritant contact dermatitis for children after COVID-19 re-	Borch L, Thorsteinsson K, Warner TC, et al. COVID-19 reopening causes high risk of irritant contact dermatitis in children. <i>Dan Med J.</i>

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		dermatitis in children			parents of children ages 0-12 years, from 22 April to 1 May 2020, in Denmark. The study included 6,283 children, with a mean age of 6.7 years. In those without a history of dermatitis, 42.4% (n=4,496) had ICD symptoms after re-opening. Hand washing was the most predictive factor for developing ICD. Washing 7-10 times per day and >10 times per day increased the relative risk by 1.83 and 2.23 times, respectively. School-age children had a relative risk of 1.5 for developing ICD, compared to preschool children. Hand sanitizer carried a lower risk of ICD; only when it was used >7 times per day, did sanitizer lead to an increased relative risk of 1.2. Although they encourage hand hygiene, the authors suggest substituting hand sanitization in place of some hand washing opportunities, and supplementing with prophylactic moisturization.	openings in Denmark. The authors suggest substituting hand sanitization in place of some hand washing opportunities, and supplementing with prophylactic moisturization.	<i>2020;67(9):A05200357. Published 2020 Aug 6.</i>
Child abuse, lockdown, France, child welfare, social services	6-Aug-20	Was child abuse underdetected during the COVID-19 lockdown?	Archives de Pédiatrie	Letter to the Editor	The authors explored child abuse screening and reporting during the COVID-19 lockdown in France from March 16-May 11, 2020. During this time, childcare centers and schools were closed, forcing children to stay at home. Previous research has shown that child abuse frequency increases during school breaks and natural disasters. This is exacerbated by close contact with family for extended periods, added stress on family members, and financial problems. The authors found that a local Child Welfare Office in France reported significantly lower supervision orders during the lockdown period compared to 2019 (24 orders compared to 136 during the same time in 2019). They suggest this was due to suspension of some social work services and reduced opportunities for screening children at schools and childcare centers rather than a decrease in actual abuse. The French National child abuse helpline received 89.4% more calls during one week in April 2020 compared to April 2019. The authors concluded that efforts to utilize teleconsultations and maintain social work services are of utmost priority to strengthen child protection services during the ongoing pandemic.	This letter suggests evidence that reduced screening opportunities due to shutdowns of schools and childcare centers during France's COVID-19 lockdown drove underreporting of child abuse.	Caron F, Plancq MC, Tourneux P, Gouron R, Klein C. Was child abuse underdetected during the COVID-19 lockdown? [published online ahead of print, 2020 Aug 6]. <i>Arch Pediatr.</i> 2020;S0929-693X(20)30170-6. doi:10.1016/j.arcped.2020.07.010
Children, CT scan, Iran	6-Aug-20	Novel coronavirus disease 2019 (COVID-19) outbreak in	Journal of Microbiology, Immunology, and Infection	Original Research	The study evaluated the epidemiological, clinical, and radiological and laboratory findings of 24 children who had positive SARS-CoV-2 infection and performed chest CT in Qom, Iran. The most common symptoms were fever, dry cough, tachypnea, and abdominal pain. Typical CT findings were found in 6 patients (25%), 2 patients (8%) showed indeterminate appearance, and 14 patients (58%) showed atypical findings, with results including consolidation, ground-glass opacification, pleural effusion, and bilateral central peribronchovascular thickening. Of the three patients that died, two showed abnormal CT scans, but no significant difference was found between CT findings and outcomes. The authors hypothesize that these CT abnormalities	High frequency of atypical chest CT manifestations in relation to COVID-19 symptoms in the children should raise a concern for pediatricians. The authors suggest that abnormal CT scans may be related to disease progression in children.	Mamishi S, Heydari H, Aziz-Ahari A, et al. Novel coronavirus disease 2019 (COVID-19) outbreak in children in Iran: Atypical CT manifestations and mortality risk of severe COVID-19 infection [published online ahead of print, 2020 Aug 6]. <i>J Microbiol Immunol Infect.</i> 2020;S1684-1182(20)30177-8. doi:10.1016/j.jmii.2020.07.019

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					may be related to disease progression and due to the fact that all of the cases who died were Afghan, the severity of COVID-19 as well as presentation of atypical CT scan findings might be influenced by ethnicity.		
Children, influenza vaccination	6-Aug-20	Willingness to Vaccinate Children against Influenza after the COVID-19 Pandemic	The Journal of Pediatrics	Original article	This electronic survey of caregivers accompanying their children aged 1-19 years in 17 Pediatric Emergency Departments (ED) in USA, Canada, Israel, Japan, Spain and Switzerland from March 27- June 30, 2020, sought to determine factors associated with parents who plan to vaccinate their children against influenza next year, especially those who did not vaccinate against influenza last year. Of 2,422 surveys, 1,314 (54.2%) caregivers stated that they plan to vaccinate their child against influenza next year, an increase of 15.8% from the previous year. Of 1,459 caregivers who did not vaccinate their children last year, 418 (28.6%) plan to do so next year. Factors predicting willingness to change and vaccinate the next year included child's up-to-date with non-influenza vaccination status (adjusted odds ratio (aOR)=2.03, 95% CI 1.29 – 3.32, P = .003); caregivers' history of receiving the influenza vaccine (aOR=3.26, 95% CI 2.41 – 4.40 , p< 0.010), and high level of concern their child had COVID-19 (aOR=1.09, 95% CI 1.01 – 1.17, p=0.022). Changes in risk perception due to COVID-19, may influence decision-making among caregivers regarding influenza vaccination in the coming season. In order to promote influenza vaccination among children, public health programs can leverage this information.	This multi-country survey assessed factors associated with caregivers' willingness to change from prior actions and vaccinate their children against influenza. It found that children's up-to-date vaccination status, caregivers' history of receiving the influenza vaccine, and higher level of concern that their child had COVID-19 were associated with willingness to change and vaccinate, information that could be leveraged by public health programs.	Goldman RD, McGregor S, Marneni SR, et al. Willingness to Vaccinate Children against Influenza after the COVID-19 Pandemic [published online 2020 Aug 6]. J Pediatr. 2020;S0022-3476(20)30987-2. doi:10.1016/j.jpeds.2020.08.005
Reproductive health, sexual behavior, sexual health, young adults, youth, China	6-Aug-20	Impact of the COVID-19 Pandemic on Partner Relationships and Sexual and Reproductive Health: Cross-Sectional, Online Survey Study	Journal of medical Internet research	Original Research	This study aimed to assess the impact of COVID-19-related measures on partner relationships and sexual and reproductive health in China. In total, 967 participants were included. Due to the pandemic and related containment measures, 22% of participants reported a decrease in sexual desire; 41% experienced a decrease in the sexual intercourse frequency; 30% reported an increase in the frequency of masturbation. The logistic regression analysis indicated that the following influenced partner relationships: accommodations during the pandemic; exclusive relationship status; sexual desire; and sexual satisfaction. COVID-19 also caused disruptions in reproductive health services such as prenatal and postnatal care, 9 participants who were pregnant reported having difficulties accessing maternal care or delivery services due to COVID-19 or related measures. Participants who reported a recent abortion described difficulties primarily with making appointments to see a doctor or for surgeries. 3 participants who reported sexually transmitted infections (STI) experienced difficulties with medical management. 8.9% of participants said they had experienced a shortage of contraceptives. The results show that many young	This study provides preliminary evidence of interruptions in reproductive health services due to COVID-19, such as prenatal and postnatal examination, delivery and abortion services, contraception availability, and STI management.	Li G, Tang D, Song B, et al. Impact of the COVID-19 Pandemic on Partner Relationships and Sexual and Reproductive Health: Cross-Sectional, Online Survey Study. J Med Internet Res. 2020;22(8):e20961. Published 2020 Aug 6. doi:10.2196/20961

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					people have wide-ranging issues affecting their sexual and reproductive health due to COVID-19 pandemic and related containment measures.		
Children, nutrition, food insecurity, Virginia, USA	6-Aug-20	Food insecurity, the home food environment, and parent feeding practices in the era of COVID-19	Obesity	Original Article	The social and economic effects of the COVID-19 pandemic are expected to increase the number of families experiencing food insecurity and the prevalence of childhood obesity in the USA., in part from changes in the home food environment and parent feeding practices This study surveyed parents (N=584) in the USA from April 30-May 23, 2020, via an online survey on food security, home food availability, and feeding practices both retrospectively (before COVID-19) and currently (during COVID-19). The percentage of families reporting very low food security increased by 20% from before to during COVID-19 (p<0.01). About one-third of families increased the amount of high-calorie snack foods, desserts/sweets, and fresh foods in their home; 47% increased non-perishable processed foods. Concern about child overweight increased during COVID-19, with a greater increase for food insecure vs. secure parents (p<0.01). Use of restriction, pressure to eat, and monitoring increased, with a greater increase in pressure to eat for parents with food insecurity compared to food secure parents (p<0.05). During COVID-19, increases in very low food security and changes in the home food environment and parent feeding practices were observed. Results highlight the need for public health policies and initiatives to address negative impacts of COVID-19 on children's obesity risk, particularly among those facing health disparities, as well as the need for clinical interventions to provide evidence-based obesity prevention and treatment programs for children during and after COVID-19.	This survey of parents regarding food security and feeding practices found increases in food insecurity and concerning changes in the home food environment. These findings highlight the need to address negative impacts of COVID-19 on children's nutrition status and obesity risk, from both clinical and public health perspectives	Adams EL, Caccavale LJ, Smith D, Bean MK. Food insecurity, the home food environment, and parent feeding practices in the era of COVID-19 [published online 2020 Aug 6]. Obesity (Silver Spring). doi:10.1002/oby.22996
Routine immunization, immunization catch-up programs	6-Aug-20	COVID-19 and missed routine immunizations: designing for effective catch-up in Canada	Canadian Journal of Public Health	Commentary	COVID-19 has led to disruption in routine immunization programs in Canada and around the world, setting the stage for serious outbreaks of vaccine-preventable illnesses. The authors recommend three actions be integrated and used concurrently to most effectively help Canada catch-up on disrupted vaccination administration and strengthen the country's immunization foundation for when COVID-19 vaccines become available: 1) identify who has been missed across the life course, 2) detect delivery gaps and develop tailored strategies for catch-up, and 3) communicate, document, evaluate, and readjust the immunization programs as needed. Success in these efforts require leadership from the science community, healthcare workers, and public health actors to send clear messages to the public on the value and importance of immunization.	Canada's National Advisory Committee on Immunization notes that COVID-19 has led to reductions in timely infant and childhood immunizations, setting the stage for serious outbreaks of vaccine-preventable diseases. Ensuring that routine immunization and catch-up programs are done well during this pandemic requires data, collaboration, innovation and community support,	MacDonald NE, Comeau JL, Dubé È, Bucci LM. COVID-19 and missed routine immunizations: designing for effective catch-up in Canada [published online ahead of print, 2020 Aug 6]. Can J Public Health. 2020;10.17269/s41997-020-00385-4. doi:10.17269/s41997-020-00385-4

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						and will ultimately strengthen the immunization foundation for when COVID-19 vaccines become available.	
Pediatric, diagnosis, treatment, China	6-Aug-20	Update on recommendations for the diagnosis and treatment of SARS-CoV-2 infection in children	European Journal of Clinical Microbiology & Infectious Diseases	Review Article	Compared to adults, the impact of SARS-CoV-2 infection in children is less severe with a lower incidence and susceptibility. Therefore, fewer children are tested, which leads to underestimating the actual number of infections. Early and clear diagnosis of COVID-19 in children can help determine treatment strategies and reduce the harm caused by the infection in children. Based on the Novel Coronavirus Infection Pneumonia Diagnosis and Treatment Standards (trial version 7) issued by National Health Committee in China and the latest diagnosis and treatment strategies for SARS-CoV-2 infection pneumonia in children, this review summarizes current strategies on the diagnosis and treatment of SARS-CoV-2 infection in children. This includes the management of severe and critically ill cases.	Data continues to emerge on the most effective strategies to diagnose and treat COVID-19 infection in children. The authors provide a review of current knowledge on clinical manifestations and therapy in pediatric COVID-19.	Miao H, Li H, Yao Y, et al. Update on recommendations for the diagnosis and treatment of SARS-CoV-2 infection in children [published online, 2020 Aug 6]. <i>Eur J Clin Microbiol Infect Dis</i> . 2020;1-13. doi:10.1007/s10096-020-03973-x
Food security, telephone survey, household, Mexico	6-Aug-20	Measurement lessons of a repeated cross-sectional household food insecurity survey during the COVID-19 pandemic in Mexico	medRxiv	Pre-print (not peer-reviewed)	The authors sought to validate the Latin American and Caribbean Food Security Scale (ELCSA) used in three waves of a telephone survey to estimate the monthly household food insecurity (HFI) prevalence during the COVID-19 pandemic in Mexico. They estimated the monthly prevalence of food insecurity in the general population as well as in households with and without children. These data were then compared with a national survey from 2018. They evaluated concurrent validity by testing associations of HFI with socio-economic status and anxiety. Data were collected in April (n=833), May (n=850), and June 2020 (n=1,674). The authors found that ELCSA had an adequate model fit and HFI was associated, within each wave, with increased poverty and anxiety. The COVID-19 lockdown was associated with a reduction in food security, decreasing stepwise from 38.9% in 2018 to 24.9% in June 2020 in households with children. The authors concluded that telephone surveys using ELCSA are a feasible strategy to monitor food insecurity.	The authors evaluated food security in Mexico during the COVID-19 pandemic using a telephone survey. They found that food security in households with children had decreased by 14% in June 2020 compared to 2018.	Gaitan-Rossi P, Vilar-Compte M, Teruel G et al. Measurement lessons of a repeated cross-sectional household food insecurity survey during the COVID-19 pandemic in Mexico. [published online, 2020 Aug 6]. medRxiv. doi:https://doi.org/10.1101/2020.08.04.20167650
Children, clinical features, outcome, China	6-Aug-20	Clinical and Epidemiological features of 46 children under 1 year old with Coronavirus Disease 2019 (COVID-19) in Wuhan, China: A Descriptive Study	The Journal of Infectious Diseases	Retrospective study	The authors collected information on 46 confirmed COVID-19 patients (0-1-year-old) at the Pediatrics Department of Wuhan Children's Hospital, China from January 26 to March 15, 2020, and retrospectively analyzed their epidemiological history, clinical symptoms, and laboratory test results. Of these 46 patients, 84.78% were aged 28 days to 1 year, 10.87% were infants aged 0 to 7 days old, and 4.37% were 7 to 28 days old. Majority (36) of the 46 pediatric patients had no comorbidities. Furthermore, 2 (4.35%) were asymptomatic, 2 (4.35%) had mild disease, another 2 (4.35%) suffered severe or critical disease and the remaining 40	This retrospective study demonstrated that infants (0-1 year old) with COVID-19 had a more favorable prognosis than adults, although they were more vulnerable to cardiac and liver injuries. This information on clinical characteristics may be	Liu X, Xie R, Li W, et al. Clinical and epidemiological features of 46 children under 1 year old with coronavirus disease 2019 (COVID-19) in Wuhan, China: a descriptive study [published online ahead of print, 2020 Aug 6]. <i>J Infect Dis</i> . 2020;jiaa472. doi:10.1093/infdis/jiaa472

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					(86.96%) experienced moderate disease. The most frequent symptoms were cough (58.7%) and fever (34.78%). Other less common symptoms included vomiting, nasal congestion, rhinorrhea, dyspnea, tachypnea, diarrhea, and sneezing. Unlike in adult patients with COVID-19, lymphocyte counts were normal or increased in most infant cases, and the most common cytokine altered was IL-10 which increased in 15 (44.12%) of cases. Of note, infant patients had a higher frequency of cardiac (86.36%) and liver injuries (45.45%). In addition, 2 (4.35%) severe cases needed invasive mechanical ventilation and 1 infant died with multiple organ dysfunction syndrome.	useful in providing a new strategy for treating infant COVID-19 patients.	
Children, hematology, peripheral smears	6-Aug-20	Hematological Parameters and Peripheral Blood Morphologic Abnormalities in Children with COVID-19	Pediatric Blood Cancer	Letter to the Editor	The purpose of this retrospective study was to define the peripheral blood alterations in children with COVID-19 compared to children with similar symptoms but who test negative for COVID-19. The authors collected information on the hematologic parameters of symptomatic children admitted to the emergency department and tested for SARS-CoV-2, from April 1-15, 2020. The mean age of the cohort was 8.11 ± 5.71 years (4 months-17 years), none were critically ill, and all patients were discharged at the end of the isolation period (14 days). The results showed there were 30 symptomatic children positive for SARS-CoV-2, and 40 were negative. The mean hemoglobin value of the SARS-CoV-2 test-positive and -negative groups was 13.1 ± 1.7 g/dL and 12.4 ± 1.9 g/dL, respectively (p>0.05). Even though majority of the SARS-CoV-2-infected children had a normal leukocyte count, lymphopenia, neutropenia, and neutrophilia were noted in 30.0, 23.3, and 13.3% of children, respectively. In the whole cohort, thrombocytopenia was detected in 4 patients: one with aplastic anemia and COVID-19, and the remaining three in the SARS-CoV-2-negative group. Of note, the mean CRP level of the SARS-CoV-2-positive group was lower than the level in the SARS-CoV-2-negative	Although a significant difference in hematologic parameters was noted between SARS-CoV-2 test-positive and -negative children, many children's values were within normal limits. Consequently, the leukocyte count and differentials could not help to distinguish COVID-19 infected children from other symptomatic children. Therefore, the authors suggest that the CRP level might be more helpful for differential diagnosis.	Yarali N, Akcabelen YM, Unal Y, Parlakay AN. Hematological parameters and peripheral blood morphologic abnormalities in children with COVID-19 [published online ahead of print, 2020 Aug 6]. <i>Pediatr Blood Cancer</i> . 2020;e28596. doi:10.1002/pbc.28596
Children, solid tumors, delayed diagnosis, Italy	6-Aug-20	A Collateral Effect of the COVID-19 Pandemic: Delayed Diagnosis in Pediatric Solid Tumors	Pediatric Blood Cancer	Letter to the Editor	The authors sought to examine the effects of the lockdown period (March 9 to May 3, 2020) on the number of patients presenting to the Pediatric Oncology Unit of the Istituto Nazionale Tumori, Milan, Italy a referral center for pediatric solid tumors in Italy. They noted that 16 newly diagnosed patients (45.7% of expected cases) were registered during the lockdown period, compared to 34, 35, and 36 cases during the same period in the years 2017, 2018, and 2019. Furthermore, among the 16 cases seen during the lockdown period, all but two of them were from Lombardy (the epicenter of the COVID-19 epidemic in Italy). The authors also noted that 37 new cases were registered during the subsequent post-lockdown period (May 24 to June 28, 2020). Therefore, although the authors expected to see a higher	This study suggests that a possible collateral effect of the COVID-19 pandemic is the reduced likelihood of pediatric cancer patients accessing referral centers, and their consequently reduced chance of a timely diagnosis. Therefore, it is important to continue monitoring the numbers of new diagnoses and any	Chiaravalli S, Ferrari A, Sironi G, et al. A collateral effect of the COVID-19 pandemic: Delayed diagnosis in pediatric solid tumors [published online ahead of print, 2020 Aug 6]. <i>Pediatr Blood Cancer</i> . 2020;e28640. doi:10.1002/pbc.28640

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					incidence of new cases as soon as the lockdown was lifted, their analysis indicated that the numbers of new cases were back in line with the previous years' expectations. In addition, no major findings emerged when the authors compared the symptom interval in the post-lockdown cohort of patients with those of historical studies in the pediatric oncology patient population.	diagnostic delays in this patient population.	
Children, premature infants, ARDS	6-Aug-20	ARDS in an ex-premature infant with bronchopulmonary dysplasia and COVID-19	Pediatric Pulmonology	Letter to the Editor	This letter relays the case of an infant born at 28 weeks gestation, who developed respiratory distress syndrome, human metapneumovirus pneumonia, and apnea in the hospital after birth. He was discharged to home at 101 days of life. However, he was readmitted 2 weeks later for cough, nasal congestion, and breathing difficulties. The patient's pulse oximetry was found to be low at 77%, and he developed seizures and bradycardic cardiac arrest, and was revived. He tested positive for COVID-19. The patient was given inhaled nitric oxide and was prone and was treated with methylprednisolone and hydroxychloroquine. He was gradually weaned off respiratory equipment and was discharged on hospital day 27. The authors suggest that early proning may be helpful in treating children with COVID-19 and a high risk for ARDS.	The authors share the case of a premature infant with risk factors for ARDS, who developed COVID-19 infection at four months of age. They review the challenges of treating such individuals, as well as suggestions for care of this patient population.	Kalyanaraman M, McQueen D, Morparia K, et al. ARDS in an ex-premature infant with bronchopulmonary dysplasia and COVID-19 [published online ahead of print, 2020 Aug 6]. <i>Pediatr Pulmonol.</i> 2020;10.1002/ppul.24989. doi:10.1002/ppul.24989
Pregnancy, antibody response, seroprevalence, Spain	6-Aug-20	Seroprevalence and presentation of SARS-CoV-2 in pregnancy	The Lancet	Correspondence	The authors tested for SARS-CoV-2 antibodies in pregnant women consecutively attending first trimester screening (n=372) or delivery (n=502) from 14 April-5 May 2020 at three hospitals in Spain. Among the study population (n=874), 125 women (14%) were positive for anti-SARS-CoV-2 IgG, IgM, or IgA. Of seropositive women (n=125), 75 (60%) reported no previous symptoms and 50 (40%) reported one symptom or more. None required critical care. Symptomatic infection, hospital admission, and dyspnea were significantly more prevalent in women in the third trimester of pregnancy than in women in the first trimester of pregnancy. A substantially higher seroprevalence (14%) was found compared to SARS-CoV-2 PCR positivity (0.78%) in women aged 20–40 years in Barcelona, Spain. These data suggest that COVID-19 is commonly asymptomatic in pregnant women and illustrate that seroprevalence studies might capture undiagnosed infections, offering different estimates of infection severity. Further, the results support case registries of pregnant women with COVID-19, which suggest that SARS-CoV-2 might cause more severe disease and require increased surveillance in late pregnancy than in early pregnancy.	Seroprevalence was similar between women in the first trimester of pregnancy and women in the third trimester in Spain, suggesting a similar risk of infection. The proportion of women with symptoms and who required hospitalization were higher in the third trimester group than in the first trimester group.	Crovetto F, Crispi F, Llubra E et al. Seroprevalence and presentation of SARS-CoV-2 in pregnancy. [published online, 2020 Aug 6]. <i>The Lancet.</i> doi:https://doi.org/10.1016/S0140-6736(20)31714-1
Breastfeeding, infant, mother-infant transmission, China	6-Aug-20	Breastfed 13 month-old infant of a mother with COVID-19	International Breastfeeding Journal	Case report	The authors present the case of a mother who continued breastfeeding her 13-month-old child when both were diagnosed with confirmed COVID-19 pneumonia. They describe the clinical presentation, diagnosis, treatment, and outcome. SARS-CoV-2 nucleic acid was found in maternal nasopharyngeal swabs but not	This case report of a mother with COVID-19 who was found to have SARS-CoV-2 IgM and IgG antibodies, but not SARS-	Yu Y, Li Y, Hu Y, et al. Breastfed 13 month-old infant of a mother with COVID-19 pneumonia: a case report [published online 2020 Aug 6]. <i>Int Breastfeed J.</i>

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		pneumonia: a case report			serum, breast milk or feces. SARS-CoV-2 nucleic acid was found in infant nasopharyngeal swabs and feces but not serum. IgM and IgG antibodies against SARS-CoV-2 were found in maternal serum and breast milk and in infant serum. They conclude that this case supports the possibility of mother-to-child transmission of SARS-CoV-2 via breast milk alone being very small, and that breast milk from mothers with SARS-CoV-2 infection is safe for direct feeding of infants.	CoV-2 nucleic acid, in her breast milk adds to the data supporting the safety of mothers with COVID-19 breastfeeding their infants.	2020;15(1):68. doi:10.1186/s13006-020-00305-9
Pregnancy, Remdesivir, supplemental oxygen	6-Aug-20	Use of Remdesivir for Pregnant Patients with Severe Novel 2019 Coronavirus Disease	American Journal of Obstetrics and Gynecology	Letter	The authors describe the treatment of three pregnant patients hospitalized at their institution with confirmed SARS-CoV-2 infection who met criteria for compassionate use protocol of Remdesivir. The first case was a 25-year-old woman at 34 weeks' gestation with fever and respiratory symptoms and positive for SARS-Cov-2 by RT-PCR. She received three doses of Remdesivir, but additional doses were withheld due to development of transaminitis. She was subsequently diagnosed with intrahepatic cholestasis of pregnancy (IHCP), discharged on hospital day (HD) 8, and underwent an uncomplicated vaginal delivery after scheduled induction at 37 weeks 2 days for IHCP. In the second case, a 28-year-old pregnant woman at 25 weeks of gestation was transferred to the ICU for COVID-19 pneumonia and acute hypoxic respiratory failure requiring bilevel-positive airway pressure ventilation. Remdesivir was initiated on HD 2, and she received eight doses. By HD 9, the patient's supplemental oxygen requirement resolved, and she was discharged home. The third case involved a 25-year-old woman at 25 weeks gestation with fever and respiratory symptoms, and positive for SARS-Cov-2. She developed hypoxia with SaO ₂ of 88% on ambient air and was placed on supplemental oxygen. Remdesivir was administered for two doses until clinical improvement, and she was discharged on HD 6.	Although this case series is limited in its ability to make broad conclusions, Remdesivir was well tolerated in pregnant women and possibly effective. In each case, the process to obtain Remdesivir delayed treatment for our patients by 1-2 days. This case series highlights the importance of including pregnant women in investigational trials and provision of rapid access to this drug, as pregnant women face increased risk for adverse outcomes in this pandemic.	Igbinosa I, Miller S, Bianco K, et al. Use of Remdesivir for Pregnant Patients with Severe Novel 2019 Coronavirus Disease [published online ahead of print, 2020 Aug 6]. Am J Obstet Gynecol. 2020;S0002-9378(20)30829-2. doi:10.1016/j.ajog.2020.08.001
Pediatric, emergency department, ICU, attendance, UK	6-Aug-20	Pediatric Attendances and Acuity in the Emergency Department during the COVID-19 Pandemic	medRxiv	Preprint (not peer-reviewed)	This single-center retrospective observational cohort study compared the routinely collected attendance data of children presenting to a central London teaching hospital pediatric emergency department (PED) in the UK, during the peak weeks of the pandemic (21st March - 26th April 2020) to an equivalent period in 2019. There was an 89.3% decrease in attendance to PED, from 4238 attendances in 2019 to 453 in 2020, with a 10.23% reduction re-attendance rate. Pediatric patients were younger during the pandemic (median age 2 years) than in 2019 (median age 4 years). Patients during the pandemic were more likely to present in an ambulance (9.63%), be admitted to hospital (5.75%), and be assigned the highest two Manchester triage categories (6.26%). The top 10 presenting complaints remained constant (although the order changed) and there was	In this study in the UK, the authors found a significant reduction in the number of pediatric emergency department attendances at the peak of the COVID-19 pandemic when compared to the equivalent period in 2019 and argued that although presenting patients may have been sicker than pre-pandemic levels, there was no evidence that this had	Rose K, Van-Zyl K, Cotton R, et al. Paediatric Attendances and Acuity in the Emergency Department during the COVID-19 Pandemic[published online 2020 Aug 6]. medRxiv. doi:10.1101/2020.08.05.20168666

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					no difference in mortality or admission to PED in both periods. Their data demonstrate that the number of presentations to PED has significantly reduced. Presenting patients were sicker during the pandemic; however, there were no differences in PED admission rate or mortality. Further research in changes to disease, community services and injury profiles caused by isolation and activity restrictions was warranted.	negative effects on immediate patient outcomes.	
SARS-CoV-2, antibody, intrauterine infection, nucleic acid testing, placental pathology	6-Aug-20	Possible intrauterine infection: Positive nucleic acid testing results and consecutive positive SARS-CoV-2-specific antibody levels within 50 days after birth	International Journal of Infectious Diseases	Case Report	This case study focuses on a neonate born to a mother who contracted SARS-CoV-2 at 32 weeks of gestation. Placental pathology showed slight local inflammation, and serial antibody measurements in the neonate showed elevated IgM levels. These levels were most drastically elevated on the day of birth, and continuously declined within 28 days. Levels of IgG also declined gradually but persisted until 50 days after birth. The change trend in antibodies was consistent with that seen in the mother. Despite the elevated antibody levels, the neonate did not display symptoms of COVID-19. This presents a favorable prognosis in the neonate with long-term exposure to maternal COVID-19.	Information on the pattern of decline of IgM and IgG antibodies in neonate born to a mother who contracted SARS-CoV-2 at 32 weeks of gestation allows researchers to re-evaluate the significance of IgM detection in intra-uterine infection of SARS-CoV-2.	Gao J, Hu X, Sun X, Luo X, Chen L. Possible intrauterine infection: Positive nucleic acid testing results and consecutive positive SARS-CoV-2-specific antibody levels within 50 days after birth [published online ahead of print, 2020 Aug 6]. Int J Infect Dis. 2020;51201-9712(20)30608-1. doi:10.1016/j.ijid.2020.07.063
Children, FNIP1, infection, risk factors	6-Aug-20	COVID-19 in a Child with Pre-Existing Immunodeficiency, Cardiomyopathy, and Chronic Pulmonary Disease	Klinische Padiatre	Case report	While many co-morbidities for SARS-CoV-2 have been identified as major risk factors in adults, no such risk factors have been identified in children. This case study follows a 7-year-old boy with the autosomal recessively inherited folliculin interacting protein 1 (FNIP1) who is phenotypically associated with a more severe outcome of COVID-19, including high dependence on oxygen supplementation and need for inflammation reduction medications. Despite the pre-existing conditions, the patient survived without the need of mechanical ventilation. The authors posit that this case may relate to the newly discovered pediatric inflammatory multi-system syndrome temporarily associated with SARS-CoV-2.	This case study exemplifies the increased severity of SARS-CoV-2 infection in a child with pre-existing health conditions.	Dinkelbach L, Franzel J, Berghäuser MA, et al. COVID-19 in a Child with Pre-Existing Immunodeficiency, Cardiomyopathy, and Chronic Pulmonary Disease [published online ahead of print, 2020 Aug 6]. COVID-19 bei einem Kind mit vorbestehendem Immundefekt, Kardiomyopathie und chronischer Lungenerkrankung [published online ahead of print, 2020 Aug 6]. Klin Padiatr. 2020;10.1055/a-1210-2639. doi:10.1055/a-1210-2639
COVID-19, children, asthma, school	6-Aug-20	COVID-19, asthma, and return to school	The Lancet	Commentary	In this commentary, authors outline the importance of safely reopening schools and stress particular considerations for children with asthma. Rapid testing services should be available in schools and prioritized for children with asthma who may present with respiratory symptoms easily confused for COVID-19. Additionally, a focus on asthma control, risk stratification, and medication adherence will be essential, as will be an appreciation of the effect of social determinants of health among families of asthmatic children. Other suggested public health strategies include schools' use of cleaning products free of organic compounds, irritants, or fragrances, and reduced exposure to	Little direction exists on how to transition children with asthma back to school and how to counsel their caregivers on mediation of risk. Urgent guidance is required if we are to adequately prepare families, physicians, schools, and asthmatic	Abrams, EM, McGill G, Bhopal SS, et al; Covid-19, asthma, and return to school, The Lancet Respiratory Medicine; https://doi.org/10.1016/S2213-2600(20)30353-2

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					outdoor seasonal aeroallergens that may increase risk of asthma and wheezing, as well as broad access to influenza vaccinations for those with the respiratory condition.	children to return to school in the fall.	
Pediatric, PIMS-TS, MIS-C, Kawasaki disease, hyperinflammation	6-Aug-20	Epidemiological and Clinical Profile of Pediatric Inflammatory Multisystem Syndrome - Temporally Associated with SARS-CoV-2 (PIMS-TS) in Indian Children	Indian Pediatrics	Original Article	In this article, the authors describe the demographic, clinical and laboratory findings, treatment, and outcomes of Indian children (n=19, age ≤ 16 years old) presenting with Pediatric Inflammatory Multisystem Syndrome Temporally Associated with SARS-CoV-2 (PIMS-TS) or MIS-C between 4 May-8 July 2020. All patients presented with fever. Other clinical features included multi-organ involvement (79%), mucocutaneous involvement (74%), cardiovascular symptoms (63%), and gastrointestinal symptoms (42%). Of the 19 children, 15 (79%) were tested for SARS-CoV-2 by RT-PCR and serological assays, identifying 11 (58%) confirmed cases of COVID-19. ICU admission was required in 12 (63%) patients. The authors identified elevated levels of C-reactive protein in all cases, and most patients also had evidence of a coagulopathy. Vasoactive medications were given to 6 (31.5%) children. No deaths were reported. The authors conclude that in their experience, children with PIMS-TS present with a wide range of signs and symptoms.	This is the first case series from India of pediatric patients with PIMS-TS/MIS-C. Compared to other reports, a notable finding in this study was that relatively fewer children were found to have echocardiographic evidence of coronary artery changes (3/19, 16%).	Dhanalakshmi K, Venkataraman A, Balasubramanian S, et al. Epidemiological and Clinical Profile of Pediatric Inflammatory Multisystem Syndrome - Temporally Associated with SARS-CoV-2 (PIMS-TS) in Indian Children [published online, 2020 Aug 6]. Indian Pediatr. 2020;5097475591600220.
Maternal health, mental health, infant, breastfeeding	6-Aug-20	Implications of the COVID-19 Pandemic Response for Breastfeeding, Maternal Caregiving Capacity and Infant Mental Health [No Abstract and Article not available for free]	Journal of Human Lactation	Insights into Practice and Policy	The authors seek to outline the protective influences of breastfeeding on infant health during the COVID-19 pandemic. In this article, they describe current knowledge concerning SARS-CoV-2 in infants and human milk. They summarize international and national guidance for newborn care in the context of the pandemic. They describe the results of policies that prevent skin-to-skin contact, isolate or separate mothers and infants on breastfeeding, maternal caregiving capacity, and infant mental health. They emphasize that some COVID-19 policies separate infants and mothers, preventing or impeding breastfeeding, despite no evidence for vertical transmission of SARS-CoV-2 and generally mild symptoms in infants. Further, they argue that policies separating mothers and infants and impeding breastfeeding increase infant morbidity, mortality, and child neglect. Finally, they discuss parallels to the HIV pandemic, ethical considerations, and the disproportionate influence of policies undermining breastfeeding and maternal caregiving on disadvantaged mothers and infants.	The authors argue that policymakers should develop guidance for maternal caregiving by considering the risks of disease transmission as well as the critical importance of skin-to-skin contact, breastfeeding, and maternal proximity to short and long-term infant physical and mental health.	Gribble K, Marinelli KA, Tomori C, Gross MS. Implications of the COVID-19 Pandemic Response for Breastfeeding, Maternal Caregiving Capacity and Infant Mental Health [published online, 2020 Aug 6]. J Hum Lact. doi:10.1177/0890334420949514

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Pregnancy, critical illness, case fatality, Canada	6-Aug-20	Maternal outcome of pregnant women admitted to Intensive Care Units for Covid-19	American Journal of Obstetrics and Gynecology	Research letter	This systematic review and meta-analysis reviewed articles from March 4-June 4, 2020, pertaining to pregnant women with COVID-19 who required ICU level care. The authors sought to estimate a case fatality rate of pregnant women infected with COVID-19 admitted to the ICU. 15 articles met the inclusion criteria. 11 women admitted to the ICU during pregnancy or within one week of delivery died out of 85 reported women, a case fatality rate of 12.9% [95% CI: 5.8 to 20.1%]. 7 of the 11 deaths were from a single report from Iran, and with this study excluded, the case fatality was 5.3% [95% CI: 2.1 to 10.3%]. Management did not differ between the study from Iran and other studies. Both case fatality rates are lower than the case fatality in non-pregnant critically ill patients; however, in general, non-pregnant critical cases tend to be in patients who are older, male, and have co-morbid conditions compared to women of reproductive age. The case fatality observed in critically ill pregnant women remains concerning, and knowledge of maternal course of disease and the degree of increased risk associated with pregnancy is vital in determining management of pregnant women infected with COVID-19.	This review calculated a case fatality rate of 12.9% among pregnant women with COVID-19 who required ICU level care. This rate is concerning and emphasizes the vital need for knowledge of maternal course of disease and the degree of increased risk associated with pregnancy to determine optimal management.	Hee Kim CN, Hutcheon J, van Schalkwyk J, et al. Maternal outcome of pregnant women admitted to Intensive Care Units for Covid-19 [published online 2020 Aug 6]. Am J Obstet Gynecol. 2020;S0002-9378(20)30830-9. doi:10.1016/j.ajog.2020.08.002
COVID-19; pediatric; MIS-C; coronary dilation; coronary aneurysm; systolic dysfunction; United States	5-Aug-20	Longitudinal Echocardiographic Assessment of Coronary Arteries and Left Ventricular Function following Multisystem Inflammatory Syndrome in Children	The Journal of Pediatrics	Brief Report	The authors reported the short-term outcomes of cardiac dysfunction and coronary artery dilation in SARS-CoV-2-related MIS-C. The longitudinal echocardiographic single-center study included 15 patients with MIS-C, admitted to a children's hospital in the United States between 24 April-16 May 2020, who had at least 1 echocardiogram performed during hospitalization (mean age=11.5 yrs, range=3-20 yrs; 60% male). 40% had a positive nasopharyngeal SARS-CoV-2 PCR test, and all had a positive SARS-CoV-2 antibody test. The mean length of hospital stay was 7.6 ± 2.3 days. There was 1 death in a patient who required extracorporeal membrane oxygenation (ECMO) support. The average follow-up period of the cohort from admission was 28.1 days (range=5-50 days). Although left ventricular dysfunction was common at the initial evaluation (53%), all had normal Z-scores of the left anterior descending coronary artery within 30 days. 33% of the patients had coronary aneurysms. Coronary artery abnormalities were evident in the first 2 weeks and rapidly resolved, with only 1 patient in the study demonstrating persistent aneurysms. 80% of patients received IV immunoglobulin therapy, akin to the treatment for Kawasaki disease. None showed evidence of coronary thrombosis, although all patients received therapeutic anticoagulation based on their hyper-inflammatory state and elevated D-dimer levels. This study provided short-term longitudinal cardiac information	The authors reported the short-term outcomes of cardiac dysfunction and coronary artery dilation in SARS-CoV-2-related MIS-C. Coronary artery abnormalities were evident in the first 2 weeks and, generally, rapidly resolved. None of the patients showed evidence of coronary thrombosis. This study provided short-term longitudinal cardiac information for MIS-C patients that may aid in clinical management and counseling of families.	Jhaveri S, Ahluwalia N, Kaushik S, et al. Longitudinal Echocardiographic Assessment of Coronary Arteries and Left Ventricular Function following Multisystem Inflammatory Syndrome in Children. J Pediatr. 2021;228:290-293.e1. doi:10.1016/j.jpeds.2020.08.002.

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					for MIS-C patients that may aid in clinical management and counseling of families.		
COVID-19; Tele-neuropsychology; neuropsychology; pediatric; tele-psychology; telehealth	5-Aug-20	A case series illustrating the implementation of a novel tele-neuropsychology service model during COVID-19 for children with complex medical and neurodevelopmental conditions: A companion to Pritchard et al., 2020	The Clinical Neuropsychologist	Original Research	The authors implemented a 3-tiered telehealth program for neuro-developmentally complex children [ages not specified] receiving services at a pediatric outpatient neuro/psychological clinic in an academic medical center in the United States during the COVID-19 pandemic [dates not specified]. The model was described in another article published in 2020 and the aim of this article was to elaborate on the model, translate the model into clinical practice, and explain clinical decision-making in applying the model. Considerations for introducing this care delivery model to families are noted, along with service options, practical, safety, and testing considerations. 3 detailed case examples are provided to illustrate the application of the model and how clinical decisions were made for children ages 9, 12, and 16 years of age. Data for key decision points for each case on the appropriateness of telehealth services and whether standardized and additional testing was needed were obtained from initial parent questionnaires, parent interviews, and review of medical records and are explained in the article. The authors note that the limitations, benefits, and risks of delivering these services via telehealth must be weighed with family characteristics, preferences, and access to technology, along with institutional practices, local laws, and ethics. This article can serve as a resource to neuropsychologists and other clinicians considering implementing a similar approach.	This article describes the implementation of a 3-tiered telehealth program for neuro-developmentally complex children in the United States during the COVID-19 pandemic. 3 case examples are provided, along with a discussion of limits and considerations for implementing the model.	Peterson RK, Ludwig NN, Jashar DT. A case series illustrating the implementation of a novel tele-neuropsychology service model during COVID-19 for children with complex medical and neurodevelopmental conditions: A companion to Pritchard et al., 2020. Clin Neuropsychol. 2021;35(1):99-114. doi:10.1080/13854046.2020.1799075
MIS-C; COVID-19; Kawasaki disease; inflammation; UK; USA; France; Switzerland; Italy	5-Aug-20	Multisystem Inflammatory Syndrome in Children Associated with Severe Acute Respiratory Syndrome Coronavirus 2: A Systematic Review	The Journal of Pediatrics	Systematic Review	This systematic review summarizes and compares data from 8 separate studies published April-June 2020 that describe pediatric patients with MIS-C in the USA, UK, France, Switzerland, and Italy (n=440 cases, median age per studies ranged from 7.3-10 years). Patients with MIS-C predominantly had fever with gastro-intestinal, cardiovascular, and mucocutaneous manifestations, which was consistent across studies despite different inclusion criteria. All studies reported elevated levels of C-reactive protein and other hyperinflammatory markers. Respiratory manifestations were only described in a minority of patients with MIS-C. Though many MIS-C cases depicted similar clinical features to Kawasaki Disease (KD), epidemiological and clinical factors differ between the two, with children of Asian/East Asian descent being more likely to contract KD. MIS-C does not exhibit this higher prevalence among children of Asian/East Asian descent. The body of evidence demonstrates that MIS-C and Kawasaki disease are separate conditions. Despite differing study inclusion criteria, MIS-C cases showed a strong	This systematic review summarizes and compares data from 8 separate studies that describe patients with MIS-C in 5 different countries. Across all studies, MIS-C cases showed a strong temporal, geographic, and laboratory link with SARS-CoV-2 infection.	Abrams JY, Godfred-Cato SE, Oster ME, et al. Multisystem Inflammatory Syndrome in Children Associated with Severe Acute Respiratory Syndrome Coronavirus 2: A Systematic Review [published online ahead of print, 2020 Aug 5]. J Pediatr. 2020;226:45-54.e1. doi:10.1016/j.jpeds.2020.08.003

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					temporal, geographic, and laboratory link with SARS-CoV-2 infection across all studies.		
Intrauterine vertical transmission, pregnancy, prognosis, China	5-Aug-20	No intrauterine vertical transmission in pregnancy with COVID-19: A case report	Journal of Infection and Chemotherapy	Case Report	This report shares the case of a 28-year-old woman in China, with fever and cough for two weeks before hospital admission in February 2020, at 31 weeks of gestation. Three SARS-CoV-2 nucleic acid tests were negative, but the patient did have lymphopenia, elevated CRP, and an abnormal chest CT. The fourth SARS-CoV-2 test was positive. She received oxygen, lopinavir/ritonavir, cefoperazone/tazobactam, and dexamethasone. Her condition worsened and the fetus became bradycardic, so a cesarean delivery was performed on 8 February. The male infant weighed 1830 g at birth, and Apgar scores were 8/8 at 1 and 5 minutes of life. On postpartum day #1, linezolid was added to the mother's treatment, and the lopinavir/ritonavir was replaced by umifenovir, due to nausea. Her symptoms and imaging tests were improving by postpartum day #4. SARS-CoV-2 testing became negative, and she was discharged to home on postpartum day #12. All infant pharyngeal and anal swabs were negative for SARS-CoV-2, as were samples of amniotic fluid, umbilical cord blood, placenta, and neonatal gastric fluid. The premature infant had an uneventful hospital course and was discharged on 28 March. More information on the possibility of vertical COVID-19 transmission, especially in the first and second trimesters, is needed.	This report shares the case of a pregnant woman with severe COVID-19 illness necessitating a cesarean delivery at 31 weeks of pregnancy. There was no sign of vertical transmission in this case: all infant pharyngeal and anal swabs were negative for SARS-CoV-2, as were samples of amniotic fluid, umbilical cord blood, placenta, and neonatal gastric fluid.	Lv Y, Gu B, Chen Y, et al. No intrauterine vertical transmission in pregnancy with COVID-19: A case report [published online ahead of print, 2020 Aug 5]. J Infect Chemother. 2020;S1341-321X(20)30266-X. doi:10.1016/j.jiac.2020.07.015
Breastfeeding, human milk, postpartum, neonate outcomes	5-Aug-20	The COVID-19 liquid gold rush: Critical perspectives of human milk and SARS-CoV-2 infection	American Journal of Human Biology	Commentary	Breastfeeding and human milk are critical to maternal and infant health outcomes, especially during public health emergencies. Therefore, recommendations for infant feeding must rely on a complex decision-making process. Thus far, there is only limited and low-quality evidence available regarding COVID-19 and human milk. Of the COVID-19+ individuals who had milk tested, viral RNA was only detected in a small percentage, and repeat samples from the same individuals did not consistently yield identification of viral RNA. Further, there is no evidence that this RNA is infectious. Additionally, there is considerable evidence that the science used to support perinatal separation policies for COVID-19, including those strongly advising against breastfeeding or provision of human milk in the context of a SARS-CoV-2 infection, are disproportionately harming Black, Indigenous, and People of Color. The authors conclude that ecological studies of human milk, in which research studies are co-created with patients and where study findings are interpreted in the context of lived experiences, are a conceptual and methodological alternative to more extractive, reductionistic, and racist scientific approaches.	The authors discuss historical and current research on human milk with a focus on the current COVID-19 pandemic. They argue that studying human milk outside of human lived experiences is not only extremely limited but potentially harmful to vulnerable populations.	Palmquist AEL, Asiodu IV, Quinn EA. The COVID-19 liquid gold rush: Critical perspectives of human milk and SARS-CoV-2 infection [published online, 2020 Aug 5]. Am J Hum Biol. doi:10.1002/ajhb.23481

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Children, orthopedics, Wuhan, China	5-Aug-20	How to Manage Pediatric Orthopaedic Patients: Strategies to Provide Safer Care During the COVID-19 Outbreak in Wuhan, People's Republic of China	The Journal of Bone and Joint Surgery	Commentary	The authors summarize their experience in managing pediatric orthopedic patients and protecting medical staff from COVID-19 exposure at 3 major pediatric orthopedic centers in Wuhan, China, during the COVID-19 outbreak. They provide a triage protocol for patients in their outpatient department, with graphics to illustrate the triage process as well as PPE level determination. They describe measures to protect staff in the operating room and management guidelines for patients during hospitalization. They also describe emergency procedures, noting that the number of emergency surgeries was reduced by 83% compared with the same period in 2019. No medical workers had a confirmed COVID-19 infection after implementation of the described procedures.	The authors summarize their approach to continuing pediatric orthopedic care during the COVID-19 outbreak in Wuhan, China, noting that no health care workers had confirmed infection after implementing this approach.	Li J, Shen X, Shao J, et al. How to Manage Pediatric Orthopaedic Patients: Strategies to Provide Safer Care During the COVID-19 Outbreak in Wuhan, People's Republic of China [published online 2020 Aug 5]. J Bone Joint Surg Am. 2020;102(15):e86. doi:10.2106/JBJS.20.00521
Pregnancy, TMPRSS2, ACE2 receptor, first trimester	5-Aug-20	Expression of SARS-CoV-2 receptor ACE2 and the protease TMPRSS2 suggests susceptibility of the human embryo in the first trimester	Open Biology	Original Research	There remain unanswered questions about the potential effects of a SARS-CoV-2 infection on fetal health and pregnancy. In this article, the authors examined human pre-gastrulation embryos to determine the expression patterns of the genes ACE2, encoding the SARS-CoV-2 receptor, and TMPRSS2, encoding a protease that cleaves both the viral spike protein and the ACE2 receptor to facilitate infection. They showed expression and co-expression of these genes in the trophoblast of the blastocyst as well as the syncytiotrophoblast and hypoblast of the implantation stages, which develop into tissues that interact with the maternal blood supply for nutrient exchange. The authors conclude that expression of ACE2 and TMPRSS2 in these tissues raises the possibility for vertical transmission and indicates that further work is required to understand potential risks to implantation, placental health, and fetal health.	This analysis indicated that a subset of cells across different trophoblast and hypoblast lineages may be susceptible to SARS-CoV-2 infection due to expression of the ACE2 and TMPRSS2 genes.	Weatherbee BAT, Glover DM, Zernicka-Goetz M. Expression of SARS-CoV-2 receptor ACE2 and the protease TMPRSS2 suggests susceptibility of the human embryo in the first trimester. Open Biol. 2020;10(8):200162. doi:10.1098/rsob.200162
Asymptomatic infection, children, coinfection	5-Aug-20	An increasing public health burden arising from children infected with SARS-CoV2: a systematic review and meta-analysis	Pediatric Pulmonology	Original Article	This study aimed to systematically review the public health burden associated with children infected with SARS-CoV-2. After a search of databases provided by PubMed, EMBASE, Web of Science, and China National Knowledge Infrastructure, 14 eligible studies published from January to April 2020 with 410 pediatric patients (232 males, mean age \pm SD: 5.27 \pm 2.4years) were identified. The pooled proportion of asymptomatic infection was 40.45% (95%CI: 24.04-56.85), while co-infection was 10.14% (95%CI: 3.97-16.30), of which Mycoplasma pneumonia (50%, 95%CI: 28.24-71.76) and influenza virus or parainfluenza virus (22.76%, 95%CI: 4.76-40.77) were the most common pathogens. Both male and female children were susceptible to SARS-CoV-2 infection. The pooled proportion of family clustering infection was 83.63% (95%CI: 77.54-89.72). The authors concluded that a high proportion of asymptomatic infections occurs in children infected with SARS-CoV-2, who are also susceptible to co-infection regardless of sex. These data affirmed the increasing	This systematic review described the prevalence of asymptomatic infection and coinfection and assessed the sex of SARS-CoV-2 infected children. The authors found that COVID-19 children may have co-infection with diverse pathogens. They argue that early misdiagnosis or a single detection method would overlook the virus and facilitate rapid spread in the public.	Zheng B, Wang H, Yu C. An increasing public health burden arising from children infected with SARS-CoV2: a systematic review and meta-analysis [published online, 2020 Aug 5]. Pediatr Pulmonol. doi:10.1002/ppul.25008

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					public health burden arising from infected children regarding the causation of asymptomatic infection or misdiagnosis and as a significant contributor to virus spread. The authors argued that the public should pay more attention to children during epidemics and conduct multimethod detection to identify infected children and control the source of infection further effectively.		
Pregnancy, immunologic factors, vertical transmission, placental infection, USA	5-Aug-20	Is Pregnancy an Immunological Contributor to Severe or Controlled COVID-19 Disease?	American Journal of Reproductive Immunology	Special issue article	The literature so far regarding COVID-19 in pregnancy is conflicting as to whether the alterations to immunity during pregnancy predispose pregnant women to severe COVID-19 disease. In this commentary the authors provide a review of existing information for immune responses in pregnant women to SARS-CoV-2 and severity of disease. They review the possibility of vertical transmission and current information regarding placental infection. They also highlight the possible consequences of COVID-19 on the general health of pregnant women.	The authors explore the effect of immunomodulation in pregnancy on COVID-19 infection, summarizing what is known about severity of disease in pregnancy, placental infection, and vertical transmission.	Hanna N, Hanna M, Sharma S. Is Pregnancy an Immunological Contributor to Severe or Controlled COVID-19 Disease? [published online 2020 Aug 5]. Am J Reprod Immunol. 2020. doi:10.1111/aji.13317
K-12, Reopening, COVID-19, children, transmission mitigation	5-Aug-20	An Examination of School Reopening Strategies during the SARS-CoV-2 Pandemic	medRxiv	Pre-print (not peer-reviewed)	In an assessment of various reopening strategies proposed by school systems, authors aim to provide insight into the epidemiological implications of these strategies and to quantify their consequences. Using a stratified Susceptible-Exposed-Infected-Removed model, this study evaluates the influences of reduced class density, transmission mitigation (including use of masks, desk shields, frequent surface cleaning, or outdoor instruction), and viral detection on cumulative presence of COVID-19 in K-12 schools. Specifically, authors compare the consequences of 1) reopening schools at full capacity, 2) allowing half of all children to return to in-person schooling while the other half continues with remote learning (parallel cohorts), and 3) alternating sessions in which different cohorts of students attend school by the week (rotating cohorts). Limitations to the simulations in this study include the consideration of only two separate age classes (children and adults), making no distinction between high school and elementary school children, treating all adults as having the same transmission rates, and treating school communities in isolation. While authors acknowledge that these caveats limit the quantitative accuracy of their predictions, they nevertheless contend that their qualitative conclusions are correct: measures reducing class density are likely to have the greatest impact in reducing the spread of COVID-19 brought on by the resumption of in-person school instruction.	Authors conclude that reopening schools at half capacity, running either two parallel cohorts of in-person and remote learning or two rotating cohorts of in-person learning, is likely to have a greater impact in controlling the spread of COVID-19 than direct measures that mitigate transmission risk. Furthermore, the model used in this study suggests that the regular administration of rapid surveillance tests, even with imperfect sensitivity, can significantly delay disease outbreaks.	Alfonso Landeros, Xiang Ji, Kenneth L. Lange, et. al. An Examination of School Reopening Strategies during the SARS-CoV-2 Pandemic. MedRxiv. 2020.08.05.20169086; doi: https://doi.org/10.1101/2020.08.05.20169086

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Administrative challenges, cesarean, maternity, personal protective equipment, India	5-Aug-20	Preparedness, administrative challenges for establishing obstetric services, and experience of delivering over 400 women at a tertiary care COVID-19 hospital in India	International Journal of Gynecology & Obstetrics	Original article	This article aims to provide a descriptive account of the challenges and administrative preparedness of establishing and sustaining safe obstetric services during the COVID-19 pandemic at Topiwala National Medical College & BYL Nair Charitable Hospital (NH), Mumbai, India. The management of pregnant women with COVID-19 was implemented as per international (WHO, RCOG, ACOG) and national (Indian Council of Medical Research) recommendations and guidelines at an academic, tertiary care hospital in India. With a multidisciplinary approach and active engagement of a multispecialty team, obstetric services were provided to over 400 women with laboratory-confirmed COVID-19. A sustainable model is established for providing services to pregnant women with COVID-19 in Mumbai Metropolitan Region, India. With limited resources, it is possible to set up dedicated maternity services, aligned to international guidelines, for safe pregnancy outcomes in COVID-19 settings. This COVID-19 hospital addressed the challenges and implemented several known and novel methods to establish and sustain obstetric services for women with COVID-19. The model established in the present study can be replicated in other low- and middle-income countries.	A sustainable model was established using a multidisciplinary approach and the active engagement of a multispecialty team in a hospital in India, and obstetric services were successfully provided to hundreds of pregnant women with COVID-19.	Mahajan NN, Pednekar R, Patil SR, et al. Preparedness, administrative challenges for establishing obstetric services, and experience of delivering over 400 women at a tertiary care COVID-19 hospital in India [published online, 2020 Aug 5]. Int J Gynaecol Obstet. 2020;doi:10.1002/ijgo.13338
Asthma, pediatrics, prevention, shielding, Europe	5-Aug-20	Shielding against SARS-Cov-2 infection is not justified in children with severe asthma	Pediatric Allergy and Immunology	Letter to the Editor	The authors performed a survey of 37 major pediatric asthma and allergy centers between September 2019 and July 2020 in 25 major European countries and Turkey that contributed to the treatment of approximately 1,000 young patients with severe asthma. The survey asked clinicians if any of the children they cared for experienced a SARS-CoV-2 infection. None of the centers reported any symptomatic COVID-19 or any positive SARS-CoV-2 tests. The authors then conducted structured interviews to evaluate how centers instructed their patients to avoid COVID-19. Only 4 European countries (UK, Ireland, Portugal and Malta) had a strict shielding policy in place which followed a principle of maximal segregation of severe asthmatics from the rest of the population: not leaving the house at all, not attending school, wearing face masks also at home, and social distancing even with family members. All other countries followed the principle of continuing asthma treatment in patients and advising to follow the same guidance as the general population. The authors conclude that shielding is not necessary in children with severe asthma for prevention of COVID-19 infection.	Countries who advised pediatric patients with severe asthma to follow the same prevention principles as the general population did not experience more COVID-19 cases than countries with strict shielding policies. The authors conclude that the strict shielding policies are therefore not necessary and may cause seclusion, separation, and stigmatization.	Kabesch M. Shielding against SARS-Cov-2 infection is not justified in children with severe asthma [published 2020 Aug 5]. Pediatr Allergy Immunol. 2020;doi:10.1111/pai.13327
Vertical transmission, neonate, placenta, cord blood, amniotic	5-Aug-20	Vertical Transmission of SARS-CoV-2 (COVID-19): Are Hypotheses	American Journal of Pediatrics	Review	The risk of fetal infection due to maternal-fetal transmission of SARS-CoV-2 remains highly debated. The detection of SARS-CoV-2 in the amniotic fluid, cord blood, and placentas of infected women lends biological plausibility to the theory of vertical transmission. This review provides an overview of the evidence	The authors summarize the current knowledge surrounding SARS-CoV-2 and vertical transmission. They point to the need for	Auriti C, Domencio UDR, Tziella C, et al. Vertical Transmission of SARS-CoV-2 (COVID-19): Are Hypotheses More than Evidences? [published online

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		More than Evidences?			for vertical transmission. The authors searched PubMed for articles relating to vertical transmission and SARS-CoV-2, only articles written in English or Italian were used. Despite viral RNA detection in cord blood and placental samples, no definitive reports of maternal-fetal transmission exist. While neonates have tested positive for SARS-CoV-2 after birth, this likely represents horizontal transmission from an infected mother or health care worker. IgG and IgM antibodies against SARS-CoV-2 have been found in cord blood, however the affected neonates all tested negative for viral material in blood and nasopharyngeal samples. SARS-CoV-2 has not been detected in breast milk samples, which supports recommendations for breastfeeding in women with suspected or confirmed infection. However, documentation of low ACE2 receptor expression in the placenta during early gestation, point to the need for further research articulating the risk of infection and transmission at different pregnancy stages.	additional studies to examine the risk of infection based on pregnancy stage as well as the need to ascertain long-term health outcomes for exposed neonates.	2020 Aug 05]. Am J Perinatol. 2020. doi: 10.1055/s-0040-1714346.
Pediatric nephrology, kidney replacement therapy, resource allocation	5-Aug-20	Effect of adult COVID-19 surge on the provision of kidney replacement therapy in children	Pediatric Nephrology	Editorial Commentary	A significant proportion of adult patients with severe COVID-19 develop acute kidney injury (AKI) requiring kidney replacement therapy (KRT). Due to increased demand for KRT in adult patients and diversion of KRT resources to the adult COVID-19 surge, a strategy needs to be developed for children in the setting of limited resources. In this commentary, the author discusses special considerations and adaptations that can be made during the delivery of KRT to adult and pediatric patients with COVID-19 induced AKI. These recommendations are based on experience of different centers worldwide. The author describes the different KRT modalities and their use in COVID-19. He also provides suggestions for managing the increased need for anticoagulation in KRT due to COVID-19 hypercoagulability. He concludes by emphasizing the importance of teamwork, timely dissemination of knowledge, developing resilience in the system, and being innovative during the current pandemic.	Acute kidney injury requiring kidney replacement therapy (KRT) is a special consideration in COVID-19 adult and pediatric patients. The author provides recommendations for the management of KRT during the COVID-19 pandemic.	Deep A. Effect of adult COVID-19 surge on the provision of kidney replacement therapy in children [published online, 2020 Aug 5]. <i>Pediatr Nephrol.</i> 2020;1-8. doi:10.1007/s00467-020-04723-z
USA, universal testing, mental health, maternal	5-Aug-20	The Psychological Experience of Obstetric Patients and Health Care Workers after Implementation of Universal SARS-CoV-2 Testing	American Journal of Perinatology	Original Research	Universal testing of SARS-CoV-2 among hospitalized obstetrical patients may adversely impact maternal mental health and hospital worker job satisfaction. This mixed-methods retrospective study sought to characterize the hospitalization and early postpartum psychological experiences of asymptomatic obstetric patients tested for SARS-CoV-2. 318 asymptomatic pregnant women who underwent SARS-CoV-2 testing between April 12, 2020 to April 26, 2020 in Philadelphia, PA, were included in the study. Following discharge, they were contacted for semi-structured telephone interviews at 1 and 2 weeks posthospitalization to assess maternal mental health. Of the 8 women who tested positive for SARS-COV-2, 6 women vocalized negative hospital experiences due to a perceived lack of provider	While universal testing for SARS-CoV-2 in obstetric units is viewed favorably by health care workers, it has mixed effects on maternal mental health. As health care institutions continue to implement and refine universal testing protocols, careful consideration should be made to balancing provider and patient safety	Bender WR, Srinivas S, Coutifaris P, et al. The Psychological Experience of Obstetric Patients and Health Care Workers after Implementation of Universal SARS-CoV-2 Testing [published online 05 Aug 2020]. <i>Am J Perinatol.</i> 2020. doi: 10.1055/s-0040-1715505.

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					and partner support and neonatal separation after birth. Among the women who tested negative, 34% of multiparous women reported increased postpartum anxiety compared to prior deliveries. Only 27.6% found their negative test result reassuring. Additionally, the effects of universal testing on labor and delivery health care worker's job satisfaction and workplace anxiety was assessed using an online survey. Health care workers viewed universal testing favorably, and the policy contributed to increased job satisfaction (61%) and decreased job-related anxiety (66%). However, when compared to pre-COVID-19 pandemic levels hospital workers reported less overall job satisfaction (93% vs 62%) and increased significant job anxiety (1% vs 27%).	and satisfaction during the labor and delivery process.	
Children, infectious period	5-Aug-20	Inferred duration of infectious period of SARS-CoV-2: rapid scoping review and analysis of available evidence for asymptomatic and symptomatic COVID-19 cases	BMJ Open	Original research	This rapid scoping review assesses the literature on the inferred duration of the infectious period of COVID-19 and provides an overview of the variation depending on the studies' methodological approach. The authors aggregated the central tendency and variation of the parameter estimates for infectious period in asymptomatic and symptomatic cases from virologic, tracing and modelling studies. The included studies were either of adults only or both adults and children. There was substantial variation in the estimates and in how the infectious period was inferred, and there are few data to inform the asymptomatic infectious period. The median pre-symptomatic infectious period across studies varied from <1 to 4 days. There was a trend toward studies that included severe cases having a longer symptomatic infectious duration (estimated to be 4 days), but this effect was not statistically significant. The estimated mean time from symptom onset to two negative RT-PCR tests was 13.4 days (95% CI 10.9 to 15.8) but was 5.8 days shorter when studies included children. The estimated mean duration from symptom onset to hospital discharge or death (potential maximal infectious period) was 18.1 days (95% CI 15.1 to 21.0); time from symptom onset to discharge was on average 4 days shorter than time from symptom onset to death. Viral dynamic data and model infectious parameters were often shorter than repeated diagnostic data. Available data provide a preliminary evidence base to inform models of central tendency for key parameters of infectiousness.	This literature review assessing the inferred duration of COVID-19's infectious period found that mean time from symptom onset to two negative RT-PCR tests was 7.6 days for studies that included children, 5.8 days shorter than studies of all adults.	Byrne AW, McEvoy D, Collins AB, et al. Inferred duration of infectious period of SARS-CoV-2: rapid scoping review and analysis of available evidence for asymptomatic and symptomatic COVID-19 cases [published online 2020 Aug 5]. BMJ Open. 2020;10(8):e039856. doi:10.1136/bmjopen-2020-039856

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Echocardiography, immunoglobulins, intravenous, conjunctivitis, fever, incomplete Kawasaki disease, India	5-Aug-20	Incomplete Kawasaki Disease as Presentation of COVID-19 Infection in an Infant: A Case Report	Journal of Tropical Pediatrics	Case Report	This case report described a 5-month-old male infant with incomplete Kawasaki disease (KD) and concomitant SARS-CoV-2 infection in India. He was admitted to the authors' center after presenting with high-spiking fever for 5 days with skin rash, bilateral non-purulent conjunctivitis, and irritability. His CRP and Erythrocyte Sedimentation Rate was markedly elevated. Echocardiography revealed a dilated left main coronary artery (3.0 mm, Z score +4.30) and left anterior descending artery (2.37 mm, Z score +3.76). Concomitantly RT-PCR for COVID-19 was positive on the fifth-day sample and both asymptomatic parents were tested positive for COVID-19. This infant was diagnosed as incomplete KD with SARS-CoV-2 infection and treated with intravenous immunoglobulin, oral aspirin, and azithromycin. The patient improved after 48 h and was discharged on oral aspirin. The author concluded that incomplete KD may co-exist with SARS-CoV-2 infection in infants and early institution of IVIG may lead to a better outcome.	This case report of an Indian 5-month-old male infant indicates that incomplete KD may co-exist with SARS-CoV-2 infection in infants and early institution of IVIG may lead to a better outcome.	Raut S, Roychowdhury S, Bhakta S, Sarkar M, Nandi M. Incomplete Kawasaki Disease as Presentation of COVID-19 Infection in an Infant: A Case Report [published online, 2020 Aug 5]. J Trop Pediatr. doi:10.1093/tropej/fmaa047
Health disparities, racial/ethnic differences, socioeconomic differences, children, United States	5-Aug-20	Racial/Ethnic and Socioeconomic Disparities of SARS-CoV-2 Infection Among Children	Pediatrics	Article	The authors conducted a cross-sectional study of children tested for SARS-CoV-2 at an exclusively pediatric drive-through/walk-up SARS-CoV-2 testing site in the USA from March 21-April 28, 2020 to evaluate racial/ethnic and socioeconomic differences in rates of SARS-CoV-2 infection among children. The authors measured the association between patient race/ethnicity and estimated median family income (MFI) with (1) SARS-CoV-2 infection and (2) reported exposure to SARS-CoV-2. Of 1000 children tested for SARS-CoV-2 infection, 20.7% tested positive. In comparison to non-Hispanic (NH)-whites (7.3%), minority children had higher rates of infection: NH-black (30.0%) and Hispanic (46.4%). In comparison to children in the highest MFI quartile (8.7%), infection rates were higher among children in quartile 3 (23.7%), quartile 2 (27.1%), and quartile 1 (37.7%) (Note: Quartile 4 corresponds with highest, quartile 1 with lowest income). Rates of reported exposure to SARS-CoV-2 also differed by race/ethnicity and socio-economic status. The authors found that racial/ethnic minorities and socio-economically disadvantaged children carry the highest burden of infection.	In this cross-sectional study of a large cohort of children tested in the United States for SARS-CoV-2 through an exclusively pediatric drive-through/walk-up testing site, rates of SARS-CoV-2 infection were disproportionately higher among minority and socio-economically disadvantaged youth.	Goyal MK, Simpson JN, Boyle MD, et al. Racial/Ethnic and Socioeconomic Disparities of SARS-CoV-2 Infection Among Children [published online ahead of print, 2020 Aug 5]. Pediatrics. 2020; doi:10.1542/peds.2020-009951
breastfeeding, breast milk, neonatal health, immunity, midwives	4-Aug-20	Breastfeeding during the COVID-19 pandemic	European Journal of Midwifery	Letter to the Editor	In this letter to the editor, the author warns of the consequences of interrupting breastfeeding during infectious outbreaks, such as the current COVID-19 pandemic. WHO recommends that newborns be given breast milk exclusively for the first 6 months, continue receiving breast milk up to 2 years of age, after which they should be given complementary foods. The author recommends mothers delay weaning in infants and toddlers during any infectious outbreak, emphasizing the immune protections offered by breast milk. Furthermore, evidence has	This letter to the editor warns of the consequences of interrupting breastfeeding during the COVID-19 pandemic, and emphasizes the importance of breast milk to neonatal health and immunity. The author	Yurtsal ZB. Breastfeeding during the COVID-19 pandemic. Eur J Midwifery. 2020;4:31. Published 2020 Aug 4. doi:10.18332/ejm/123868

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					shown that the breast milk of mothers with COVID-19 may contain SARS-CoV-2 specific antibodies, which may then be passed on to the infant. In the event that a mother has been exposed to a person diagnosed with COVID-19, the author recommends she continue breastfeeding and take the following precautions: 1) wear a mask while breastfeeding or expressing milk; 2) wash hands for 20 seconds before breastfeeding; 3) ensure frequent ventilation in the environment; 4) wash clothes at 60-90°C; and 5) ensure optimal health by drinking plenty of fluids, balancing her diet, and getting regular sleep. Midwives can help protect and promote breastfeeding, especially by supporting breastfeeding initiation. The author also emphasizes the importance of guaranteeing protection and acceptable working conditions for midwives, so that they can focus on ensuring safe and family-centered care during the COVID-19 pandemic.	provides examples of precautionary measures that can be taken by mothers exposed to SARS-CoV-2 so that they can safely continue breastfeeding their infants.	
COVID-19; children; school reopening	4-Aug-20	COVID-19 and school return: The need and necessity	Journal of Pediatric Nursing	Editorial	The author discusses children's safe return to school during the COVID-19 pandemic. Data reported worldwide indicate lower rates of infection and transmission in children than in adults. Contact tracing also reveals that COVID-19 in children is often associated with household contacts. Infected children may be asymptomatic or have mild symptoms such as headaches, nasal discharge, loss of smell, and gastro-intestinal symptoms. Children who have medically complex conditions such as obesity and chronic illness are at higher risk of infection. Multi-system Inflammatory Syndrome in Children (MIS-C) due to SARS-CoV-2 is rare. Children in low- and middle-income countries are likely at greater risk of infection, given the prevalence of malnutrition and other infectious diseases, shortage of resources such as health services, and social conditions associated with poverty such as overcrowding and poor sanitation. Considering the evidence, experts worldwide are recommending that children return to school. In addition to positive consequences for children's learning and social and emotional well-being, schools will serve as a resource that provides needed child-care support for working parents. As schools consider re-opening, pediatric and school nurses have important roles and responsibilities in providing evidence-based guidance and support to families and school-based colleagues regarding preventive practices.	The author discusses children's safe return to school during the COVID-19 pandemic. Given the benefits of school attendance and the low infection and transmission rate in children, experts worldwide are recommending that schools re-open. As schools consider re-opening, pediatric and school nurses have important roles and responsibilities in providing evidence-based guidance and support to families and school-based colleagues regarding preventive practices.	Betz CL. COVID-19 and school return: The need and necessity. J Pediatr Nurs. 2020;54:A7-A9. doi:10.1016/j.pedn.2020.07.015.
MIS-C, antibodies, receptor binding domain, SARS-CoV-2	4-Aug-20	Multisystem Inflammatory Syndrome in Children and SARS-CoV-2 Serology	Pediatrics	Commentary	A study by Rostad et al. (Pediatrics, 2020) found that children [age range not specified] hospitalized with MIS-C have significantly higher concentrations of antibodies against the receptor-binding domain (RBD) of SARS-CoV-2 spike protein than non-hospitalized children. Hospitalized children also tend to have higher antibody levels against the entire spike protein and the viral nucleocapsid protein. Lastly, they found that these anti-	A recent study by Rostad et. al. found that children hospitalized with MIS-C tend to have more antibodies against the receptor binding domain of SARS-CoV-2. This may	Zeichner SL and Cruz AT. Multisystem Inflammatory Syndrome in Children and SARS-CoV-2 Serology. Pediatrics. 2020;146(6):e2020032888

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					RBD antibody levels correlated with erythrocyte sedimentation rate, suggesting that these antibodies are associated with a more pro-inflammatory state. The correlation between more anti-RBD antibodies and MIS-C is an especially important one, as MIS-C is difficult to diagnose. Doing an antibody test in children exhibiting symptoms of MIS-C could help differentiate MIS-C from other inflammatory disorders such as Kawasaki disease. It is yet unclear whether the anti-RBD response represents an important part of the immune response against SARS-CoV-2, or a problematic response given its correlation with severe disease. The authors also caution vaccines that produce anti-RBD antibodies, as these may increase the risk of inflammatory disorders.	represent a new diagnostic tool in diagnosing MIS-C, as well as an important consideration for vaccine development.	
Pediatric, suspected cases, screen, symptom, China	4-Aug-20	How should our testing behavior change with time in children in current COVID-19 pandemic?	European Journal of Clinical Investigation	Original Paper	This study aimed to summarize the key points and suggestions on screening COVID-19 for pediatric patients. The authors retrospectively identified 46 suspected pediatric patients who got an RT-PCR test for SARS-CoV-2 in Children's Hospital of Chongqing Medical University, China, from 30 January to 13 February 2020 and were all tested negative. Comparing these 46 suspected patients with confirmed COVID-19 pediatric cases, they found the incidence of epidemic history was lower in suspected cases ($P < 0.001$). The suspected pediatric patients had a higher rate of fever, cough, headache or dizziness, vomiting and abdominal discomfort ($p < 0.001$). They also conducted a review, analyzing literature about laboratory-confirmed COVID-19 pediatric cases from January 1st, 2019 to March 25th, 2020. 29 studies with 488 pediatric COVID-19 cases were identified. Compared with older patients, the incidence of fever, respiratory symptoms, lethargy and headache or dizziness in pediatric patients was lower, except for the incidence of gastro-intestinal symptoms were higher. The authors concluded that children with a history of close contact with confirmed cases, manifested as cough and fever should be paid more attention to after excluding infection of other common pathogens and atypical symptoms should not be over-emphasized in screening COVID-19 for pediatric patients.	This study summarized the key points and suggestions on screening COVID-19 for pediatric patients by comparing suspected cases who had negative SARS-CoV-2 RT-PCR testing results and laboratory-confirmed cases. In addition, this study conducted a literature review, analyzing the clinical features of pediatric confirmed COVID-19 cases and comparing them with adult patients.	Zhang Y, Lin J, Xu H, et al. How should our testing behaviour change with time in children in current COVID-19 pandemic? Eur J Clin Invest. 2020 Oct;50(10):e13351. doi: 10.1111/eci.13351. Epub 2020 Aug 4.
Chest CT, thoracic CT, lung, pulmonary, pediatric, adult	4-Aug-20	Chest CT findings of COVID-19-infected patients, are there differences between pediatric and adult patients? A systematic review	Egyptian Journal of Radiology and Nuclear Medicine	Systematic Review	The authors conducted a systematic review of the CT findings of COVID-19-infected pediatric and adult patients to make an age-based comparison. Five electronic databases (PubMed, Scopus, ProQuest, ScienceDirect, and Web of Sciences) were searched from January 1 to March 27, 2020. Out of 762 articles initially screened, 15 eligible articles had adequate data on chest CT findings of COVID-19-infected patients. Authors reported that in pediatric patients (≤ 15 years old), peripheral distribution was found in 100% of cases, ground-glass opacities (GGO) in 55.2%, bilateral involvement in 50%, halo sign in 50%, unilateral	Children infected with COVID-19 can present with normal or atypical findings (nodular opacities/unilateral involvement) in chest imaging more frequently than adult patients. More caution should be taken to avoid misdiagnosis or	Azadbakht J, Haghi-Aminjan H, Farhood B. Chest CT findings of COVID-19-infected patients, are there differences between pediatric and adult patients? A systematic review. The Egyptian Journal of Radiology and Nuclear Medicine. 2020;51(1):145. doi:10.1186/s43055-020-00261-8

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					involvement in 30%, consolidation in 22.2%, crazy paving pattern in 20%, nodular opacities in 15%, pleural effusion in 4.2%, lymphadenopathy in none, and normal imaging in 20.8% of cases. On the other hand, in adult patients, bilateral involvement was reported in 76.8%, GGO in 68.4%, peripheral distribution in 62.2%, mixed GGO and consolidation in 48.7%, consolidation in 33.7%, crazy paving pattern in 27.7%, mixed central and peripheral distribution in 25.0%, unilateral involvement in 15.2%, nodular opacities in 9.2%, pleural effusion in 5.5%, central distribution of lesions in 5.4%, lymphadenopathy in 2.4%, and normal imaging in 9.8% of cases. The authors concluded that children infected with COVID-19 can present with normal or atypical findings more frequently than adult patients. Hence, more caution to avoid misdiagnosis or missed diagnosis in infected children is needed.	missed diagnosis in infected children.	
Health systems, psycho-social impacts, telemedicine	4-Aug-20	Infant and child health and healthcare before and after COVID-19 pandemic: will it be the same ever?	Egyptian Pediatric Association Gazette	Review Article	COVID-19 is an unprecedented global health crisis. In addition to considering the short-term health implications, there are also critical long-term social, psychological, economic, and educational consequences to consider. This review discusses various topics related to child well-being including common clinical symptoms of COVID-19 and recommendations for care, importance of credible information, challenges to healthcare delivery, psycho-social impacts, child abuse, education, nutrition, and economic impacts. The main impacts on healthcare systems include overwhelmed facilities, the rapid rise in telemedicine, and millions of children missing or delaying recommended vaccinations.	COVID-19 presents both short-term and long-term challenges to child development and well-being. This review discusses various topics to consider and address.	El-Shabrawi, M., Hassanin, F. Infant and child health and healthcare before and after COVID-19 pandemic: will it be the same ever?. Egypt Pediatric Association Gaz 68, 25 (2020). https://doi.org/10.1186/s43054-020-00039-7
Pediatric, bleeding disorders, thrombasthenia	4-Aug-20	COVID-19 in a pediatric patient with Glanzmann thrombasthenia	Pediatric Blood & Cancer	Letter to the Editor	Glanzmann thrombasthenia (GT) is a constitutional bleeding disorder associated with mucocutaneous bleeding. The authors share the case of a 16-year-old female with GT who presented with myalgia, headache, cough, diarrhea, fever, and loss of taste and smell in March 2020. While inpatient, she exhibited epistaxis and menorrhagia. Labs indicated hypercoagulability and inflammatory markers, and the patient was given enoxaparin. Due to bleeding risks from nasopharyngeal swabbing, SARS-CoV-2 PCR testing was performed on expectorations and feces, and were negative. COVID-19 IgG was negative. Lab abnormalities gradually improved, and the patient was discharged on Hospital Day 14. COVID-19 IgG was positive on Day 21, indicating that the patient had had a COVID-19 infection. The authors stress that such a delayed diagnosis could increase the risk of COVID-19 exposure to others, and they suggest developing improved SARS-CoV-2 assays for alternative body fluids. Treatment of COVID-19 positive patients with bleeding disorders needs to balance the	The authors discuss the case of a 16-year-old female with Glanzmann thrombasthenia and COVID-19 infection. Treatment of COVID-19 positive patients with bleeding disorders needs to balance the management of hypercoagulability related to COVID-19, and the risks of hemorrhage.	Sattler L, Feugeas O, Hager C, Grunebaum L, Desprez D. COVID-19 in a pediatric patient with Glanzmann thrombasthenia [published online ahead of print, 2020 Aug 15]. <i>Pediatr Blood Cancer.</i> 2020;e28662. doi:10.1002/pbc.28662

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					management of hypercoagulability related to COVID-19, and the risks of hemorrhage.		
Intensive care unit, pediatrics, Brazil	4-Aug-20	Pediatric Patients with COVID-19 Admitted to Intensive Care Units in Brazil: A Prospective Multicenter Study	The Journal of Obstetrics and Gynaecology Research	Original Article	The authors conducted a prospective, multicenter, observational study to describe the clinical characteristics of children and adolescents (aged one month to 19 years) admitted with confirmed COVID-19 to 19 pediatric intensive care units associated with the Brazilian Research Network in Pediatric Intensive Care (BRnet-PIC), between March 1 and May 31, 2020. Seventy-nine patients were analyzed in the study, including 10 patients with MIS-C. The authors compared MIS-C and non-MIS-C patients according to the presence of comorbidities, age <1 year, and the need for invasive mechanical ventilation (IMV). The study showed that 41% of patients had comorbidities, and those patients were significantly older with significantly more severe presentations (more ARDS, more ventilatory support, more IMV). The authors also observed that although fever, cough, and tachypnea were common in both groups, severe symptoms, gastrointestinal symptoms, and higher inflammatory markers were more frequent in the MIS-C group. Also, most patients needed some respiratory support, mostly only oxygen therapy, but about 20% needed IMV. In addition, unlike other studies, age <1 year was not associated with a worse prognosis.	In this pediatric cohort, lethality was low, and chronic diseases and other comorbidities played an important role in the development of severe forms of COVID-19. The authors believe that this study may contribute to a better understanding of COVID-19, as it describes the first large series of patients admitted to PICUs in the Southern Hemisphere.	Prata-Barbosa A, Lima-Setta F, Santos GRD, et al. Pediatric patients with COVID-19 admitted to intensive care units in Brazil: a prospective multicenter study [published online ahead of print, 2020 Aug 4]. J Pediatr (Rio J). 2020;S0021-7557(20)30192-3. doi:10.1016/j.jpmed.2020.07.002
Pregnancy, placental infection, clinical characteristics, Missouri, USA	4-Aug-20	Placental SARS-CoV-2 in a Pregnant Woman with Mild COVID-19 Disease	Journal of Medical Virology	Research article	The authors present a case of placental SARS-CoV-2 infection in a 29-year-old multi-gravida woman with mild COVID-19 disease. The patient presented at 40-4/7 weeks for labor induction. With myalgias two days prior, she tested positive for SARS-CoV-2. On pathology examination of the placenta, maternal vascular mal-perfusion and SARS-CoV-2 virus in chorionic villi endothelial cells was found, with no fetal vascular mal-perfusion. To the authors' knowledge, this is the first report of placental SARS-CoV-2 despite mild COVID-19 disease: the patient had no fever, cough, or shortness of breath, only myalgias and sick contacts. Evidence of placental SARS-CoV-2 infection raises concern for placental vasculopathy (potentially leading to fetal growth restriction and other pregnancy complications) and possible vertical transmission – especially for pregnant women who may be exposed to COVID-19 in early pregnancy.	This article describes a case of placental SARS-CoV-2 infection in a woman with mild COVID-19, raising concern for placental vasculopathy and other sequelae. Based on this finding, the authors question whether future pregnancy guidance should include stricter pandemic precautions, such as screening for a wider array of COVID-19 symptoms, increased antenatal surveillance, and possibly routine COVID-19 testing throughout pregnancy.	Hsu AL, Guan M, Johannesen E, et al. Placental SARS-CoV-2 in a Pregnant Woman with Mild COVID-19 Disease [published online 2020 Aug 4]. J Med Virol. 2020. doi:10.1002/jmv.26386
Lockdown, school closure, Europe	4-Aug-20	Comparing the impact on COVID-19	medRxiv	Pre-print (not peer-reviewed)	This cross-country comparison of 13 European countries assessed the relative efficacy of non-pharmaceutical interventions to reduce the transmission of COVID-19. The effects of government-	This study assessing the impact of governmental closure policies and self-	Jamison J, Bundy D, Jamison D, et al. Comparing the impact on COVID-19 mortality of self-

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		mortality of self-imposed behavior change and of government regulations across 13 countries			enforced closure policies over time and self-imposed alteration of individual behaviors in response to awareness of the epidemic were evaluated by looking at the rate of change in COVID-19 fatalities per day, 16-20 days after interventions took place. Voluntarily reduced mobility decreased the percent change in deaths per day by 9.2% (95% CI 4.5-14.0%). Government closure policies decreased the percent change in deaths per day by 14.0 % (95% CI 10.8-17.2%). Disaggregating government policies, the most beneficial were inter-city travel restrictions, cancelling public events, and closing non-essential workplaces. Other sub-components, such as closing schools and imposing stay-at-home rules, showed smaller and statistically insignificant impacts. This study showed that non-pharmaceutical interventions can substantially reduce COVID-19 fatalities. Importantly, the effect of voluntary behavior change is of the same order of magnitude as government-mandated regulations. These findings, including the substantial variation across dimensions of closure, have implications for the phased withdrawal of government policies as the epidemic recedes, and for the possible re-imposition of regulations if a second wave occurs.	imposed behavior changes found both to impact COVID-19 mortality rates to the same magnitude, which has implications for mitigation efforts in future waves of the COVID-19 pandemic. School closures compared to other governmental closure policies had a smaller and statistically insignificant impact.	imposed behavior change and of government regulations across 13 countries [published online 2020 Aug 4]. medRxiv. 2020. doi:10.1101/2020.08.02.20166793
Children, CT, imaging, lower respiratory tract infection, pneumonitis, radiography	4-Aug-20	Thoracic imaging of coronavirus disease 2019 (COVID-19) in children: a series of 91 cases	Pediatric Radiology	Original Article	In this study, the authors collected data using completed standardized case report forms submitted to the office of the European Society of Pediatric Radiology from March 12th to April 8th, 2020. 91 children (49 males; median age 6.1 years, range 9 days–17 years) who tested positive on PCR testing for SARS-CoV-2 were included. Most had mild symptoms, mostly fever and cough, and one-third had coexisting medical conditions. 11% of children presented with severe symptoms and required ICU. Chest radiographs were available in 89% of patients and 10% of them were normal. Abnormal chest radiographs showed mainly perihilar bronchial wall thickening (58%) and/or airspace consolidation (35%). CT scans were available in 26% of cases, with the most common abnormality being ground glass-opacities (88%) and/or airspace consolidation (58%). Tree in bud opacities was seen in 6 of 24 CTs (25%). Lung ultrasound and chest MRI were rarely utilized. The authors concluded that diagnosing pediatric COVID-19 by using CT seems unnecessary; chest radiography can be used in symptomatic children to assess airway infection or pneumonia; and CT should be reserved for when there is a clinical concern to assess for possible complications, especially in children with coexisting medical conditions.	The authors argued that chest imaging should not be considered as a screening tool for diagnosis in children and chest radiography can be used in symptomatic children to assess airway infection or pneumonia.	Caro-Dominguez P, Shelmerdine SC, Toso S, et al. Thoracic imaging of coronavirus disease 2019 (COVID-19) in children: a series of 91 cases [published online, 2020 Aug 4]. Pediatr Radiol. 2020;1-15. doi:10.1007/s00247-020-04747-5

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Children, school opening, online school, school-related outbreak, South Korea	4-Aug-20	Stepwise School Opening Online and Off-line and an Impact on the Epidemiology of COVID-19 in the Pediatric Population	medRxiv	Pre-print (not peer-reviewed)	Data on SARS-CoV-2 transmission from a pediatric index patient to others in the school setting are limited. The authors analyzed data of pediatric COVID-19 patients in South Korea as well as information about school opening delays and re-opening policies. There was no sudden increase in pediatric cases after school openings, and the proportion of pediatric cases remained around 7.0% to 7.1% nationwide. As of 11 July 2020, 45 children from 40 schools were diagnosed with COVID-19. Of more than 11,000 students and staff tested, only one additional student was found to be infected. Among pediatric COVID-19 patients (n=45), 32 (71.1%) had information available for the source of infection, of which 25 (25/45, 55.6%) were infected from family members. In kindergarten and elementary school students, 79.1% of children were infected by family members while only 28.6% of adolescents in the older age group were infected by family members (p<0.001). The authors conclude that partial in-person school opening in South Korea did not cause significant school-related outbreak among pediatric population.	After in-person classes resumed partially in South Korea, 45 children were diagnosed with COVID-19 but this did not affect the proportion of nationwide pediatric cases.	Yoon Y, Kim K-R, Park H et al. Stepwise School Opening Online and Off-line and an Impact on the Epidemiology of COVID-19 in the Pediatric Population. [published online, 2020 Aug 4]. medRxiv. doi:https://doi.org/10.1101/2020.08.03.20165589
Pregnancy, gestational diabetes, hyperglycemia, UK	4-Aug-20	Approaches to screening for hyperglycemia in pregnant women during and after the COVID-19 pandemic	Diabetic Medicine	Original Article	The authors sought to evaluate alternative diagnostic strategies to oral glucose tolerance tests (including random plasma glucose, fasting plasma glucose, and HbA1c) for use during the COVID-19 pandemic. They obtained retrospective data on healthy pregnancies (n=736), gestational diabetes pregnancies (n=826), and women with ≥1 gestational diabetes risk factor (n=361) in the UK. A gestational diabetes diagnosis was significantly associated with random plasma glucose at 12 weeks, fasting plasma glucose, and HbA1c at 28 weeks' gestation. Each measure predicted some, but not all, pregnancy outcomes studied. At 12 weeks, ~5% of women would have been identified using random plasma glucose ≥8.5 mmol/l (sensitivity 42%; specificity 96%) and at 28 weeks using HbA1c ≥39 mmol/mol (sensitivity 26%; specificity 96%) or fasting plasma glucose ≥5.2-5.4 mmol/l (sensitivity 18-41%; specificity 97-98%). The authors concluded that random plasma glucose at 12 weeks and fasting plasma glucose or HbA1c at 28 weeks can identify women with hyperglycemia at risk of suboptimal pregnancy outcomes.	The authors identified alternative diagnostic strategies that can be used to identify high-risk women for hyperglycemia in pregnancy during the COVID-19 pandemic but that should not be adopted long-term without further studies.	Meek CL, Lindsay RS, Scott EM, et al. Approaches to screening for hyperglycemia in pregnant women during and after the COVID-19 pandemic [published online, 2020 Aug 4]. Diabet Med. doi:10.1111/dme.14380
Anxiety, caregiver burden, depression, parent-child relationship, USA	4-Aug-20	Initial Challenges of Caregiving During COVID-19: Caregiver Burden, Mental Health, and the Parent-Child Relationship	Child Psychiatry & Human Development	Original research	Outcomes of children affected by disasters are worst among children of highly distressed caregivers, or those caregivers who experience their own negative mental health outcomes from the disaster. The current study used path analysis to examine concurrent patterns of parents' (n = 420) experience from a national sample during the early months of the U.S. COVID-19 pandemic. The results of a multi-group path analysis, organized by parent gender, indicate good fit to the data [X2(10) = 159.04, p <0.01]. Results highlight the important spillover link between	Parents who reported higher rates of caregiver burden also reported higher rates of generalized anxiety, depression, and parent perceived child stress during the early months of the U.S. COVID-19 pandemic. There are	Russell BS, Hutchison M, Tambling R, Tomkunas AJ, Horton AL. Initial Challenges of Caregiving During COVID-19: Caregiver Burden, Mental Health, and the Parent-Child Relationship [published online, 2020 Aug 4]. Child Psychiatry Hum Dev.

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					mental health (i.e., depression, anxiety), perceptions of children’s stress, and subsequent impacts on child-parent relationships. Clear links exist between mental health indicators and child-parent conflict and closeness, such that parents with more severe depression symptoms and who perceive greater child stress also report greater conflict and less closeness, those with more severe anxiety symptoms report less conflict. This suggests that anxious parents may be particularly vigilant to responding to cues of children’s distress by encouraging them to express their opinions and providing support and acceptance of their decisions. The impact of millions of families sheltering in place during the COVID-19 pandemic for an undefined period may lead to unprecedented impacts on individuals’ mental health with unknown impacts on child-parent relationships. These impacts may be heightened for families whose caregivers experience increased mental health symptoms, as was the case for fathers in the current sample.	significant linkages between parents’ caregiver burden, mental health, and perceptions of children’s stress.	2020;1-12. doi:10.1007/s10578-020-01037-x
Autism spectrum disorder, children, chronotype, sleep problems, Turkey	4-Aug-20	The relationship between chronotype, sleep, and autism symptom severity in children with ASD in COVID-19 home confinement period [Free Access to Abstract only]	Chronobiology International	Report	This study aimed to investigate the relationship between chronotype preference/sleep problems and symptom severity of children with Autism Spectrum Disorder (ASD) during the confinement and social isolation of the COVID-19 outbreak. This study included 46 drug-naive children aged 4–17 years diagnosed with ASD in the clinic of the Department of Child and Adolescent Psychiatry at Selcuk University in Turkey. The Autism Behavior Checklist (AuBC), Children’s Sleep Habits Questionnaire, and Children’s chronotype questionnaire were filled out before and at the end of the COVID-19 mandated home confinement by the children’s parents. Children with ASD during the home confinement reported higher chronotype scores compared to the normal non-home confinement state. The chronotype score and sleep problems of children with ASD during the home confinement period varied according to the AuBC score. The sleep problems of the children with ASD during the home confinement period mediated the relationship between chronotype score and severity of autism symptoms. If sleep problems can be controlled with parental education, pharmacotherapy, and psychotherapeutic interventions, the impacts on children with ASD of home confinement can be reduced.	This study found that children with ASD exhibited significantly greater sleep problems and chronotype score during the home confinement period than during the normal state.	Türkoğlu S, Uçar HN, Çetin FH, Güler HA, Tezcan ME. The relationship between chronotype, sleep, and autism symptom severity in children with ASD in COVID-19 home confinement period [published online, 2020 Aug 4]. Chronobiol Int. 2020;1-7. doi:10.1080/07420528.2020.1792485
Placenta, mother-child transmission, neonatal infection, France	4-Aug-20	Transmission of SARS-CoV-2 Across the Placenta	New England Journal of Medicine, Journal Watch Infectious Diseases	Editorial Comment	The authors summarize and comment on a case report from France, of transplacental mother-to-child transmission of SARS-CoV-2 resulting in symptomatic neonatal infection. The case was of a pregnant 23-year-old woman who presented at 35 weeks’ gestation with 2 days of fever and respiratory symptoms. On admission, she had lymphopenia and elevated liver enzymes and	The case report provides evidence of transplacental mother-child transmission of SARS-CoV-2. However, lack of additional convincing case reports	Gandhi, R. and Bebell, L.. Transmission Of SARS-Cov-2 Across The Placenta. [published online, 2020 Aug 4] NEJM Journal Watch. Available at: <https://www.jwatch.org/na5214

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					<p>inflammatory markers. SARS-CoV-2 was detected in blood as well as nasopharyngeal and vaginal swabs. Three days later, fetal heart rate tracing was concerning, prompting cesarean delivery of a 2.5-kg boy, with SARS-CoV-2 detected in amniotic fluid. However, because of low Apgar scores, the infant was intubated for 6 hours. Neonatal blood, bronchoalveolar lavage, and nasopharyngeal and rectal swabs tested positive for SARS-CoV-2 on day-of-life 1 (DOL 1), as did rectal and nasopharyngeal swabs on DOL 3 and DOL 18. Placental tissue tested positive for SARS-CoV-2, with higher viral levels than all the other specimens. On DOL 3, the neonate developed irritability, axial hypertonia, and opisthotonos. Of note, cerebrospinal fluid showed mildly elevated protein and 300 leukocytes/mm³ but was negative for SARS-CoV-2. On DOL 11, brain MRI revealed white matter gliosis. The infant received no specific treatment and improved over the ensuing 2 months. According to the authors, this case report provides the most compelling evidence thus far that SARS-CoV-2 can be transmitted across the placenta.</p>	suggests that transmission across the placenta is uncommon.	3/2020/08/04/transmission-sars-cov-2-across-placenta?query=C19&cid=DM96666_NEJM_Registered_Users_and_InActive&bid=239026225> [Accessed 8 August 2020].
Contact tracing, Household transmission, Children, Korea	4-Aug-20	Household Transmission of SARS-CoV-2 in Korea: A Clue to the Role Children May Play	New England Journal of Medicine, Journal Watch Pediatrics and Adolescent Medicine	Editorial Comment	<p>The author provides a summary and comments on a contact-tracing study by Park of SARS-CoV-2 conducted in South Korea, and the role of children in transmission of the virus. In that study, researchers analyzed age-specific COVID-19 rates in approx. 60,000 contacts, including 10,600 household contacts, of almost 6000 patients with confirmed COVID-19 in South Korea during a 2-month period. Contacts were tested for SARS-CoV-2 if they were in a high-risk group or were symptomatic; other contacts self-quarantined and were observed for symptoms for 14 days. The results showed that 12% of household contacts and 2% of non-household contacts developed COVID-19. Furthermore, 19% of household contacts of the 124, 10-to-19-years-old COVID-19 index cases developed COVID-19 compared with only 5% who were in household contact with 1 of the 29 index cases who were aged ≤9 years. Of note, the detection rate among non-household contacts was lower than among household contacts in all age groups. The author comments that the study demonstrates the efficiency with which SARS-CoV-2 spreads within households and suggests a greater role for older versus younger children in the transmission of SARS-CoV-2.</p>	Younger children, although representing a small percentage of index cases, transmitted at a lower rate compared with older children. Therefore, the author suggests that children's ages be considered in planning school reopenings, perhaps bringing the youngest children back into the classroom first.	Lehman D. Household Transmission of SARS-CoV-2 in Korea: A Clue to the Role Children May Play. [published online, 2020 Aug 4] NEJM Journal Watch. https://www.jwatch.org/na52094/2020/08/04/household-transmission-sars-cov-2-korea-clue-role-children?query=C19&cid=DM96666_NEJM_Registered_Users_and_InActive&bid=239026225 .
Pregnancy, corticosteroids, oxygen support, ARDS, fetal lung maturity	4-Aug-20	Corticosteroids in the Management of Pregnant Patients With Coronavirus	Obstetrics & Gynecology	Current Commentary	<p>The authors summarize the current evidence supporting steroid therapy in the management of patients with acute respiratory distress syndrome (ARDS) and COVID-19 and to elaborate on key modifications for the pregnant patient. Until recently, corticosteroid administration in patients with COVID-19 was discouraged because of concerns about potentially delaying viral clearance. Yet, preliminary evidence from the RECOVERY</p>	This article provides guidance on steroid administration in pregnant patients with COVID-19 who are on oxygen support and at risk for preterm birth. The authors	Saad AF, Chappell L, Saade GR, Pacheco LD. Corticosteroids in the Management of Pregnant Patients With Coronavirus Disease (COVID-19) [published online ahead of print, 2020 Aug 4]. <i>Obstet Gynecol</i> .

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		Disease (COVID-19)			(Randomized Evaluation of COVID-19 Therapy) trial suggests that patients with COVID-19 who received dexamethasone had a significant reduction in 28-day mortality and that this benefit was greatest among patients receiving invasive mechanical ventilation, followed by patients receiving supplemental oxygen. However, an alternative approach for pregnant women is needed because exposure to repetitive courses of antenatal glucocorticoids has been associated with adverse neonatal outcomes. Therefore, the authors propose that when steroids are required for both fetal lung maturity and COVID-19, a four-dose course of dexamethasone over 2 days be used, followed by methylprednisolone to complete a 10-day course. Furthermore, if steroids are not indicated for fetal lung maturity or if the mother is breastfeeding, methylprednisolone can be used for the duration of the steroid course (10 days or up to discharge, whichever is sooner).	suggest using methylprednisolone because of its limited placental transfer and documented efficacy in cases of acute lung injury.	2020;10.1097/AOG.00000000000004103. doi:10.1097/AOG.00000000000004103
Children, adolescents, obesity, pediatrician	4-Aug-20	COVID-19 and obesity in childhood and adolescence: A clinical review	Jornal de Pediatria	Clinical Review	The authors of this review article sought to identify factors that contribute to increased susceptibility and severity of COVID-19 in obese children and adolescents, and its health consequences. Obesity is a highly prevalent comorbidity in severe cases of COVID-19 in children and adolescents; social isolation may lead to increased fat accumulation. Excessive adipose tissue, deficit in lean mass, insulin resistance, dyslipidemia, hypertension, high levels of proinflammatory cytokines, and low intake of essential nutrients are factors that compromise the functioning of organs and systems in obese individuals. These factors are associated with damage to immune, cardiovascular, respiratory, and urinary systems, along with modification of the intestinal microbiota (dysbiosis). In SARS-CoV-2 infection, these organic changes from obesity may increase the need for ventilatory assistance, risk of thrombo-embolism, reduced glomerular filtration rate, changes in the innate and adaptive immune response, and perpetuation of the chronic inflammatory response. The need for social isolation can aggravate obesity and its comorbidities. Facing children with suspected or confirmed COVID-19, health professionals should 1) diagnose excess weight; 2) advise on health care in times of isolation; 3) screen for comorbidities, ensuring that treatment is not interrupted; 4) measure levels of immunonutrients; 5) guide the family in understanding the specifics of the situation; and 6) refer to units qualified to care for obese children and adolescents when necessary.	Obesity is highly prevalent as a comorbidity in children and adolescents with severe cases of COVID-19. The social isolation that is needed in order to combat COVID-19 may lead to worsening obesity, and pediatricians should be vigilant with regard to these diagnoses.	Nogueira-de-Almeida CA, Ciampo LAD, Ferraz IS, Ciampo IRLD, Contini AA, Ued FDV. COVID-19 and obesity in childhood and adolescence: A clinical review [published online ahead of print, 2020 Aug 4]. J Pediatr (Rio J). 2020;S0021-7557(20)30191-1. doi:10.1016/j.jpmed.2020.07.001
Coronavirus, pediatric transplant, return	4-Aug-20	Return to School for Pediatric Solid Organ Transplant	The Journal of the Pediatric Infectious	Article	A team of pediatric infectious disease physicians was convened, consisting of specialists with diverse academic and clinical expertise, to address primary concerns and generate consensus statements pertaining to school re-entry specific to pediatric solid	Authors recognize that data on COVID-19 in pediatric solid organ transplant (SOT) recipients	Downes KJ, Danziger-Isakov LA, Cousino MK, et al. Return to School for Pediatric Solid Organ Transplant Recipients in the

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to school, school reopening		Recipients in the United States During the COVID-19 Pandemic: Expert Opinion on Key Considerations and Best Practices	Diseases Society		organ transplant (SOT) recipients in the United States. Additional specialists were invited to participate to ensure representation from and expertise in infection prevention and control, public health, and transplant psychology. Clinical questions were drafted based on the discussion of the most common issues faced by patients, families, primary and transplant providers, in relation to return-to-school decisions for pediatric SOT recipients. Questions were grouped according to 3 primary areas: 1) host-related risk factors, 2) community transmission and public health responses, and 3) school-related interventions. Only questions pertaining to school attendance in kindergarten through 12th grade in US schools were considered. The team created a framework from which providers and caregivers can identify the most important considerations for each pediatric SOT recipient to promote a safe return to school this fall.	are sparse and evidence about best practices to mitigate spread of COVID-19 continues to evolve. This document was developed to provide a constructive framework for how to think about risk, specifically for pediatric SOT recipients returning to school, and aid in the decision-making process.	United States During the COVID-19 Pandemic: Expert Opinion on Key Considerations and Best Practices [published online ahead of print, 2020 Aug 4]. J Pediatric Infect Dis Soc. 2020;piaa095. doi:10.1093/jpids/piaa095
Kawasaki disease, children	4-Aug-20	Kawasaki-like disease in children with COVID-19: A hypothesis [Free access to abstract only]	Medical Hypotheses	Original Article	With rapid spread of SARS-COV-2 globally, some new aspects of the disease have been reported. Recently, it has been reported the incidence of Kawasaki-like disease (KD) among children with COVID-19. Since, children had been known to be less severely affected by the virus in part due to the higher concentration of ACE-2 receptor, this presentation has emerged concerns regarding the infection of children with SARS-COV2. Affected children by COVID-19 with genetically susceptible to KD might have genetically under-expression of ACE2 receptor that might further decrease the expression of ACE2 due to the downregulation of the receptor by the virus in these patients. It appears that TNF- α might be the cause and the consequence of the ACE2 receptor downregulation which results in arterial walls aneurysm. The authors conclude that the genetically under-expression of ACE2 receptor in children with genetically susceptible to KD who are infected with SARS-CoV-2 possibly further downregulates the ACE2 expression by TNF- α and leads to surge of inflammation including TNF- α and progression to Kawasaki-like disease.	In children, there have been incidences of Kawasaki-like disease (KD) present with COVID-19. This is thought to be because of the downregulation of the ACE2 receptor due to COVID-19.	Amirfakhryan H. Kawasaki-like disease in children with COVID-19: A hypothesis. Med Hypotheses. 2020;143:110117. doi:10.1016/j.mehy.2020.110117
Pregnancy, pre-term birth, Netherlands	4-Aug-20	Impact of COVID-19 mitigation measures on the incidence of preterm birth: a national quasi-experimental study	medRxiv	Preprint (not peer-reviewed)	This study used a national quasi-experimental difference-in-regression-discontinuity approach to evaluate the impact of the COVID-19 mitigation measures implemented in the Netherlands in a stepwise fashion on March 9, 15, and 23, 2020, on the incidence of pre-term birth. Data were used from October 2010-July 2020. Data on 1,599,549 singleton newborns were available, including 56,720 post-implementation births. Consistent reductions in pre-term birth were seen across various time windows surrounding implementation of the March 9 COVID-19 mitigation measures. Decreases observed following the March 15 measures were of smaller magnitude and not statistically	This study assessing the impact of COVID-19 mitigation measures on pre-term birth incidence found a significant decrease in pre-term birth in the 4 months following measure implementation. The authors advocate for comparable data in other countries to be used to	Been JV, Ochoa LB, Bertens LCM, et al. Impact of COVID-19 mitigation measures on the incidence of preterm birth: a national quasi-experimental study [published online 2020 Aug 4]. medRxiv. 2020. doi:2020.08.01.20160077

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					significant. No changes were observed after March 23. Pre-term birth reductions after March 9 were consistent across gestational age strata. They appeared confined to high-socioeconomic status neighborhoods, but effect modification was not statistically significant. Initial implementation of COVID-19 mitigation measures was associated with a 15-23% drop in preterm births in the following months, in agreement with preliminary observations in other countries.	further substantiate the findings and begin exploring underlying mechanisms.	
Sensory issues, pediatrics	4-Aug-20	An overview of smell and taste problems in pediatric COVID-19 patients [Free access to abstract only]	Acta Paediatrica	Clinical Overview	At the start of the COVID-19 pandemic in March 2020, fever and respiratory symptoms were the indications for virus testing. As data have continued to accumulate worldwide, gastrointestinal, neurological, cardiovascular, cutaneous and ocular symptoms have been reported for confirmed COVID-19 cases. There have been few case reports on problems with taste and smell in pediatric COVID-19. However, new symptoms can provide diagnostic and testing criteria for patients with no other clinical presentation, especially in older children.	This paper looks at the taste and smell problems reported in pediatric patients.	Erdede O, Sari E, Uygur Külcü N., et al. An overview of smell and taste problems in paediatric COVID-19 patients. Acta Paediatr. 2020. doi:10.1111/apa.15515
Pediatric, MIS-C, Kawasaki disease, echocardiogram	4-Aug-20	Multisystem inflammatory syndrome in children (MIS-C) temporally associated with SARS-CoV-2 infection: a scoping review of the literature	medRxiv	Preprint (not peer-reviewed)	During the COVID-19 pandemic, a new severe life-threatening inflammatory syndrome, termed MIS-C, was reported in some pediatric populations. This scoping review summarizes existing reports on MIS-C, which were identified by a systemic search of two electronic databases. The authors found 42 original studies reporting 674 pediatric patients with MIS-C. The most common symptoms were fever (98%) and gastrointestinal symptoms (83%). Interleukin-6 (IL-6) levels were elevated in 94% of patients (n=117/125). Echocardiography detected coronary artery lesions in 100 patients. The authors discuss the percentage of patients treated with heparin, intravenous immunoglobulin, corticosteroids, aspirin, and biologic therapy. Admission to the ICU was high in this population (n=478, 71%). Nine fatalities due to MIS-C were reported. The authors conclude that MIS-C bears pathophysiological resemblance to Kawasaki disease but with some key differences. Understanding the differences between these two conditions will aid in the management of MIS-C cases.	The authors summarize the findings of 42 studies reporting 674 pediatric patients with MIS-C including clinical symptoms, laboratory markers, imaging, and treatment. They emphasize differences between MIS-C and Kawasaki disease.	Sabbour MA, El-Swaify ST, Farrag N et al. Multisystem inflammatory syndrome in children (MIS-C) temporally associated with SARS-CoV-2 infection: a scoping review of the literature. [published online, 2020 Aug 4]. medRxiv. doi:https://doi.org/10.1101/2020.08.03.20167361
Pregnancy, maternal health, mental health, depression, anxiety, UK	4-Aug-20	The impact of the COVID-19 lockdown on maternal mental health and coping in the UK: Data from the COVID-19 New Mum Study	medRxiv	Preprint (not peer-reviewed)	This analysis aimed to assess how mothers are feeling and coping during lockdown due to the COVID-19 pandemic. The authors administered an anonymous online survey starting on 27 May 2020 to 1329 women living in the UK aged ≥18 years with an infant ≤12 months of age. The majority of participants reported feeling down (56%), lonely (59%), irritable (62%), and worried (71%) to some or high extent since lockdown began. Despite this, 70% of respondents felt capable of coping with the situation. Support for her own health, contacting infant support groups, and higher infant gestational age predicted better maternal mental health. Traveling for work, lockdown having a major	In a survey of 1329 expectant or new mothers in the UK, the authors found a high percentage of respondents experienced poor mental health during the COVID-19 related lockdown.	Dib S, Rougeaux E, Vazquez-Vazquez A et al. The impact of the COVID-19 lockdown on maternal mental health and coping in the UK: Data from the COVID-19 New Mum Study. [published online, 2020 Aug 4]. medRxiv. doi:https://doi.org/10.1101/2020.08.04.20168039

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					impact on the ability to afford food and having an income lower than 30,000 GBP predicted poorer mental health. The authors found that during lockdown, a large proportion of new mothers experienced symptoms of poor mental health. These findings highlight the urgent need to assess maternal mental health, and to identify prevention strategies for mothers during different stages of lockdown.		
India, children, cardiovascular	3-Aug-20	The 3C's: COVID-19, Children, and Cardiac Surgery – Do we know enough?	Brazilian Journal of Cardiovascular Surgery	Letter to the Editor	In this letter, the author aims to summarize the current understanding of the effects and implications of COVID-19. The author gives a brief overview of MERS-CoV and SARS-CoV and highlights the similarities and differences between the three outbreaks. The author also assesses the disease presentation in children, stating that the disease is generally less severe among the pediatric population, and explains the different hypothesis for such observation. Additionally, the author emphasizes the important interplay between COVID-19 and the cardiovascular system, stressing that routine cardiac operations could become lethal after diagnosis with COVID-19. Finally, the author closes the letter with a brief discussion on the status of a vaccine for COVID-19, saying that while there are some drugs in trial, there has yet to be a definitive and clear management.	In this letter, the author overviews the current knowledge of COVID-19, highlighting similarities between MERS-CoV and SARS-CoV, as well as discussing disease patterns in adults and children.	Khanna, Sudhansoo. (2020). The 3C's: COVID-19, Children, and Cardiac Surgery - Do we know enough?. Brazilian Journal of Cardiovascular Surgery, Epub August 03, 2020. https://doi.org/10.21470/1678-9741-2020-0255
Histopathology, placenta, pregnancy	3-Aug-20	Detection of severe acute respiratory syndrome coronavirus 2 in placentas with pathology and vertical transmission	American Journal of Obstetrics and Gynecology MFM	Research Letter	The authors conducted a case series study using 364 placental samples (74 positive and 290 negative for SARS-CoV-2) submitted for routine pathology examination. There were no histopathological features of the placenta specific to maternal SARS-CoV-2 infection. 2/53 placentas from COVID-19 positive mothers tested positive via the in-situ hybridization method. One of them was delivered by C-section at 35.6 weeks, and the newborn tested positive at 24h, 48h and 7 days of life. The other positive placenta was from a pregnancy delivered at 40 weeks' gestation to a mother with no significant clinical or pathologic features. The neonate tested positive within the first 24 hours. Thus, the authors determined that SARS-CoV-2 viral particles are uncommon in placentas from infected mothers. The authors also suggested the possibility of vertical transmission in-utero through fetoplacental circulation due to the presence of SARS-CoV-2 in the placenta. Localization of SARS-CoV-2 within tissues can be greatly beneficial in providing information to enhance understanding of viral pathogenesis.	In this letter, the authors describe a case series study conducted for placental samples for SARS-CoV-2 positive and negative women. They determined that viral particles are uncommon in placenta of women who tested positive for the infection. The authors also suggested in-utero vertical transmission of SARS-CoV-2 due to the presence of viral particles in the placenta.	Zhang P, Salafia C, Heyman T, et al. Detection of severe acute respiratory syndrome coronavirus 2 in placentas with pathology and vertical transmission. American Journal of Obstetrics & Gynecology MFM, 2020, 100197, ISSN 2589-9333, https://doi.org/10.1016/j.ajogmf.2020.100197 .
Epidemiology, children, school closures, transmission	3-Aug-20	COVID-19 pandemic: a different behavior in children	Boletín Médico del Hospital Infantil de México	Editorial	Since the beginning of the COVID-19 pandemic, children (particularly those <15 years of age) have been less affected than adults in both severity and frequency. SARS-CoV-2 uses ACE2 as a receptor for cell entry and studies in children have found lower expression of ACE2 in the nasal epithelium and lungs compared to adults, which may contribute to the differences observed in	This editorial details the clinical and epidemiological differences of SARS-CoV-2 in the pediatric population, providing evidence from	Muñoz-Hernández O, Solórzano-Santos F. COVID-19 pandemic: a different behavior in children. Bol Med Hosp Infant Mex. 2020;77(5):219-220. English. doi:

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					the pathogenesis of the disease. The authors also cite evidence that most pediatric cases occur through intra-family contacts and reports of child-to-child and child-to-adult transmission are rare. However, the question remains as to whether these data are influenced by social isolation restricting children's contact to their immediate household. If school-aged children are indeed low transmitters of the virus, the authors suggest the re-opening of schools, especially primary schools, may be warranted to lessen the social and psychological impact of the COVID-19 pandemic on children. Given the lower frequency of moderate-to-severe infections in children, no controlled clinical studies exist to test the efficacy of treatments for COVID-19. Biological and immune response differences between children and adults should be identified to define the most appropriate treatments for each age group and to determine the action to prevent infections.	multiple countries of lower frequency of infection, less severe illness, lower mortality, and a low capacity to transmit the virus compared to adults.	10.24875/BMHIM.20000168. PMID: 33064675.
University, simulation, outbreak, prevention	3-Aug-20	Simulating COVID-19 in a university environment	Mathematical Biosciences	Original Research Article	Residential colleges and universities face unique challenges in providing in-person instruction during the COVID-19 pandemic. Administrators are currently faced with decisions about whether to open these structures during the pandemic and what modifications of their normal operations might be necessary to protect students, faculty, and staff. There is little information, however on what measures are likely to be most effective and whether existing interventions could contain the spread of an outbreak on campus. The authors developed a full-scale stochastic agent-based model to determine whether in-person instruction could safely continue during the pandemic and also evaluated the necessity of various interventions. Their results showed that large-scale randomized testing, contact-tracing, and quarantining are important components of a successful strategy for containing campus outbreaks. High test specificity is critical for keeping the size of the quarantine population manageable. Moving the largest classes online is also crucial for controlling both the size of outbreaks and the number of students in quarantine. Increased residential exposure can significantly impact the size of an outbreak, but it is likely more important to control non-residential social exposure among students. Finally, necessarily high quarantine rates, even in controlled outbreaks, imply significant absenteeism, indicating a need to plan for remote instruction of quarantine students.	The authors simulated a university environment during the COVID-19 pandemic and provided recommendations on how to ensure the safety of everyone within the university environment. Large-scale randomized testing, high test specificity, contact-tracing, and quarantining are important aspects of disease control on university campuses.	Gressman P, Peck J. Simulating COVID-19 in a university environment. <i>Math Biosci.</i> 2020;328:108436. doi:10.1016/j.mbs.2020.108436
School reopening, social restrictions, second wave, children	3-Aug-20	Determining the optimal strategy for reopening schools, the impact of test and trace	The Lancet Child & Adolescent Health	Original Research	This modeling study simulates 6 scenarios representing 2 school reopening strategies (full time and a part-time rotation system with 50% of students attending school on alternate weeks) and 3 SARS-CoV testing scenarios (68% contact tracing with no scale-up in testing, 68% contact tracing with sufficient testing to avoid a 2 nd COVID-19 wave, and 40% contact tracing with sufficient	This study estimates a 2 nd COVID-19 wave of 2.0-2.3 times the original wave's R-value if schools open without a testing ramp-up or widescale	Panovska-Griffiths J, Kerr CC, Stuart RM, et al. Determining the optimal strategy for reopening schools, the impact of test and trace interventions, and the risk of occurrence of a second COVID-

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		interventions, and the risk of occurrence of a second COVID-19 epidemic wave in the UK: a modeling study			testing to avoid a 2 nd COVID-19 wave) in the UK. The authors found that schools could safely reopen full or part-time with an effective contact tracing level of 40% or greater and with testing that increased appropriately. Without an increase in testing and effective contact tracing, reopening of schools would result in a 2 nd UK wave peaking in December 2020 if full-time or in February 2021 if part-time rotations were used. The 2 nd wave of infections would be 2.0-2.3 times the R-value of the original COVID-19 wave. The authors recommend that any relaxation of physical distancing, including reopening of schools, be accompanied by large-scale, population-wide testing and effective contact tracing.	contact tracing. The authors suggest that school reopenings be accompanied by population-wide testing and effective contact tracing.	19 epidemic wave in the UK: a modeling study. The Lancet Child Health. 2020; doi: 10.1016/S2352-4642(20)30250-9.
Breastfeeding, LMICs, child mortality, global health	3-Aug-20	Impact of COVID-19 on maternal and child health	The Lancet Global Health	Correspondence	The authors outline the potential negative social, economic, corporate, and health-system forces affecting a mother's decision to breastfeed that should be considered during the COVID-19 pandemic. These include limitations in the availability of skilled health workers and increased reluctance by women to use the health system, increased childcare demands during lockdown, and a threat to the societal enabling environment by formula manufacturers and fears of contagion. The authors estimated, using the Alive & Thrive cost of not breastfeeding tool, that a hypothetical effect of small (5%), moderate (10%), medium (25%), or severe (50%) relative reductions in the prevalence of breastfeeding due to COVID-19 disruptions would result in 16,469 (small reduction), 32,139 (moderate reduction), 75,455 (medium reduction), and up to 138,398 (severe reduction) child deaths across 129 LMICs over a 1-year period. This analysis supports the call for continued support from governments to promote and protect breastfeeding.	The authors calculated the effect of relative reductions in the prevalence of breastfeeding due to COVID-19 disruptions on child deaths across 129 LMIC. This analysis is a call to action for ongoing support from governments to support breastfeeding practices.	Busch-Hallen J, Walters D, Rowe S, et al. Impact of COVID-19 on maternal and child health [published online 2020 Aug 3]. The Lancet Global Health. 2020; doi.org/10.1016/S2214-109X(20)30327-2
Neonate, care approaches, vertical transmission, mother-to-infant transmission, maternal health	3-Aug-20	Novel Corona Virus Pandemic and Neonatal Care: It's Too Early to Speculate on Impact!	SN Comprehensive Clinical Medicine	Review	The authors performed a review to describe approaches to neonatal care during the COVID-19 pandemic. They explored care approaches in SARS-CoV-2 positive pregnant women, disease presentation in neonates, and management of infection in neonates. In particular, they discuss risks of severe disease, pre-term deliveries, and impacts on fetal development in pregnant women with COVID-19. Further, they outline risks of perinatal spread from symptomatic mothers and post-natal transmission from parents and caregivers to neonates. The authors note that proper IPC measures should be considered such as PPE, reduced skin-to-skin contact among infected mothers, and social distancing in obstetric and neonate wards. The authors suggest symptomatic mothers to provide formula and expressing and discarding the milk; If mother is asymptomatic, they advise her to breast feed directly wearing a	The authors describe key elements in approaches to neonatal care including transmission risks and risks of symptomatic mothers during the COVID-19 pandemic. Care protocols should be modified by collaborative efforts to accommodate new knowledge of COVID-19. The authors provide detailed descriptions on when to use formula, discard breastmilk and	Kalyanasundaram S, Krishnamurthy K, Sridhar A et al. Novel Corona Virus Pandemic and Neonatal Care: It's Too Early to Speculate on Impact!. [published online, 2020 Aug 3]. SN Compr Clin Med. 2020;1-7. doi:10.1007/s42399-020-00440-8

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					mask or express breast milk wearing a mask and an unaffected relative/carer could feed the baby. The authors conclude by suggesting local teams collaborate to ensure that neonatal care protocols are appropriately modified to accommodate the evolving knowledge and literature on the COVID-19 pandemic.	when breastfeeding is advised.	
Preterm neonate; pneumonia; vertical transmission; length of stay	3-Aug-20	Neonatal COVID-19 Pneumonia: Report of the First Case in a Preterm Neonate in Mayotte, an Overseas Department of France	Multidisciplinary Digital Publishing Institute	Case Report	The authors report the first case of COVID-19 pneumonia in a preterm neonate born in Mayotte, France, in which vertical transmission is suspected. After admission to the delivery emergencies unit for active labor at 33 weeks of gestation, a 36-year-old multiparous woman tested positive for COVID-19. Following immediate transfer to the neonatal ICU where he was in a closed incubator, the newborn tested positive for COVID-19 at 24 hours of life. The authors presume that preterm labor is linked to the mother's COVID-19 infection and that the mode of transmission in this case is most likely to be vertical given the short time it took for the neonate to become COVID-19 positive after delivery and the absence of contact with the mother after delivery as she was symptomatic. Breastfeeding was excluded as the route of transmission as the infant was exclusively formula fed. By 14 days of life, the infant developed a fever with progressive signs of increased breathing difficulties. A thoracic computed tomography scan revealed bilateral ground glass opacities and consolidations, and echocardiography showed a mild pericardial effusion (3 mm). This case emphasizes the need for a cautious and close follow-up period for asymptomatic neonates born to mothers with COVID-19 infection as worsening respiratory symptoms may appear secondarily	Premature infants born to mothers with a COVID-19 infection may also have a COVID-19 infection, presumably via vertical transmission. This case report emphasizes the need for a cautious and close follow-up period for asymptomatic neonates born to mothers with COVID-19 infection.	Abasse S, Essabar L, Costin T, et al. Neonatal COVID-19 Pneumonia: Report of the First Case in a Preterm Neonate in Mayotte, an Overseas Department of France. <i>Children (Basel)</i> . 2020;7(8):E87. Published 2020 Aug 3. doi:10.3390/children7080087
Bereavement care, maternity care, pregnancy after loss, stillbirth. Australia, Ireland, USA	3-Aug-20	Pregnancy after loss during the COVID19 pandemic	Women Birth	Discussions	During the pandemic, maternity care provisions have been challenged attempting to balance the needs and safety of pregnant women and their care providers. Women experiencing a pregnancy after loss (PAL) during these times face particularly difficult circumstances. The authors highlight the situation in 3 high-income countries (Australia, Ireland and USA) and point to the need to remember the unique and challenging circumstances of these PAL families. The authors argue that new practices may be deviating from established evidence-based guidelines, and the potential ramifications of these changes are also outlined. Recommendations for health care providers are suggested to bridge the gap between the necessary safety requirements due to the pandemic, the role of the health care provider, and the needs of families experiencing PAL. Changes to practices i.e. limiting the number of antenatal appointments and access to a support person may have detrimental effects on both mother, baby, and their family. However, new guidelines in maternity care practices developed to account for the pandemic have not	Regardless the COVID-19 pandemic, consideration needs to be given to the unique circumstances of women and their families experiencing a PAL. Recommendations to consider when caring for these families are discussed.	Pollock D, Murphy M, O'Leary J, Warland J. Pregnancy after loss during the COVID19 pandemic [published online, 2020 Aug 3]. <i>Women Birth</i> . 2020;S1871-5192(20)30300-0. doi:10.1016/j.wombi.2020.07.011

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					necessarily considered women experiencing PAL. Bereaved mothers and their families experiencing a PAL should continue to be supported during the pandemic to limit unintended consequences.		
Thromboembolism, pregnancy, vascular complications, LMWH, anticoagulation	3-Aug-20	COVID-19, neutrophil extracellular traps and vascular complications in obstetric practice [Free Access to Abstract only]	Journal of Perinatal Medicine	Review Article	The authors summarize some of the key features regarding SARS-CoV-2 and the pathogenesis of vascular complications, with an emphasis on pregnant women. They describe the main mechanisms of vascular damage, including direct damage by the virus to endothelial cells, massive activation of neutrophils during a cytokine storm, massive release of NETs (intracellular material that neutrophils organize in the cytoplasm and release to destroy microbes), and uncontrolled development of thrombo-inflammation. In addition, they highlight that women with obstetric history of thrombophilia and COVID-19 have higher risk of obstetric and vascular complications. Pregnancy with COVID-19 is associated with higher rates of miscarriage, preterm birth, pre-eclampsia, C-section, and perinatal death. Changes in the hemostatic system during pregnancy may be aggravated by an inflammatory reaction to COVID-19, contributing to the development of venous thrombo-embolic complications. The authors conclude that pregnant women admitted with confirmed or suspected COVID-19 should receive prophylactic Low Molecular Weight Heparin (LMWH), unless birth is expected within 12 hours.	The combination of COVID-19 infection and the prothrombotic state of pregnancy could lead to the development of thrombo-embolic complications (VTE), especially in women with thrombophilia. The authors conclude that low molecular weight heparin should be considered for VTE prophylaxis unless birth is expected within 12 hours.	Makatsariya A, Slukhanchuk E, Bitsadze V, et al. COVID-19, neutrophil extracellular traps and vascular complications in obstetric practice [published 2020 Aug 3]. J Perinat Med. 2020; doi:10.1515/jpm-2020-0280
Neonatal, international collaboration, registry	3-Aug-20	Neonates in the COVID-19 pandemic	Pediatrics Research	Commentary	While the COVID-19 pandemic has predominantly affected adults sparing infants and neonates from severe infection, the long-term effects and sequelae of perinatal SARS-CoV-2 exposure are unknown. Even though studies have identified viral RNA in placental membranes and breast milk, definitive vertical transmission remains ambiguous. Breast milk of mothers who contracted COVID-19 may also provide antibodies against SARS-CoV-2 in the perinatal period. The authors note that this rapidly evolving situation has led to a wide variation in the recommendations for the medical and social management of infants born to SARS-CoV-2 positive mothers. During this time, NICUs have faced additional obstacles, such as decreased financial, spatial, and medical resources. However, the challenges of the pandemic have led to international collaboration between neonatal providers and researchers, in the form of large registry studies and multi-center clinical trials. The authors propose using this as an opportunity to develop and maintain an international neonatal collaborative working group, which already includes over 90 countries, to further address neonatal disaster preparedness.	The authors provide commentary about the impact of the COVID-19 pandemic on neonatal care and call for increased global collaboration within this unprecedented situation. This collaboration will build an evidence-based neonatal disaster response system and develop a comprehensive neonatal registry database.	Molloy EJ, Lavizzari A, Klingenberg C, et al. Neonates in the COVID-19 pandemic [published online ahead of print, 2020 Aug 3]. Pediatr Res. 2020;10.1038/s41390-020-1096-y. doi:10.1038/s41390-020-1096-y

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Reproductive medicine, cryopreservation, pregnancy, ART	3-Aug-20	Cryopreservation in reproductive medicine during the COVID-19 pandemic: rethinking policies and European safety regulations	Human Reproduction	Opinion	Cryopreservation of reproductive cells and tissues is an essential aspect of assisted reproductive technology (ART) practices that might be particularly strategic during the COVID-19 pandemic; however, recommendations on how and when to preserve reproductive tissues and cells during a severe pandemic are limited. The authors used a SWOT (strengths, weaknesses, opportunities and threats) analysis to identify favorable and unfavorable factors as well as to recognize challenges related to the use of cryopreservation procedures during the current pandemic. One strength associated with the cryopreservation is the availability of robust European guidelines on storage safety to prevent sample contamination by pathogens. Weaknesses include limited data on asymptomatic COVID-19 patients, suboptimal accuracy of COVID-19 diagnostic tests, and uncertainty regarding the duration of the pandemic. Use of cryopreservation is an opportunity to postpone pregnancy to avoid COVID-19 during gestation while also counteracting the possible detrimental effect of time.	The authors discuss cryopreservation as a part of assisted reproductive technology practices during the COVID-19 pandemic through a SWOT (strengths, weaknesses, opportunities and threats) analysis.	Alteri A, Pisaturo V, Somigliana E, Vignani P. Cryopreservation in reproductive medicine during the COVID-19 pandemic: rethinking policies and European safety regulations [published online, 2020 Aug 3]. Hum Reprod. doi:10.1093/humrep/deaa210
Pediatric, dental, prevention	3-Aug-20	COVID-19, rules of conduct for dental care in children during pandemic	Edizioni Minerva Medica	Letter to the Editor	Dental care settings carry the risk of COVID-19 transmission due to the specificity of its procedures involving face-to-face communication with patients and frequent exposure to saliva, blood, and other body fluids. Consequently, authors in this letter urge dental health professionals to treat pedodontics patients with the utmost caution and adopt rules of conduct to avoid contagion, including a telephone triage to verify absence of COVID-19 symptoms, restrictions for those having traveled to areas of contagion, a second triage in office, and limited personnel in the operating area. Since the transmission of aerosolized droplets is considered the main route of diffusion, authors recommend the additional adoption of barrier protection equipment, enhanced professional protection, rinsing the patient's mouth with a solution sufficient to reduce bacterial/viral load (1% hydrogen peroxide or 0.2-0.3% chlorhexidine), and the use of rubber dam and double suction to minimize aerosol spread.	Pending further investigations into the susceptibility of children to the COVID-19 viral infection, authors recommend applying the prevention and hygiene measures advised by health authorities to all dental patients, including children.	Ludovichetti FS, Signoriello AG, Stellini E, Mazzoleni S. COVID-19, rules of conduct for dental care in children during pandemic [published online ahead of print, 2020 Aug 3]. Minerva Stomatol.
Pregnancy, postpartum, public health, HIV, PrEP, South Africa	3-Aug-20	PrEP retention and prescriptions for pregnant women during COVID-19 lockdown in South Africa	The Lancet	Correspondence	In sub-Saharan Africa, HIV risk is high during pregnancy and breastfeeding and could increase during the COVID-19 pandemic because of reduced access to HIV prevention and treatment services. Pre-exposure prophylaxis (PrEP) is an essential and effective prevention intervention during pregnancy and the post-partum period. The authors evaluated the effect of the national COVID-19 lockdown in South Africa on study visits and PrEP prescriptions among pregnant women in antenatal care. From August 2019 to June 2020, 455 HIV negative pregnant women (aged > 16 years old) were enrolled. During the nationwide	In a study of HIV negative pregnant and post-partum women in South Africa, missed appointments for pre-exposure prophylaxis (PrEP) increased during a nationwide lockdown due to the COVID-19 pandemic. Participants cited fear of COVID-19 and	Davey DLJ, Bekker LG, Mashele N et al. PrEP retention and prescriptions for pregnant women during COVID-19 lockdown in South Africa. [published online, 2020 Aug 3]. The Lancet. doi:https://doi.org/10.1016/S2352-3018(20)30226-5

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					lockdown, missed PrEP visits increased significantly to 63% at the 1-month visit and to 55% at the 3-month visit. The relative risk of missing a study visit increased during lockdown compared with before lockdown (odds ratio: 2.36, 95% CI: 1.73–3.16). The authors conclude that these data indicate the profound effect that the South African response to the COVID-19 pandemic might have on HIV prevention efforts.	contact with the health facility as common barriers.	
Children, school, early childhood education, Australia	3-Aug-20	Transmission of SARS-CoV-2 in Australian educational settings: a prospective cohort study	The Lancet	Original article	In Australia, most schools remained open during the first epidemic wave of COVID-19. The authors examined SARS-CoV-2 transmission among children and staff in schools and early childhood education and care (ECEC) settings in the Australian state of New South Wales (NSW) from 25 January- 10 April 2020. During this time, 15 schools and ten ECEC settings had children (n=12) or adults (n=15) attend while infectious, requiring monitoring of 1448 contacts. Of the contacts, 633 (43.7%) were tested with identification of 18 secondary cases (attack rate of 1.2%). Five secondary cases were identified (attack rate of 0.5%; 5/914) in three schools. No secondary transmission occurred in nine of ten ECEC settings among 497 contacts; however, one outbreak in an ECEC setting involved transmission to six adults and seven children (attack rate 35.1%; 13/37). The authors conclude that with effective case-contact testing, epidemic management strategies, and small numbers of attendances while infected, children and teachers did not contribute significantly to COVID-19 transmission via attendance in educational settings.	The authors sought to track SARS-CoV-2 transmission within schools in an Australian state. They identified a secondary attack rate of 1.2% among 1448 contacts of infected cases. The secondary attack rate in an educational setting was 0.5%.	Macartney K, Quinn H, Pillsbury A et al. Transmission of SARS-CoV-2 in Australian educational settings: a prospective cohort study. [published online, 2020 Aug 3]. doi:https://doi.org/10.1016/S2352-4642(20)30251-0
Pregnancy, clinical characteristics, China	3-Aug-20	Clinical features and outcomes of pregnant women with COVID-19: a systematic review and meta-analysis	BMC Infectious Diseases	Research article	This systematic review evaluated the clinical features and outcomes of pregnant women with COVID-19. 14 studies representing 236 pregnant women with COVID-19 were included. The following characteristics and outcomes were found among the indicated percentage of these pregnant women: positive CT findings for COVID-19 (71%), C-section (65%), fever (51%), lymphopenia (49%), co-existing disorders (33%), cough (31%), fetal distress (29%), pre-term labor (23%), and severe case or death (12%). The subgroup analysis showed that compared with non-pregnant patients, pregnant women with COVID-19 had significantly lower incidences of fever (pregnant women, 51%; non-pregnant patients, 91%; P < 0.00001) and cough (pregnant women, 31%; non-pregnant patients, 67%; P < 0.0001). The incidences of fever, cough and positive CT findings in pregnant women with COVID-19 are less than those in the non-pregnant population with COVID-19. The rate of pre-term labor is higher among pregnant with COVID-19 than those without.	This review adds to the body of literature summarizing the clinical characteristics and outcomes for pregnant women with COVID-19 infection, finding among pregnant patients with COVID-19 a decreased incidence of fever, cough and positive CT findings compared to non-pregnant patients with COVID-19, and a higher rate of preterm labor than in pregnant women without COVID-19.	Gao YJ, Ye L, Zhang JS, et al. Clinical features and outcomes of pregnant women with COVID-19: a systematic review and meta-analysis [published online 2020 Aug 3]. BMC Infect Dis. 2020;20(1):564. doi:10.1186/s12879-020-05274-2
Transmission, children	3-Aug-20	The Role of Children in the Dynamics of	The Pediatric Infectious	Brief Report	This article examined the dynamics of COVID-19 transmission within families and what role children played. Data from pediatric patients in China showed that about 1.7% of COVID-19 cases	While there are lower numbers of cases of COVID-19 in children, the	Somekh E, Gleyzer A, Heller E., et al., The Role of Children in the Dynamics of Intra Family

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		Intra Family Coronavirus 2019 Spread in Densely Populated Area	Disease Journal		occurred in patients <18 years old, and common symptoms included fever, cough, and some shortness of breath. Because some other countries that are less crowded and have lower number of children in their households, data from countries like China are not necessarily relevant to other countries. Therefore, researchers examined the role of children in the city of Bnei Brak, Israel, one of the most crowded cities in the world and with the highest rates of children per family in Israel. Probably the best way to determine the role of children in the dynamics of COVID-19 transmission is to follow the epidemiology infection in a family set up and determine the source of transmission and the introduction of the virus into the family. Their results demonstrated significantly lower rates of COVID-19 positivity in children compared with adults residing in the same household. Children of 5-17 years of age were 61% and children of 0-4 years of age were 47% less likely to have positive PCR results compared with adults residing in the same household.	transmission of the virus is still unclear. Determination of the role of children in the transmission of COVID-19 is a critical matter in the plans on how to slow the pandemic. The authors advocate to practice extreme caution and maintain close monitoring of COVID-19 spread when it comes to reopening schools.	Coronavirus 2019 Spread in Densely Populated Area. Pediatric Infectious Disease Journal. 2020;39(8):e202-e204. doi:10.1097/inf.0000000000002783
Emergency Department, Spain	3-Aug-20	Analysis of clinical characteristics and outcomes in patients with COVID-19 based on a series of 1000 patients treated in Spanish emergency departments	Emergencias	Observational Research	This article aimed to describe the clinical characteristics of patients with COVID-19 treated in hospital emergency departments (ED) in Spain, and to assess association between characteristics and outcomes. The researchers conducted a prospective, multicenter, nested-cohort study. The mean (SD) age of patients was 62 (18) years old. Most had high- or low-grade fever, dry cough, dyspnea, and diarrhea. The most common concomitant conditions were cardiovascular diseases, followed by respiratory diseases and cancer. This profile of the clinical characteristics and comorbidity of patients with COVID-19 treated in ED helps to predict outcomes and identify cases at risk of exacerbation.	The authors describe a profile of clinical characteristics and comorbidity of COVID-19 patients treated in Eds, enabling topredict outcomes and identify cases at risk of exacerbation.	Gil-Rodrigo A, Miró Ò, Piñera P, et al. Analysis of clinical characteristics and outcomes in patients with COVID-19 based on a series of 1000 patients treated in Spanish emergency departments. Emergencias. 2020;32(4):233-241.
Children, adolescents, fatality rate, Italy	3-Aug-20	After the First Wave of COVID-19: Reflections From Italy	The Pediatric Infectious Disease Journal	Report	COVID-19 was first described in China in December 2019 and declared a pandemic by the WHO in March 2020. Italy was the first European country to be severely affected. By May 20, more than 227,000 confirmed SARS-CoV-2 infections were registered, and more than 31,000 people had died, a much higher case-fatality rate (13.6%) than reported for China (2%–3%). There was also a concern of a more severe COVID-19 burden in Italian children, as compared with China where children (<18 years) accounted for only 2.4% of confirmed infections, most of them asymptomatic or with mild disease, and fatalities in children were only anecdotally reported. In Italy, there are an estimated 1 million children with comorbidities and each year about 11,000 children and adolescents (0–19 years) progress to terminal illness (Italian Society of Pediatrics). The role of children in the spread of the pandemic remains unclear. In general, they tend to be less symptomatic despite having a similar viral load in upper	The authors state that while severe disease, sequelae and death directly due to COVID may be rare in children, the secondary or indirect consequences could be far-reaching and more important. It is imperative to contain the virus and ensure proper practices to prevent further spread.	Galli L, Chiappini E, Schumacher R. After the First Wave of COVID-19: Reflections From Italy. Pediatric Infectious Disease Journal. 2020;39(8):e192-e194. doi:10.1097/inf.0000000000002806

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					respiratory tract specimens as adults and shedding virus for up to 21 days. COVID-19 is a novel disease, and robust data on short- and long-term courses and outcomes are still lacking. Thus, a high level of suspicion for yet undescribed but important complications is warranted. The authors state that possibility of mother-to-child transmission through delivery or breastfeeding has not yet been clearly established.		
Children, school reopening, transmission, contact tracing	3-Aug-20	Finding a path to reopen schools during the COVID-19 pandemic	The Lancet	Comment	UNESCO estimated that more than 60% of the world's students have had their education disrupted by national school closures during the COVID-19 pandemic. The lack of severe disease in children with COVID-19 changes the benefit-to-cost ratio associated with closing schools. If infected, most children will only get very mild disease but at the cost of all children suffering as a consequence of school closure. The author describes recent evidence on COVID-19 attack rates in educational settings, and he notes the potential importance of the difference in infection rates in secondary versus primary schools. There must be an age when children start to become as infectious as older individuals; current data suggest that this might occur during adolescence, which could have major implications for schools, colleges, and universities. The author next discusses the potential effects of reopening schools as well as the crucial role of adequate contact tracing and testing. He acknowledges that many questions remain unanswered and puts forth a call to action for large-scale research programs to carefully monitor the impact of schools reopening.	The author argues that solutions that allow children and young adults to return to full-time education as safely and as quickly as possible must be found. He describes the current data on COVID-19 attack rates in schools as well as the potential impact of schools reopening on the pandemic.	Edmunds WJ. Finding a path to reopen schools during the COVID-19 pandemic. [published online, 2020 Aug 3]. The Lancet. doi:https://doi.org/10.1016/S2352-4642(20)30249-2
Children, maltreatment, USA	3-Aug-20	Child Maltreatment Prevention in the Era of Coronavirus Disease 2019	JAMA Pediatrics	Editorial	The author expresses concern that the family and community disruption caused by COVID-19 may result in an increase in violence toward vulnerable children and/or parents. Being able to reliably separate children who are at risk of maltreatment from those who are not remains frustratingly elusive. The author describes the potential benefits and risks to use of predictive risk modeling in attempting to identify at-risk children, with a key risk being the incorporation of implicit biases and structural racism and classism into the algorithms. The author recommends the addition of a prevention mindset and public health approach to child maltreatment prevention, incorporating community-based strategies.	The author raises concern about a possible increase in child maltreatment due to the COVID-19 pandemic and advocates for a public health approach using community-based strategies to mitigate against this.	Greeley CS. Child Maltreatment Prevention in the Era of Coronavirus Disease 2019 [published online 2020 Aug 3]. JAMA Pediatr. 2020;e202776. doi:10.1001/jamapediatrics.2020.2776

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Pregnancy, obstetric critical care, Hawaii, USA	3-Aug-20	Obstetric hospital preparedness for a pandemic: an obstetric critical care perspective in response to COVID-19	Journal of Perinatal Medicine	Perspectives	The authors provide institutional guidance on how to prepare an obstetric hospital service for a pandemic, mass casualty, or natural disaster by identifying a care model and resources for a large surge of critically ill pregnant patients over a short time. They recommend specific components of a disaster manual containing protocols and operating procedures to be developed specifically for a given hospital, and they offer resources for examples of such manuals. They also provide examples of surge capacity assessments for both facilities and staffing, and regional communication plans between nearby hospitals. They also describe possible needed alterations to medical algorithms, as well as the importance of education, training, and simulation.	This article provides a guide to hospitals for creating a personalized approach to manage a pandemic surge in caring for obstetric patients.	Zalud I, Harvey S. Obstetric hospital preparedness for a pandemic: an obstetric critical care perspective in response to COVID-19 [published online 2020 Aug 3]. J Perinat Med. 2020. doi:10.1515/jpm-2020-0281
Breastfeeding, LMICs, morbidity, newborns	3-Aug-20	Impact of COVID-19 on maternal and child health	The Lancet	Correspondence	Anecdotal evidence suggests that some health facilities are separating newborns from mothers and discouraging breastfeeding because of unfounded fears of transmission of COVID-19 through breastmilk. These situations might result in a decline in early initiation of breastfeeding after birth—missing the child's first natural vaccine (colostrum)—and, in turn, exclusive breastfeeding. The authors estimate, using the Alive & Thrive cost of not breastfeeding tool, that a hypothetical effect of small (5%), moderate (10%), medium (25%), or severe (50%) relative reductions in the prevalence of breastfeeding due to COVID-19 disruptions would result in 16,469 (small reduction), 32,139 (moderate reduction), 75,455 (medium reduction), and up to 138,398 (severe reduction) child deaths across 129 LMICs over a 1-year period.	This analysis highlights the need for continued support to promote and protect breastfeeding by revealing substantial morbidity and mortality repercussions from possible pandemic-related disruptions to breastfeeding.	McClure EM, Kinney MV, et al. Impact of COVID-19 on maternal and child health. The Lancet. 2020. Available online 3 August 2020. doi.org/10.1016/S2214-109X(20)30326-0
Adolescence, cardiology, Brugada syndrome, USA	3-Aug-20	COVID-19 Reveals Brugada Pattern in an Adolescent Patient	Cardiology in the Young	Case Report	Brugada syndrome is an inherited arrhythmia syndrome transmitted in an autosomal dominant manner. Despite its hereditary nature, most patients are not diagnosed until middle adulthood after presenting with life-threatening arrhythmias. A diagnosis of Brugada pattern on electrocardiogram in pediatric or adolescent patients is rare. COVID-19 is characterized by fevers and a pro-inflammatory state, which may serve as inciting factors for Brugada pattern. Recently described in two adult patients, the authors report and describe the first case of Brugada pattern in an adolescent with COVID-19. In the context of reports of Brugada pattern in COVID-19 patients, clinicians should provide close monitoring and direct counseling for patients with a personal or family history of Brugada Syndrome or family history of sudden death.	This is the first report of an adolescent patient with a Brugada pattern revealed by COVID-19.	Choi NH, Silver ES, Fremed M, Liberman L. COVID-19 Reveals Brugada Pattern in an Adolescent Patient [published online, 2020 Aug 3]. Cardiol Young. 2020;1-9. doi:10.1017/S1047951120002619
Adolescents, children, epidemiology, management of infection	2-Aug-20	COVID-19 infection in children and adolescents	British Journal of Hospital Medicine	Review	This review summarizes the current understanding of the epidemiology, clinical manifestations, and management of COVID-19 in children and adolescents. The prevalence of COVID-19 is significantly lower in children than adults, but the pediatric disease is likely underdiagnosed as a result of the high numbers	COVID-19 infection is less defined in children and adolescents compared to adults. A higher proportion of pediatric cases are	Naja M, Wedderburn L, Ciurtin C. COVID-19 infection in children and adolescents. Br J Hosp Med (Lond). 2020;81(8):1-10. doi:10.12968/hmed.2020.0321

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					of asymptomatic or mild cases. Children are vulnerable to family cluster outbreaks but are unlikely to be index cases within a household. Vertical transmission or breast milk transmission is yet to be proven. 10% to 90% of pediatric COVID-19 cases are asymptomatic. Symptomatic cases typically present with mild symptoms, including cough, fever and sore throat. Intensive care admission and mortality are rare. MIS-C temporally associated with COVID-19 is a rare, but severe, newly emerging phenotype. At present, there is no specific treatment for COVID-19 in adults or children; management is usually supportive. For severe or critical disease, the decision to start antiviral or immunomodulatory therapy should be on a case-by-case basis; in the UK, this should be done within a clinical trial.	asymptomatic or manifest with milder symptoms than adults.	
Pediatric, immunosuppression, rheumatic disease, Turkey	2-Aug-20	Does immunosuppressive treatment entail an additional risk for children with rheumatic diseases? A survey-based study in the era of COVID-19	Rheumatology International	Original article	The aim of this research was to extend current knowledge on the risk of SARS-CoV-2 for children with rheumatic diseases under immunosuppressive treatment. Based in Turkey, the authors conducted telephone interviews and an online questionnaire to the parents of pediatric rheumatology patients on immunosuppression from 1 May-20 May 2020. The diagnostic distribution of patients (n = 414) eligible for the study was as follows: juvenile idiopathic arthritis (JIA) (58.7%), autoinflammatory diseases (26.3%), connective tissue diseases (12.3%), and vasculitis (2.7%). Of this cohort, nine patients presented for a COVID-19 evaluation, six of whom had close contact with confirmed cases. 1 patient with seronegative polyarticular JIA was diagnosed with COVID-19. None of the patients, including the confirmed case, had severe COVID-19 symptoms. >1/2 of the patients with household exposure remained asymptomatic. The authors conclude that based on their results, immunosuppressive treatment and rheumatic disease do not seem to pose an additional risk of COVID-19.	The authors discuss their experience in Turkey with a large population of pediatric rheumatology patients on immunosuppressive treatment during the COVID-19 pandemic. Of 414 patients, nine were suspected of COVID-19, and one case was confirmed.	Koker O, Demirkan FG, Kayaalp G, et al. Does immunosuppressive treatment entail an additional risk for children with rheumatic diseases? A survey-based study in the era of COVID-19 [published online, 2020 Aug 2]. Rheumatol Int. doi:10.1007/s00296-020-04663-9
Pediatric, outpatient, ambulatory care, healthcare system	2-Aug-20	Management Plan of a Pediatric Outpatient Department during the SARS-CoV-2 Epidemic [Free Access to Abstract only]	Pediatric Pulmonology	Commentary	Children generally show milder cases and a better prognosis from SARS-CoV-2 than adults. The pediatric outpatient clinic has played a crucial role in the prevention and control of SARS-CoV-2 infection in children during the COVID-19 pandemic. Based on their experience as well as existing diagnosis and treatment guidelines, the authors present the relevant strategies of their tertiary pediatric outpatient department in China. From 26 January- 12 May 2020, a total of 23,658 children and 68,759 accompanying parents were screened in their clinic. They identified 2,346 cases with fever, 12 suspected pediatric cases of COVID-19, and 39 suspected adult cases of COVID-19. Overall, this article serves as a reference for how to prevent and control SARS-CoV-2 infection within pediatric outpatient services	As the first line of defense for children with a SARS-CoV-2 infection, the pediatric outpatient clinic has a crucial role in the COVID-19 pandemic. The authors discuss the key aspects of managing pediatric outpatient services during this crisis.	Wu X, Li X. Management Plan of a Paediatric Outpatient Department during the SARS-CoV-2 Epidemic [published online, 2020 Aug 2]. Pediatr Pulmonol. doi:10.1002/ppul.25000

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					including the aspects of protection, diagnosis, and psychological adjustment.		
Pregnancy, neonate, vertical transmission, India	2-Aug-20	Early-onset symptomatic neonatal COVID-19 infection with high probability of vertical transmission	Infection	Case Report	This case report describes early-onset, severe COVID-19 course in a neonate. A mother, who tested negative by RT-PCR but tested positive for SARS-CoV-2 by serology, delivered a term baby. The neonate was kept in strict isolation. Molecular tests for SARS-CoV-2 on the umbilical stump, placenta, and nasopharyngeal aspirate of the neonate, collected at the time of birth, were positive. On day 2, the neonate developed clinical features of COVID-19 in the form of fever, poor feeding, and hyperbilirubinemia along with elevated inflammatory markers. A clinical diagnosis of neonatal sepsis was made, and antibiotics were provided. Blood, CSF, and urine cultures were sterile. The neonate tested RT-PCR positive for SARS-CoV-2 on two more occasions before testing positive for antibodies and was discharged on day 21 of life. This report presents a case with strong possibility of vertical transmission of COVID-19 from a mildly symptomatic, RT-PCR negative but antibody-positive mother.	This case report presents a strong possibility of vertical transmission from a mother with serology positive for SARS-CoV-2 antibodies to a neonate who developed symptomatic COVID-19 infection.	Kulkarni R, Rajput U, Dawre R, et al. Early-onset symptomatic neonatal COVID-19 infection with high probability of vertical transmission [published online 2020 Aug 2]. Infection. 2020. doi:10.1007/s15010-020-01493-6
Estrogen, oral contraceptive pills, menopause, hormone replacement therapy, UK	2-Aug-20	Estrogen and COVID-19 symptoms: associations in women from the COVID Symptom Study	medRxiv	Preprint (not peer-reviewed)	Animal model studies of SARS-CoV and MERS suggest a protective effect of the female sex hormone estrogen. The authors sought to determine whether occurrence of COVID-19 infection increases in women entering menopause and whether pre-menopausal women taking exogenous hormones in the form of combined oral contraceptive pill (COCP) and post-menopausal women taking hormone replacement therapy (HRT) decreases SARS-CoV-2 infection. The study included data from May 7-June 15, 2020, from female users of the self-reporting COVID Symptom Tracker Application in the UK. The study included 152,637 women for menopause status, 295,689 for COCP use, and 151,193 for HRT use. Post-menopausal women aged 40-60 years had a higher rate of predicted SARS-CoV-2 infection (P=0.003) and a corresponding range of symptoms, with consistent but not statistically significant trends observed for COVID-19 positive tests and disease severity. Women aged 18-45 years taking COCP had a significantly lower rate of predicted SARS-CoV-2 infection (P=8.03E-05). Post-menopausal women using HRT had an increased rate of predicted SARS-CoV-2 infection (P=2.22E-05). These findings suggest a protective effect of estrogen on COVID-19, based on a positive association between predicted COVID-19 and menopausal status, and a negative association with COCP use.	This study assessed the impact of estrogen on SARS-CoV-2 infection, and findings were consistent with estrogen having a protective effect against SARS-CoV-2 infection.	Costeira R, Lee KA, Murray B, et al. Estrogen and COVID-19 symptoms: associations in women from the COVID Symptom Study [published online 2020 Aug 2]. medRxiv. 2020. doi:10.1101/2020.07.30.20164921
Pregnancy, placenta, ACE2, TMPRSS2, United	2-Aug-20	SARS-CoV-2 can infect the placenta and is	Modern Pathology	Original Research	While vertical transmission of SARS-CoV-2 is rare, little is known about how the placenta responds to maternal COVID-19 disease during pregnancy. Viral infection of the placenta may lead to	This study considered the histopathology changes and the differential	Hecht, J.L., Quade, B., Deshpande, V. et al. SARS-CoV-2 can infect the placenta and is not

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States, histopathology		not associated with specific placental histopathology: a series of 19 placentas from COVID-19-positive mothers			transmission to the fetus and is accompanied by pathological signs of placental inflammation. SARS-CoV-2 infects tissue using ACE2 as a receptor, and TMPRSS2 is a protein that mediates its entry into cells through the cleavage of the spike protein. This study examined 19 placentas from women, in the United States, who tested positive for COVID-19 during pregnancy. The histopathology, viral expression, and presence of ACE2 and TMPRSS2 within the placental tissue were assessed. There were 2 cases of viral infection in the placental villous trophoblasts. However, no distinctions in placental histopathology were observed. While ACE2 was expressed in the trophoblasts, it was polarized away from the maternal lakes. TMPRSS2 was weakly expressed in the chorionic villous endothelium. These findings demonstrate the ability of SARS-COV-2 to infect the placenta, however, this may not lead to vertical transmission.	expression of the SARS-CoV-2 markers, ACE2 and TMPRSS2, within COVID-19 exposed placentas. While SARS-CoV-2 can infect the placenta, the distribution of these markers may explain why vertical transmission and congenital infection is rare.	associated with specific placental histopathology: a series of 19 placentas from COVID-19-positive mothers. [published online 02 August 2020] Mod Pathol. 2020. https://doi.org/10.1038/s41379-020-0639-4
COVID-19; prenatal visits; pregnancy; virtual visit; United States	1-Aug-20	Patient Perspectives on Audio-Only Virtual Prenatal Visits Amidst the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Pandemic	Obstetrics and Gynecology	Article	The authors evaluated patient satisfaction with audio-only virtual visits integrated into a pre-existing prenatal care schedule within a large, county-based system in the United States during the COVID-19 pandemic. Predominantly women of low socio-economic status and limited resources were served by this system from 17 March-31 May 2020. A 4-question telephone survey was used to assess level of satisfaction in 283 patients [ages not specified]. In addition, average clinic wait times and attendance rates by visit type (virtual vs. in-person) were examined. After implementation, the percentage of visits conducted through the virtual platform gradually rose, with nearly 25% of weekly prenatal visits being performed through the virtual platform by the month of May. Clinic wait times trended downward after implementation of virtual visits (P<0.001). On average, 88% of virtual prenatal visits were completed as scheduled, whereas only 82% of in-person visits were attended (P<.001). 99% of respondents reported that their needs were met during their audio-only virtual visits. The majority of patients (43% and 47% of patients followed at 2 clinics, respectively) preferred a combination of in-person and virtual visits for prenatal care, and patients reported benefits of virtual visits, such as avoiding transportation, parking costs, and time spent away from childcare and employment. Audio-only virtual prenatal visits, as a complement to in-person prenatal visits, have advantages in a vulnerable population of women and offer a viable option to increase access to care.	The authors evaluated patient satisfaction with audio-only virtual visits integrated into a pre-existing prenatal care schedule within a large, county-based system in the United States during the COVID-19 pandemic. 99% of respondents reported that their needs were met during their audio-only virtual visits, and the majority of patients preferred a combination of in-person and virtual visits for prenatal care. Audio-only virtual prenatal visits, as a complement to in-person prenatal visits, have advantages in a vulnerable population of women and offer a viable option to increase access to care.	Holcomb D, Faucher MA, Bouzid J, et al. Patient Perspectives on Audio-Only Virtual Prenatal Visits Amidst the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Pandemic. <i>Obstet Gynecol.</i> 2020;136(2):317-322. doi:10.1097/AOG.0000000000004026.
COVID-19; appendicitis; adolescent; SARS-	1-Aug-20	Non-operative management of acute appendicitis in a	Journal of Pediatric Surgery Case Reports	Case Report	The authors report the case of a 13-year old female in the US who presented with a 1-day history of right lower abdominal pain, nausea, and emesis. The patient was afebrile and had normal vitals. However, she had moderate tenderness to	The authors highlight the case of a 13-year old female in the US presenting with symptoms	Jones BA, Slater BJ. Non-operative management of acute appendicitis in a pediatric patient with concomitant COVID-19

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CoV-2; management		pediatric patient with concomitant COVID-19 infection			palpitation in the right lower quadrant. Her laboratory tests revealed elevated white blood cell count (13.4), while a CT scan revealed a dilated appendix (1.3cm diameter) with periappendiceal stranding and no evidence for perforation or abscess. There were also several appendicoliths observed within the appendix. She tested positive for SARS-CoV-2 via a nasopharyngeal swab. She was treated with IV ceftriaxone and metronidazole with symptom resolution and progressed to a normal diet. Her clinical symptoms and abdominal examination improved by the next day, and she was sent home to self-quarantine with oral antibiotics and reported well 2 weeks later and could tolerate a normal diet. Hence, the authors reported on a concomitant case of acute appendicitis and SARS-CoV-2 infection, the former of which was effectively treated using a non-operative management strategy, recommending its usage should the need arise.	of appendicitis who eventually tested positive for SARS-CoV-2. Her white blood cell count was elevated, with a dilated appendix, periappendiceal stranding, and appendicoliths in her appendix. She was managed with oral antibiotics.	infection. J Pediatr Surg Case Rep. 2020 Aug;59:101512. doi: 10.1016/j.epsc.2020.101512. Epub 2020 May 31. PMID: 32542177; PMCID: PMC7261356.
Pregnancy, anxiety, stress, Singapore, breast-feeding, transmission	1-Aug-20	Perception and Feelings of Antenatal Women during COVID-19 Pandemic: A Cross-Sectional Survey	Annals of the Academy of Medicine, Singapore	Original Research	This study aimed to assess the baseline knowledge regarding COVID-19 and the level of anxiety, depression, and stress in an obstetric population in Singapore. A cross-sectional survey was conducted in a large tertiary maternity unit in Singapore, from March 31-April 25, 2020. The survey assessed the knowledge of 324 pregnant women regarding COVID-19 infection, their perceptions of its impact on pregnancy, and the psychological impact of the pandemic using the validated Depression, Anxiety, and Stress Scales (DASS-21). The mean age of participants was 31.8 years (range 20–45). 77.5% (n = 251) of women felt that pregnant women were more likely to get COVID-19 infection, while 42.6% (n = 138) thought that pregnant women would have a severe illness if infected. Most women (83.0%, n = 269) believed that COVID-19 would be transmitted to the neonate antenatally. 74.7% (n = 242) associated breast-feeding with an increased risk of transmission to their newborns. 35.8% (n = 116) of antenatal women screened positive for anxiety, 18.2% (n = 59) screened positive for depression, and 11.1% (n = 36) screened positive for stress. Women who believed that COVID-19 infection would be passed to their infants antenatally or would cause fetal anomalies had significantly higher anxiety scores [B = -0.376, 95% CI, -0.704 to -0.0490 and B = -0.395 (95% CI, -0.660 to -0.130) respectively]. The authors conclude that the study highlights how a lack of timely and reliable information on COVID-19 in pregnancy leads to knowledge gaps in antenatal women, with a significant proportion of women reporting increased levels of anxiety and stress.	The authors assessed the level of knowledge of pregnant women in Singapore regarding COVID-19 in pregnancy. They found that lack of information led to knowledge gaps which were associated with increased levels of anxiety and stress.	Ng QJ, Koh KM, Tagore S, Mathur M. Perception and Feelings of Antenatal Women during COVID-19 Pandemic: A Cross-Sectional Survey. Ann Acad Med Singap. 2020 Aug;49(8):543-552. PMID: 33164024.

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Pediatric, asthma, prevention, environmental risk factor, psychological, management, China	1-Aug-20	Expert recommendations on the management of childhood bronchial asthma during the novel coronavirus pneumonia epidemic	Journal of Thoracic Disease	Guideline	In response to the COVID-19 outbreak, the Paediatric Committee for Allergy, China Association for Promotion of Health Science and Technology convened a panel of experts to put forward suggestions for prevention, environmental intervention, family management, psychological intervention and reasonable exercise for children with asthma, which can be used as a reference for pediatric clinicians and parents. They talked about (1,2) general and indoor environmental risks and related interventions to prevent children with asthma from getting infected with SARS-CoV-2; (3) management of children with acute asthma and asthma in the remission period; (4) psychological stress in asthmatic children and their parents and related interventions; (5) finally the exercise recommendations for children with asthma.	This article presented suggestions for prevention, environmental intervention, family management, psychological intervention and reasonable exercise for children with asthma based on an expert panel organized by the Paediatric Committee for Allergy, China Association for Promotion of Health Science and Technology.	China Association for Promotion of Health Science and Technology Child Allergy Professional Committee. Expert recommendations on the management of childhood bronchial asthma during the novel coronavirus pneumonia epidemic. J Thorac Dis. 2020 Aug;12(8):4391-4397. doi: 10.21037/jtd-20-1688.
NYC, New York City, Washington, DC, children, pediatrics, MIS-C, asthma, Hispanic/Latinos, critically ill	1-Aug-20	A picture of severe COVID-19 in US children and youth emerges	The Journal of Pediatrics	The Editors' Perspective	The editor highlights the main findings on the COVID-19 case reports from the Children's Hospital at Montefiore in New York City (NYC) and Children's National Hospital in Washington, DC (DC). Although children are said to have mild COVID-19 symptoms, the reports reveal severe COVID-19 cases in the US children and youth. The case reports studied 91 hospitalized patients over 4- and 6-week periods, respectively, from 15 March 2020. Hospitalized patients were representative of the Bronx, NYC, and DC communities with a high proportion of Hispanic/Latinos in NYC and Hispanic/Latinos and African Americans in DC. 26% of Bronx patients and 2% of DC patients were obese (BMI >30kg/m ²). 37% of hospitalized and 22% of critically ill patients in DC had no underlying medical conditions. Among the studies' 22 critically ill patients, 63% were male and 82% were >10-years-old. Both reports show that approximately 20% of COVID-19 hospitalizations were comprised of asthma patients, but neither shows an excess of asthmatics among the critically ill. SARS-CoV-2 may exacerbate asthma but itself is not a major risk factor for the severe COVID-19 pulmonary syndrome. The reports provide a sobering reality check that children and youth are susceptible to life-threatening COVID-19 complications.	According to the case reports from two Children's Hospitals in the U.S, while children experience relatively mild symptoms in general, children and youth are susceptible to life-threatening COVID-19 complications.	Long, SS. A picture of severe COVID-19 in US children and youth emerges. The Journal of Pediatrics. 2020 Aug 1;223: 1-2. doi: https://doi.org/10.1016/j.jpeds.2020.06.035
Zimbabwe, nutrition, physical activity, pandemic	1-Aug-20	The effect of the COVID-19 induced lockdown on nutrition, health and lifestyle patterns among adults in Zimbabwe	medRxiv	Preprint (not peer-reviewed)	This study investigated the impacts of the COVID-19 induced lockdown in Zimbabwe on nutrition, physical activity, alcohol consumption and smoking among Zimbabwean adults aged ≥18 years in May, 2020. A cross-sectional online survey was conducted using a structured questionnaire to collect information on demographics, food system dimensions, diet and physical activity patterns, stress and anxiety, body image perceptions, ease of access to health services, and lifestyle behaviors like smoking, alcohol intake, and screen time. The study consisted of 704 adults, the majority being female (63%). Survey results	This study highlights the impact of the COVID-19 pandemic on Zimbabwean nutrition and suggests that the lockdown period was associated with higher food prices and a decrease in dietary diversification.	Matsungu TM, Chopera P. The effect of the COVID-19 induced lockdown on nutrition, health and lifestyle patterns among adults in Zimbabwe. medRxiv. 2020. doi: 10.1101/2020.06.16.20130278

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					indicated that the lockdown resulted in increased food prices, decreased availability of nutritious foods, and a reduction in participant physical activity. More than half of the participants (59.9%) reported having difficulties accessing medicinal drugs. The authors concluded that the lockdown period was associated with increase in food prices, decrease in dietary diversification, elevated stress, disrupted diet and consumption patterns, as well as low levels of physical activity and perceived weight gain. The prevalence of Generalised Anxiety Disorder (GAD) was 40.4% and mostly affecting females [63.5%, P=0.909] and the perceived weight gain by participants was higher in females (P=0.062).		
Lung ultrasound, children, pediatric, diagnosis	1-Aug-20	The Role of Lung Ultrasound in Diagnosis and Follow-Up of Children With Coronavirus Disease 2019	Pediatric Critical Care Medicine	Letters to the Editor	In this letter, the authors commented on Ong et al.'s article published in Pediatric Critical Care Medicine in July. Ong et al. confirmed that children have milder forms than adults of COVID-19 and the use of CT scans should be limited and nonroutine, while the authors of this letter described that lung ultrasound (LUS) is helpful in diagnosis and in follow-up management of the COVID-19 children. They argued that LUS is useful to complement the clinical evaluation and to monitor the evolution of lung disease until its resolution.	In this letter, the authors highlight the use of lung ultrasound and argue that it can improve COVID-19 outcomes, allowing adequate and safe management of the disease in the emergency department and during follow-up in COVID-19 children.	Musolino AM, Supino MC. The Role of Lung Ultrasound in Diagnosis and Follow-Up of Children With Coronavirus Disease 2019. <i>Pediatr Crit Care Med.</i> 2020;21(8):783. doi:10.1097/PCC.0000000000002436
Hospital services, outpatient, pediatric, trauma, Australia	1-Aug-20	Disruption of pediatric orthopedic hospital services due to the COVID-19 pandemic in a region with minimal COVID-19 illness	Journal of Children's Orthopaedics	Original Research	This study aimed to evaluate the impact of the COVID-19 pandemic on pediatric orthopedic services in the Women's and Children's Hospital in South Australia. A retrospective audit was conducted at this hospital. Orthopedic Emergency Department (ED) presentations, outpatient clinics, and hospital admissions between 16 March and 26 April 2020 were studied and compared with the same period in 2019. 621 children under 18 years old presented to the ED with orthopedic complaints during the pandemic (vs 997 in 2019). There was also a change in the number of ED presentations requiring admission (110 in 2020 vs 116 in 2019). Among patients discharged directly from the ED, 27.3% received hospital outpatient referral (vs 39.1% in 2019), with the remaining patients referred to community health services or discharged directly. There was a 509.8% increase in telehealth outpatient consultations and a 60.6% decline in face-to-face appointments. There was a total of 144 orthopedic admissions compared to 184 in 2019. Admissions for children under 7 years old remained unchanged. Despite an overall decline in all pediatric orthopedic hospital activity, the number of emergency admissions for musculoskeletal conditions did not change.	This study demonstrated an overall decline in all hospital services provided by a pediatric orthopedic department in South Australia. The majority of pediatric patients presenting to the emergency department did not require admission and were referred to external health providers or discharged directly.	Wong FL, Antoniou G, Williams N, Cundy PJ. Disruption of paediatric orthopaedic hospital services due to the COVID-19 pandemic in a region with minimal COVID-19 illness. <i>J Child Orthop.</i> 2020;14(4):245-251. doi:10.1302/1863-2548.14.200140

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Iran, maternal morbidity/mortality, health systems	1-Aug-20	Provision of Critical Maternity Care during the Coronavirus Disease 2019 (COVID-19) Pandemic in the Islamic Republic of Iran	Archives of Iranian Medicine	Original Research	This article delineates how Iran has responded to the COVID-19 pandemic in maternal healthcare. They established national health networks; to engage in timely reporting, monitoring, and following-up; and maintained guidelines and protocols for COVID-19 management in pregnancy to reduce transmission. The authors state that Iran has been able to maintain health system functioning and provide continued care for pregnant women, as a model to other countries.	Iran has been able to identify mechanisms to ensure adequate maternal healthcare during the COVID-19 pandemic. The processes they engaged in can serve as a model for other countries.	Changizi N, Raeisi A, Barekati H, et al. Provision of Critical Maternity Care during the Coronavirus Disease 2019 (COVID-19) Pandemic in the Islamic Republic of Iran. Arch Iran Med, 2020; 23(8), 557-560. DOI: 10.34172/aim.2020.59
Kawasaki disease, macrophage activation, hyperinflammatory	1-Aug-20	COVID-19 and Hyperinflammatory Syndrome in Children: Kawasaki Disease with Macrophage Activation Syndrome in Disguise?	The Cureus Journal of Medicine and Science	Review Article	The characteristics of MIS-C, observed in some children with COVID-19, resemble those of Kawasaki disease (KD), an inflammatory syndrome in children that can lead to coronary artery abnormalities due to a subsequent vasculitis and may occasionally lead to macrophage activation syndrome. This study reviews the literature regarding COVID-19, KD, and macrophage activation syndrome to demonstrate the similarities and differences between the inflammatory syndrome seen with COVID-19 and KD. KD and macrophage activation syndrome both present as hyper-inflammatory diseases, and patients with KD can also be co-diagnosed with macrophage activation syndrome. MIS-C presents with hyper-inflammation as well, but it differs from the other two diseases in myocardial involvement, increased incidence of gastro-intestinal system involvement and presence of a rash. The authors believe it imperative that a clear distinction between COVID-19, KD, and macrophage activation syndrome be made so that there can be correct diagnosis and treatment of pediatric patients.	This review analyzes patient information from pediatric patients diagnosed with COVID-19, Kawasaki disease, and macrophage activation syndrome. Due to the overlapping attributes of these diseases, the authors state that it is imperative to deduce if pediatric inflammatory multisystem syndrome is a novel entity, or if SARS-CoV-2 infection is a trigger for Kawasaki disease and macrophage inflammatory syndrome.	Loomba RS, Villarreal EG, Flores S. COVID-19 and Hyperinflammatory Syndrome in Children: Kawasaki Disease with Macrophage Activation Syndrome in Disguise?. Cureus. 2020;12(8):e9515. Published 2020 Aug 1. doi:10.7759/cureus.9515
Pediatric, admission, resource allocation, bed capacity, USA	1-Aug-20	An Approach to Consolidating Pediatric Hospital Beds During the COVID-19 Surge	Pediatrics	Research Brief	In April 2020, in response to the COVID-19 pandemic, the Children's Hospital Association of the United States called for immediate consolidation of pediatric care within experienced pediatric facilities and coordinated efforts between children's and community hospitals. In this article, the authors estimate hospital bed capacity under potential consolidation and the corresponding impact on patient travel distance. In the continental USA, 3,524 general hospitals with functioning emergency departments were identified, of which 1,193 maintained a total of 30,798 pediatric beds. The statewide fraction of pediatric beds contained in hospitals with PICUs ranged from 100% in Washington, District of Columbia, to 0% in Wyoming (median: 72.1%; interquartile range [IQR]: 61.0%–82.4%). The median distances from county centroids to the nearest pediatric bed increased from 24.4 miles under baseline conditions to 52.3 miles with diversion to PICU hospitals. They conclude that decades of pediatric hospital care consolidation	When evaluating pediatric hospital bed capacity in the US, the authors found a doubling of travel distances for families seeking urgent or emergent pediatric care during the COVID-19 pandemic. Roughly three-quarters of all pediatric beds are currently maintained in centers with PICUs.	França UL, McManus ML. An Approach to Consolidating Pediatric Hospital Beds During the COVID-19 Surge. [published online, 2020 Aug]. Pediatrics. doi:10.1542/peds.2020-1464

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					has left a system that is highly dependent on a subset of specialized centers. In a pandemic that preferentially spares children, this provides an opportunity for those centers to assume the entire burden of pediatric inpatient care.		
Pediatric hospitalizations, visitor restrictions, social isolation, transmission	1-Aug-20	Benefits and Risks of Visitor Restrictions for Hospitalized Children During the COVID Pandemic	Pediatrics	Ethics Rounds	To control the spread of SARS-CoV-2, many hospitals have strict visitor restriction policies, including in the pediatric setting. Although they vary widely between institutions, these policies often prohibit both parents from visiting at the same time or having grandparents or other family members visit at all. The authors present three cases in which such policies created ethical dilemmas and possibly called for compassionate exceptions from the general rules. The article also includes several expert commentaries on these cases and their associated ethical conflicts. Dr. Lantos concludes the article by stating that the challenge in these situations is to carefully balance the harms of restricting visitation with the benefits of protecting other patients, families, and health professionals. Evidence-based policies are essential. Compassion-based exceptions are also sometimes appropriate.	In this article, three cases of pediatric hospitalizations during the COVID-19 pandemic are described. Several commentaries are provided regarding the ethical conflicts of visitor restrictions that such situations present.	Virani AK, Puls HT, Mitsos R, Longstaff H, Goldman RD, Lantos JD. Benefits and Risks of Visitor Restrictions for Hospitalized Children During the COVID Pandemic. [published online, 2020 Aug]. <i>Pediatrics</i> . doi:10.1542/peds.2020-000786
Pediatric, adolescent, gynecology, abuse, intimate partner violence	1-Aug-20	Pediatric and Adolescent Gynecologic Problems Continue During the COVID-19 Pandemic	Journal of Pediatric and Adolescent Gynecology	Editorial	Closures during the COVID-19 pandemic have decreased access to routine health care, including pediatric and adolescent gynecology. However, gynecologic problems are still present for these patients. The author goes on to review that abuse and intimate partner violence may be more common during the pandemic. Young people in abusive relationships often have family members who witness the abuse and assist in seeking help. Abuse may be more hidden during the COVID-19 pandemic, since families are more isolated.	The author urges health care providers to be aware of ongoing pediatric and adolescent gynecologic health needs, and also to be vigilant regarding intimate partner violence and abuse during the COVID-19 pandemic.	Adams Hillard PJ. Pediatric and Adolescent Gynecologic Problems Continue During the COVID-19 Pandemic. <i>J Pediatr Adolesc Gynecol</i> . 2020;33(4):329-330. doi:10.1016/j.jpap.2020.05.004
Spain, dietary changes, food habits, sustainability	1-Aug-20	Environmental and nutritional impacts of dietary changes in Spain during the COVID-19 lockdown	Science of the Total Environment	Original Article	The COVID lockdown has affected food purchases and eating habits. In this regard, this short communication assessed the nutritional and environmental impacts of these changes during the COVID lockdown in Spain, by applying Life Cycle Assessment and an energy- and nutrient-corrected functional unit. Three environmental impacts were studied (Global Warming Potential, Blue Water Footprint and Land Use) and a total of seven weekly diet scenarios were designed: two pre-COVID diets for March and April in 2019, one COVID diet (COVID) and two alternative diets, one based on the National Dietary Guidelines (NDG) and another one on the Planetary Health Diet. Results show that the COVID diet had larger energy intake and lower nutritional quality, as well as higher environmental impacts (between 30 and 36%) than the pre-COVID eating patterns. Further research is needed to account for food affordability within this assessment, as well as to analyze how eating patterns will evolve after the COVID lockdown. Finally, the definition of short guidelines for	There have been drastic changes in eating habits as a result of the COVID-19 pandemic. It is important to establish strategies to ensure sustainable food habits in the future.	Battle-Bayer L, Aldaco R, Bala A, et al. Environmental and nutritional impacts of dietary changes in Spain during the COVID-19 lockdown [published online ahead of print, 2020 Aug 1]. <i>Sci Total Environ</i> . 2020;748:141410. doi:10.1016/j.scitotenv.2020.141410

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					sustainable food behaviors for future possible lockdowns is suggested, as well as the introduction of sustainable indicators within NDGs.		
Pregnancy, mental health, Canada	1-Aug-20	Elevated depression and anxiety symptoms among pregnant individuals during the COVID-19 pandemic	Journal of Affective Disorders	Original Article	This online survey of 1,987 pregnant women in Canada assessed symptoms of anxiety and depression during the COVID-19 pandemic and aimed to determine factors associated with psychological distress. The authors found substantially elevated anxiety and depression symptoms, with 37% of survey respondents reporting clinically relevant symptoms of depression and 57% reporting clinically relevant symptoms of anxiety. Higher symptoms of depression and anxiety were associated with more concern about threats of COVID-19 to the life of the mother and fetus/neonate, as well as concerns about not getting the necessary prenatal care, relationship strain, and social isolation due to the COVID-19 pandemic. Higher levels of perceived social support and support effectiveness, as well as more physical activity, were associated with lower psychological symptoms. This study shows concerning elevated symptoms of anxiety and depression among pregnant individuals during the COVID-19 pandemic. Potential protective factors include increased social support and exercise, and they may help mitigate long-term negative outcomes.	This survey found significantly increased rates of reported depression and anxiety symptoms among pregnant women in Canada during the COVID-19 pandemic. Increased social support and physical exercise were identified as possible protective factors.	Lebel C, MacKinnon A, Bagshawe M, et al. Elevated depression and anxiety symptoms among pregnant individuals during the COVID-19 pandemic [published online 2020 Aug 1]. <i>J Affect Disord.</i> 2020;277:5-13. doi:10.1016/j.jad.2020.07.126
Food system, climate change, nutritional insecurity, UNFCCC	1-Aug-20	COVID-19 and the future of food systems at the UNFCCC	The Lancet: Planetary Health	Commentary	In this comment the authors highlight how the climate crisis is exacerbating food insecurity and discuss the concurrent opportunity and necessity to pursue global food systems transformation given the threats brought about by COVID-19. Food insecurity and low-quality diets cause undernutrition, micronutrient deficiencies, and rising overweight and obesity rates, which in turn are notable risk factors for admission to hospital and death due to complications from COVID-19. The authors state that not only do the food systems fail to sustain the world nutritionally, but they are also the single greatest driver of environmental degradation, causing unprecedented biodiversity loss, environmental pollution, and water shortages. The authors urge The UN Framework Convention on Climate Change (UNFCCC), recognized as the primary global forum dedicated to climate change, to take planetary health into account and offer recommendations by which the organization can pave the way for a green post-pandemic recovery with clear commitments towards healthy, equitable, and sustainable food systems.	The COVID-19 pandemic has elucidated the vulnerability of global food systems and the ongoing threat posed by the climate crisis to nutritional security and collective health. Although these two crises threaten food systems through different mechanisms, they share a disproportionate impact on the most vulnerable and emphasize the need for a global food systems transformation.	Gralak, S, Spajic, L, Blom, I, et al. COVID-19 and the future of food systems at the UNFCCC, <i>The Lancet Planetary Health</i> , published 2020 Aug 1, DOI:https://doi.org/10.1016/S2542-5196(20)30163-7
Seroprevalence, pediatric, household transmission, Switzerland	1-Aug-20	Seroprevalence of anti-SARS-CoV-2 IgG antibodies in Geneva.	Lancet	Articles	This article presented results from the first 5 weeks serosurveys of the 12-week population-based study from Geneva, Switzerland. The authors estimated seroprevalence using a Bayesian logistic regression model considering test performance and adjusting for the age and sex of Geneva's population.	The results from the first five weeks serosurveys of the population-based study from Switzerland suggested that most of the	Stringhini S, Wisniak A, Piumatti G, et al. Seroprevalence of anti-SARS-CoV-2 IgG antibodies in Geneva, Switzerland (SEROCoV-POP): a population-based study.

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		Switzerland (SEROCoV-POP): a population-based study			Between April 6th and May 9th, 2020, they enrolled 2766 participants from 1339 households, with a demographic distribution similar to that of the canton of Geneva. In the first week, they estimated seroprevalence of 4.8% (95% CI 2.4-8.0, n=341). The estimate increased to 8.5% (95% CI 5.9-11.4, n=469) in the second week, to 10.9% (95% CI 7.9-14.4, n=577) in the third week, 6.6% (95% CI 4.3-9.4, n=604) in the fourth week, and 10.8% (95% CI 8.2-13.9, n=775) in the fifth week. Individuals aged 5-9 years (RR=0.32, 95% CI 0.11-0.63) and those > 65 years (RR=0.50, 95% CI 0.28-0.78) had a significantly lower risk of being seropositive than those aged 20-49 years. After accounting for the time to seroconversion, they estimated that for every reported confirmed case, there were 11.6 infections in the community. These results suggest that most of the population of Geneva remained uninfected during the first wave of the pandemic in Switzerland, despite the high prevalence of COVID-19 in Geneva. Further, a significantly lower seroprevalence was observed for children aged 5-9 years and adults older than 65 years, compared with those aged 10-64 years. The authors argued that the easing of restrictions aimed at curbing transmission should be considered.	population of Geneva remained uninfected despite the high prevalence of COVID-19 in Geneva and that a significantly lower seroprevalence was observed for children aged 5-9 years and adults older than 65 years, compared with those aged 10-64 years.	Lancet. 2020;396(10247):313-319. doi:10.1016/S0140-6736(20)31304-0
Breastfeeding, skin-to-skin contact, neonatal care, neonates, childbirth, patient education,	1-Aug-20	Skin-to-Skin Care and COVID-19	Pediatrics	Article	Many physicians and mothers find themselves weighing the unknown risk of transmitting SARS-CoV-2 against the known costs of separation from an infant during the first days of life. The American Academy of Pediatrics recommends mothers with COVID-19 to physically separate from the infant whenever space allows, while the WHO encourages breastfeeding initiation within an hour of birth and routine newborn care with emphasis on respiratory and hand hygiene. Limited evidence suggests risk of transmission from mother to child is low; therefore, the potential benefit of isolation does not necessarily justify denying the known health benefits of skin-to-skin contact and breastfeeding. The author recommends policies that allow for patient choice in light of incomplete evidence and calls for maternal protections that minimize risk before and after delivery such as paid parental leave and safety-net programs for vulnerable families.	This article weighs the known benefits of skin-to-skin contact and breastfeeding with infants during the first days of life against incomplete evidence that suggests low risk of SARS-CoV-2 transmission. The author recommends informed patient choice.	Boscia C. Skin-to-Skin Care and COVID-19. [Published online, 2020 Aug 1]. Pediatrics. 2020;146(2):e20201836. doi:10.1542/peds.2020-1836
Pediatric, cardiology, myocarditis, USA	1-Aug-20	Acute Fulminant Myocarditis in a Pediatric Patient With COVID-19 Infection [Free Access to Abstract only]	Pediatrics	Comment	A significant portion of patients with COVID-19 have cardiac injury in addition to pulmonary disease. A high incidence of myocarditis has been documented in the adult population. Pediatric disease from COVID-19 has been relatively rare, and no cases of virus-related cardiac disease have been published. The authors present a case of an adolescent girl (age 12 years old) with fulminant myocarditis with complete heart block, elevated troponin I levels, and severely depressed systolic function in the setting of COVID-19 infection. The case was complicated by the	Cardiac involvement in the setting of COVID-19 is common and likely present in one-third of hospitalized adults with this infection. The authors present a case of pediatric COVID-19 complicated by fulminant myocarditis.	Lara D, Young T, Del Toro K, et al. Acute Fulminant Myocarditis in a Pediatric Patient With COVID-19 Infection. [published online, 2020 Aug]. Pediatrics. doi:10.1542/peds.2020-1509

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					patient's concurrent adenovirus infection, and the authors state that they cannot definitively link her COVID-19 infection with her myocarditis. The authors discuss the possible etiologies of cardiac involvement in COVID-19. Overall, with this case, the authors sought to highlight that cardiac injury is an important feature of patients with COVID-19 and may be present in the pediatric population.		
Polymorphic eruption of pregnancy	1-Aug-20	Polymorphic eruption of pregnancy as a possible COVID-19 manifestation	Dermatologic Therapy	Letter	The authors report the case of a 32-year-old Caucasian woman who, five days after eutocic delivery, presented with a pruritic rash on her abdomen and breasts. Ten days prior to childbirth the patient tested positive for COVID-19, with symptoms limited to headache and diarrhea. The patient's dermatological presentation was consistent with the diagnosis of "Pruitic Urticarial Papules and Plaques of Pregnancy" (PUPPP), an extremely rare finding in women during the postpartum period. The patient reported a fever, headache and diarrhea as having started concurrently with the cutaneous rash, leading authors to assume a role of SARS-CoV-2 in its pathogenesis. Furthermore, prompt regression of the rash following high doses of corticosteroids resulted in a suspected hypersensitivity reaction against viral antigens as a possible pathogenetic mechanism.	The authors conclude that COVID-19 cutaneous manifestations in pregnant and lactating patients have not been sufficiently investigated. This case suggests that hormonal and immune changes characteristic of pregnancy could affect COVID-19 cutaneous manifestations and it would be advisable to investigate them, particularly in this critical period of the pandemic.	Proietti I, Bernardini N, Tolino E, et al. Polymorphic eruption of pregnancy as a possible COVID-19 manifestation [published online ahead of print, 2020 Aug 1]. <i>Dermatol Ther.</i> 2020;10.1111/dth.14117. doi:10.1111/dth.14117
pregnancy, universal testing, labor and delivery	1-Aug-20	Is Universal Testing for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Needed on All Labor and Delivery Units?	Obstetrics and Gynecology	Editorial	The author sought to evaluate whether universal screening for SARS-CoV-2 infection in pregnant women is justifiable by reviewing the benefits and risks if such a measure were implemented. According to the author, much of the push for implementation of universal screening with SARS-CoV-2 PCR hinges on avoiding unintended exposures to health care workers. Added cost of the screening program is weighed against lost workforce on medical leave if infected by the virus. In addition, universal testing for SARS-CoV-2 on labor and delivery units may provide a lens through which population-level surveillance can be accomplished. Yet, there is legitimate concern for unintended consequences to the patient such as stigmatization in society, additional implications of risk to the neonate and discussions of maternal–newborn separation based on maternal SARS-CoV-2 infection status. Furthermore, the increased time spent donning appropriate PPE when working with patients with SARS-CoV-2 infection could lead to delays in care or changes in medical decision making which could result in unintended harms to the mother or fetus. Therefore, the author suggests that decisions regarding universal testing need to be made not only in the context of regional prevalence of COVID-19 infection, but also after weighing the risks, benefits, economic burden, and unintended consequences of testing for SARS-CoV-2 infection.	Obstetricians should remain aware of disease prevalence in their communities and consider universal screening of asymptomatic women on an ongoing basis as new “hot spots” for COVID-19 infection are identified.	Metz TD. Is universal testing for severe acute respiratory syndrome Coronavirus 2 (SARS-CoV-2) needed on all labor and delivery units? <i>Obstet Gynecol.</i> 2020;136(2):227.

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Pregnancy, venous thromboembolism, DVT, PE, VTE, thromboprophylaxis, cancer	1-Aug-20	Prevention of Venous Thromboembolism in 2020 and Beyond	Journal of Clinical Medicine	Review Article	Venous thrombo-embolism (VTE), the third most common cause of vascular mortality worldwide, includes deep-vein thrombosis (DVT) and pulmonary embolism (PE). In this review, the authors discuss how an understanding of VTE epidemiology and the results of thromboprophylaxis trials have shaped the current approach to VTE prevention. They review modern thromboprophylaxis as it pertains to genetic risk factors, exogenous hormonal therapies, pregnancy, surgery, medical hospitalization, cancer, and what is known thus far about VTE in COVID-19 infection.	Advancements in the understanding of venous thrombo-embolism have allowed patients considering pregnancy to be accurately informed about their risk. COVID-19 patients should routinely receive preventative anticoagulant treatment when the benefits of such treatments are known to outweigh the risks.	Nicholson M, Chan N, Bhagirath V, Ginsberg J. Prevention of Venous Thromboembolism in 2020 and Beyond. [published online, 2020 Aug 1]. J Clin Med. doi:10.3390/jcm9082467
Coronavirus disease 2019; Transmission Dynamics; Clinical Characteristics; Children; China	1-Aug-20	Clinical and transmission dynamics characteristics of 406 children with coronavirus disease 2019 in China: A review	Journal of Infection	Review Article	The authors reviewed 37 articles analyzing the demographic, epidemiological, clinical, laboratory and CT image data of 406 children with COVID-19. Ages ranged from 2 days to 16 years, with a median age of 7 years. Among them, 67 cases (16.5%) were <1 year old, 76 cases (18.7%) were 1 to 5 years old, 94 cases (23.2%) were >5 to 10 years old, 66 cases (16.3%) were >10 to 16 years old, and the age classification was unknown in 103 cases (25.4%). The most common symptoms were fever (n=206; 50.7%), cough (n=172; 42.4%); pharyngeal redness (n=128; 31.5%), and shortness of breath (n=57; 14.0%). Seventy-seven (19.0%) of cases were asymptomatic, and 105 (25.9%) were mild. Seven (1.7%) cases progressed to critical illness. Of the 406 children, 8 of them had underlying diseases, and 5 of these progressed to critical illness, with one fatality. Children contracted the infection from a family member in 88.4% of cases. Lab tests and CT imaging appeared less abnormal in children than adults with COVID-19. The authors also raise questions about a possible digestive mode of SARS-CoV-2 transmission. Since many children with COVID-19 have mild or no symptoms, this article warns that they could be an unrealized source of infection for others. The article closes by discussing the promising trials of antiviral treatments and IV immunoglobulin treatments for COVID-19.	Based on this review, children with COVID-19 have milder illness, more subtle lab and imaging findings, faster recovery and a better prognosis than adults with the infection. The authors argue that efforts should be made to prevent children from becoming a hidden source of transmission in kindergartens, schools or families.	Zhen-Dong Y, Gao-Jun Z, Run-Ming J, et al. Clinical and transmission dynamics characteristics of 406 children with coronavirus disease 2019 in China: A review. J Infect. 2020;81(2):e11-e15. doi:10.1016/j.jinf.2020.04.030
Late pregnancy, maternal outcomes, neonatal outcomes, China	1-Aug-20	Unfavorable outcomes in pregnant patients with COVID-19	Journal of Infection	Letter to the Editor	Currently, it is too early yet to explicitly determine the effects of SARS-CoV-2 on pregnant women and fetuses. In this article, the authors explored the outcomes of COVID-19 in pregnant patients (n=8) from China. Five patients (62.5%) developed mild symptoms. Three patients (37.5%) showed severe or critical illness requiring ICU admission, one of whom required ECMO support. Four patients (50%) underwent an emergency delivery because of fetal distress or premature rupture of the membrane (PROM). Six live births and one stillbirth were analyzed. Half of	The authors describe poor maternal and neonatal outcomes in a cohort of eight pregnant patients with COVID-19 from China. They concluded that despite all live births testing negative for SARS-CoV-2, one stillbirth and	Huang W, Zhao Z, He Z, et al. Unfavorable outcomes in pregnant patients with COVID-19. [published online, 2020 Aug]. J Infect. doi:10.1016/j.jinf.2020.05.014

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					the live births were premature and admitted to NICU. One neonate died at 18 days old with severe pneumonia. RT-PCR tests for all live births were negative for SARS-CoV-2. Unlike previous reports with favorable outcomes, the authors present cases of COVID-19 in pregnancy that resulted in severe maternal and neonatal outcomes. Therefore, they recommend that suspected COVID-19 cases during pregnancy should be systematically screened with close follow-up of mothers and fetuses after diagnosis.	one neonatal death indicate the potential risk of intrauterine infection.	
Gender inequality, indirect impact, reproductive healthcare, maternal health	1-Aug-20	The indirect impact of COVID-19 on women	The Lancet	News desk	While mortality rates from COVID-19 are higher for men than for women, women are more likely to bear the brunt of the social and economic consequences of the pandemic. For example, a report by the Institute for Fiscal Studies found that mothers in the UK were 1.5x more likely than fathers to have either quit their job or lost it during the lockdown. As countries all over the world locked down, jobs in the informal economy, a large contributor to female employment, quickly disappeared. The author describes several other indirect impacts of the pandemic on women and girls including domestic abuse, school closures, access to reproductive services, and maternal health. The author closes by stating that people worldwide face a precarious future as a result of the COVID-19 pandemic and that a lack of commitment to gender inequality will lead to a large, negative impact on women across the globe.	The COVID-19 pandemic has the potential to have disproportionate indirect impacts on the lives of women and girls worldwide. Issues to consider include increased domestic abuse reports, decreased access to reproductive services, and increased unemployment.	Burki T. The indirect impact of COVID-19 on women. [published online, 2020 Aug 1]. The Lancet. doi:https://doi.org/10.1016/S1473-3099(20)30568-5
Contraception, gender-based violence, abortion services, lockdown, inequality, gender disparities	1-Aug-20	COVID-19 has “devastating” effect on women and girls	The Lancet	Global Report	As the COVID-19 pandemic spread, many countries implemented lockdowns and travel restrictions to slow transmission. In doing so, some governments, in contradiction to guidance by the WHO, closed sexual and reproductive health services. Marie Stopes International (MSI), which works in 37 countries, predicted that closure of their services, especially in India and Nepal, would result in up to 9.5 million vulnerable women and girls losing access to contraception and safe abortion services in 2020, which could result in as many as 2.7 million unsafe abortions and 11,000 pregnancy-related deaths. There is concern that the disruption in global supply chains for contraception could also result in more sexually transmitted infections, including HIV. In addition, there is growing evidence of increased gender-based violence during the pandemic. In Colombia, reports of gender-based violence during lockdown increased by 175%. Telehealth services, such as those implemented in the UK, South Africa, and Australia have helped improve access to safe services, but the author concludes that policy change and innovative strategies must continue to mitigate the impact of COVID-19 on sexual and reproductive health.	This report cautions that pandemic lockdowns and restrictions in sexual and reproductive health services will likely have a widespread detrimental impact on the lives of women and girls globally. There is growing evidence of loss of access to contraception, safe abortion services, and increasing gender-based violence.	Cousins, Sophie. COVID-19 has “devastating” effect on women and girls [published 2020 August 1]. The Lancet. 2020; doi:10.1016/S0140-6736(20)31679-2
Pregnancy, neonate, mother-	1-Aug-20	Overview of the Care of Mothers	Advances in Neonatal Care	Position Statement	This article describes a joint position statement from the National Perinatal Association and National Association of Neonatal	This article reflects on a position statement	Moore TA. Overview of the Care of Mothers and Newborns With

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newborn dyad, nursing, USA		and Newborns With COVID-19: Joint Position Statement			Nurses. The purpose of the joint statement is to guide healthcare providers, including neonatal nurses, when care requires balancing optimal care immediately after birth with infectious disease practices amidst a pandemic. As information is changing rapidly, the author also recommends that neonatal nurses remain informed on current research. Other recommendations for nurses are to provide the professional and unique perspective from nursing in the development and implementation of inpatient care plans, and to understand, respect, and advocate for maternal/family values, needs, and preferences.	providing guidelines for care of the mother-newborn dyad during the COVID-19 pandemic.	COVID-19; Joint Position Statement. Adv Neonatal Care. 2020;20(4):268. doi:10.1097/ANC.0000000000000776
Pediatric, MIS-C, treatment, evaluation, USA	1-Aug-20	Multisystem Inflammatory Syndrome in Children: Survey of Early Hospital Evaluation and Management	medRxiv	Preprint (not peer-reviewed)	In the absence of evidence-based therapies for MIS-C, the authors sought to describe the evaluation and treatment of MIS-C at hospitals in the USA. They conducted a cross-sectional survey from 16 June-16 July 2020 of pediatric hospitals in the USA (n=40) regarding their protocols for MIS-C. About half (21/40) of centers required only one day of fever for MIS-C diagnosis to be considered. Intravenous immunoglobulin was the most widely used medication to treat MIS-C (98% of centers). Corticosteroids were listed in 93% of protocols for primarily moderate or severe cases. Aspirin, heparin, anakinra, and vasopressors were present in protocols with use depending on case severity. Nearly all centers (39/40) recommended follow up with cardiology. There were similar findings between centers that had treated >5 patients compared to those that had treated <5 patients. The authors found many similarities with some key differences between hospital protocols for MIS-C.	This study describes the protocolized evaluation and treatment of children with MIS-C at 40 hospitals in the USA. These findings can help other hospitals create their own MIS-C protocols.	Dove M, Jaggi P, Kelleman M et al. Multisystem Inflammatory Syndrome in Children: Survey of Early Hospital Evaluation and Management. [published online, 2020 Aug 1]. medRxiv. doi:https://doi.org/10.1101/2020.07.29.20164459
Pregnancy, racial disparities, perinatal care, public health, USA	1-Aug-20	Mobilizing a Public Health Response: Supporting the Perinatal Needs of New Yorkers During the COVID-19 Pandemic	Maternal and Child Health Journal	Commentary	This article shares the experiences of several staff members of the New York City (NYC) Department of Health and Mental Hygiene during the COVID-19 pandemic in the USA. They were involved in providing care, services, and programming to directly address the needs of pregnant and parenting New Yorkers. They contend with ongoing racial inequalities in maternal mortality in addition to the disproportionate impact of the pandemic on Black and Brown people. The article includes perspectives from a midwife, doula, nurses, and public health specialists. Overall, the authors state that the COVID-19 pandemic has exacerbated longstanding racial and ethnic inequities in perinatal outcomes in NYC. They put forth a call of action to advocate for increased attention and funding for services for those who giving birth and those caring for newborns.	Motivated by their experience in NYC during the COVID-19 pandemic, the authors argue for a need to transform perinatal care including full integration of midwives, support for non-hospital births, and doula support.	Claudio E, Donahue J, Niles PM, et al. Mobilizing a Public Health Response: Supporting the Perinatal Needs of New Yorkers During the COVID-19 Pandemic [published online, 2020 Aug 1]. Matern Child Health J. doi:10.1007/s10995-020-02984-6
Children, homelessness, health disparities, Boston, USA	1-Aug-20	Homelessness, Children, and COVID-19: A Looming Crisis	Pediatrics	Perspective	The authors describe the health challenges that face children experiencing homelessness, including the unique barriers during the COVID-19 pandemic. They summarize the racial and economic disparities that are becoming more evident due to the COVID-19 pandemic, and the health disparities that result from	The authors summarize the unique challenges facing children experiencing homelessness during the	Coughlin CG, Sandel M, Stewart AM. Homelessness, Children, and COVID-19: A Looming Crisis. Pediatrics.

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		[Free Access to Abstract Only]			these. The authors express concern that families who are homeless will increasingly present to the emergency department due to a lack of housing, which may lead to unnecessary hospitalizations in the midst of the pandemic. The authors highlight the advocacy role that pediatricians can play for vulnerable families and children as policy changes that could mitigate the damage of the COVID-19 pandemic are pursued.	COVID-19 pandemic, and the need for advocacy and policy solutions to mitigate the detrimental impacts of the pandemic.	2020;146(2):e20201408. doi:10.1542/peds.2020-1408