Correspondence

To the Editors

Covid-19 pandemic and our paediatric population - the challenges and outcome: an observational study from Eastern India

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Introduction
In the wake of the Covid-19 pandemic, among other sectors, the health system has been severely affected. The major thrust was on detecting cases and tracing contacts. The non Covid-19 cases especially ones with chronic ailments faced several challenges. The pandemic and subsequent lockdown brought the economy to a grinding halt. It caused the lack of a regular supply of prescribed drugs and an inability to seek medical help, with subsequent non-compliance, which led to complications of an otherwise stable chronic ailment. We at the paediatric rheumatology department of Vivekananda Institute of Medical Sciences conducted a brief observation of our paediatric rheumatology patients during the early part of the pandemic.

Objectives
To study the impact of COVID-19 pandemic on the paediatric rheumatology patients.

Method
Patients were contacted through telephonic calls, video calls, WhatsApp messages/calls or mail. We framed a questionnaire for patients and caregivers, comprising 2 parts:
A) Disease activity
B) Questions pertaining to COVID-19 infection
All paediatric patients registered in the paediatric rheumatology outpatient department (OPD) were enrolled in an observational study from April to August 2020.

Results
Seventy patients were registered in the paediatric rheumatology OPD but due to a variety of reasons, only 55 ultimately participated in the study. Breakdown of the 55 is shown in Table 1.

<table>
<thead>
<tr>
<th>Type of disease</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Juvenile idiopathic arthritis (JIA)</td>
<td>25</td>
</tr>
<tr>
<td>Systemic lupus erythematosus (SLE)</td>
<td>17</td>
</tr>
<tr>
<td>Periodic fever syndromes</td>
<td>03</td>
</tr>
<tr>
<td>Vasculitis</td>
<td>02</td>
</tr>
<tr>
<td>Mixed connective tissue disease (MCTD)</td>
<td>02</td>
</tr>
<tr>
<td>Juvenile onset ankylosing spondylitis (JoAS)</td>
<td>02</td>
</tr>
<tr>
<td>Reactive arthritis</td>
<td>02</td>
</tr>
<tr>
<td>Juvenile dermatomyositis (JDM)</td>
<td>01</td>
</tr>
<tr>
<td>Complex regional pain syndrome (CRPS)</td>
<td>01</td>
</tr>
</tbody>
</table>

Discussion
Our patients are chiefly from outstation and belong to the lower socio-economic group. They mainly rely on the local trains to commute to Kolkata. The pandemic with subsequent lockdown and non-running of trains made it almost impossible for them to come to Kolkata for their routine visits and their monthly ration of drugs. Loss of daily wages added to their woes and many found it difficult to continue with their medications. This was compounded by irregular availability of prescribed drugs, especially hydroxychloroquine. However, fortunately some pharmaceutical companies arranged online supply of drugs. One of our systemic onset JIA patients who had a flare did manage to visit us but she had to travel in a private vehicle which did cost her a hefty amount.
Till now 2 studies using questionnaire have been done which suggest that a substantial proportion of rheumatology patients have experienced changes to their disease management since the emergence of Covid-19\textsuperscript{3,4}.

Our study highlights the difficulties which patients with chronic diseases faced in the wake of the pandemic. This study also illustrates the wide gap between urban and rural in the health care system. Such trying times bring to light these lacunae. It raises ethical questions about the plight of patients with chronic diseases accessing health care especially in the rural setting.

References

   https://doi.org/10.1016/j.puhip.2020.100009
   PMCID: PMC7199699

   https://doi.org/10.1080/02692171.2020.1756040

   https://doi.org/10.1101/2020.04.03.20048389

   https://doi.org/10.1002/acr2.11148
   PMID: 32311836 PMCID: PMC7264613