



### 3. CLINICAL CHARACTERISTICS OF CHILDREN HOSPITALIZED WITH COVID 19 IN THE REPUBLIC OF MOLDOVA

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**Introduction.** The World Health Organization named 2019 the year of global emergency. The disease that left its mark on humanity caused by the SARS-CoV-2 virus was called COVID-19. In the Republic of Moldova, 5.1% of the population infected with SARS-CoV-2 are children, this number is double as compared with other countries. The importance of knowing the clinical characteristics, epidemiological, and laboratory features, has colossal meaning in establishing a diagnosis and treatment.

**Aim of study.** The study aims to evaluate pediatric patients with SARS-CoV-2 who were hospitalized in 7 Public Medical-Sanitary Institutions in the Republic of Moldova. This study helped us to determine clinical-epidemiological dynamics of positive cases which had an immense impact on children's health.

**Methods and materials.** We made a retrospective cohort study which included 724 pediatric patients with COVID-19, aged 1-18, treated in 7 MIPH of Chişinău municipality in the Republic of Moldova. The research was carried out from March 1, 2020, until June 30, 2021, based on a standardized form. Patients who tested positive by RT-PCR test are registered in the server of SUMPh „*Nicolae Testemitanu*” named "Electronic register of evidence patients with COVID-19".

**Results.** After carrying out the study was determined that 51.66% of patients were girls and 48.34% were boys, the predominance of the female sex does not represent a diagnostic criterion. A total of 724 patients, we determined that children aged 0-1 years constitute 15.06%, 2-5 years - 24.59%, 6-10 years - 22.93%, 11-15 years - 24.45%, 16-18 years - 12.98%. Most of the patients included in this study predominated from the urban region 69.89% because accessibility to medical services is bigger, and the rural region constituted 30.11%. Most of the infected children show clinical signs of a fever higher than 38°C - 35.52% (249 patients), 37-38 °C - 51.07% (358 children), asthenia 45.22% (317 children), headache with a weight of 24.54% (172 children), other clinical manifestations such as drowsiness, rashes, arthralgias, myalgias, vertigo, and ageusia are much less common. Most patients had moderate forms of disease 83.29%, severe forms 8.56% of children, mild forms 8.15%.

**Conclusion.** The source of infection with SARS-CoV-2 remains unexplained in every 4th case of COVID-19 disease in children, which contributes to the uncontrolled spread of the infection. Children mainly acquire SARS-CoV-2 infection from their family members, but they seem to experience a less severe form of the disease than adults. The prognosis is favorable and recovery occurs 1 - 2 weeks after the onset of the disease. In most cases hospitalized children develop moderate clinical forms of COVID-19. The mean age of children with severe form is lower compared to those with moderate or mild form, the gender of patients does not influence the course of the disease. The evolution of pediatric COVID-19 infection is favorable, discharge from MIPHS is done in most cases in the absence of clinical manifestations, children being considered cured by the specialist doctor.