

## VCHIP CHAMP VDH COVID-19

July 21, 2021 2021 | 12:15-12:45pm Call Questions and Answers\*

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### **Practice Issues: AAP COVID-19 Guidance for Safe Schools, Rebecca Bell, MD**

*Dr. Becca Bell:* Media is latching on to a so-called discrepancy between CDC and AAP guidance with regards to schools and masking. That confuses and frustrates people. It frustrates parents. It frustrates the public. I am trying to simplify things and say, "They're not really divergent in content." What I say in response to "why is the CDC guidance different than the AAP's?" is that the CDC guidance is really saying "For sure, all unvaccinated people over the age of 2 need to be masked indoors." That's their guidance. I then say, "The AAP looked at that, and we're pediatricians. We're really involved in school health. We work closely with schools. When you think about how to implement that, the way to implement that in a practical way is to say 'Everyone in schools needs to be masked.'" That frame kind of lowers this angst about their being discrepancies between the guidance. It's not so much that the CDC came out and said, "Vaccinated people don't have to mask indoors." The real focus was on unvaccinated folks having to be masked indoors and inside schools. The way to do that, because there is no mechanism by which to know who is unvaccinated and who is not, is to mask everyone.

I talked a little bit about how AAP has so many pediatricians working really closely with our schools and school nurses in Vermont and nationally. We're thinking about how to roll out the CDC guidance in a practical way. That's how I've been framing it because people tend to shut down when they're hearing about sources of conflicting guidance. It's really not conflicting. I also talk about trying not to make this seem like a big difference. Last year in Vermont, we know that the measures we took in schools worked pretty well. Masking helped reduce the spread of COVID in the schools. It also helped reduce the spread of other respiratory viruses, which can make kids really sick and can be very disruptive to school. Masking in schools is not a new thing, since everyone did it last year. We will continue masking because that worked last year. We will keep doing it this year. Keep focusing on our shared goals and vision. Last year was a tough year for kids. Kids, educators, teachers, and staff all deserve to have a smooth, consistent, productive year, a safe and healthy year in schools. The way to keep kids in school, the way to minimize disruption, is to reduce the spread of COVID and other respiratory viruses in a school environment.

This is another opportunity for everyone to make a plea for those who are eligible to be vaccinated to get vaccinated. Saying "The Delta variant is serious. It's more transmissible." We're talking a lot about how to minimize risk to everyone and the most vulnerable.

For the summer camps, especially those happening in schools, there was a lot of not masking going on. I know in some school districts there was bullying kids that were choosing to mask. Some kids who are eligible and want to be vaccinated can't because their parents don't want them to, and they can't get the vaccine without their parents permission. To make an equitable, safe, healthy year, masking in schools just makes sense.

\*Note: This is a paraphrased synopsis of the call and is not a word-for-word transcription.

## Questions/Discussion

### **Q: Have the deaths remained only in elderly or are we seeing that range lower?**

*A: Wendy Davis, MD, VCHIP (verbally): Due to the small number of deaths, VDH isn't able to share the age range for deaths due to privacy concerns, but we are aware that many hospitalizations are among the younger age ranges of unvaccinated children.*

### **Re: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Rhinovirus has arrived (20% + rate in samples at UVM) and RSV (10% positive rate) in children tested. We are not detecting other respiratory viruses.**

*C: Alex Bannach, MD, North Country Pediatrics: Up here (North Country Pediatrics) we are also definitely seeing rhino, some kids surprisingly ill, also some parainfluenza.*

*C: Wendy Davis, MD, VCHIP (verbally): That lines up with what we are seeing with severe upper respiratory infections in children ending up in the ICU.*

*C: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): Increased positivity rate and cases. I was working per diem locally the last 2 weeks and sent many COVID tests in pediatrics, all negative.*

*C: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): Bill, I agree. I saw a lot of bronchiolitis, RSV, and RSV negative in the office that I was covering and much of what I expect was Rhino. Super busy for July.*

*C: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): Alex, I saw lots of croup in the pediatric population these last 2 weeks locally as well*

*C: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: There is generally a lag as it takes time to do the sequencing.*

*C: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: The RSV data is a bit wonky because we are not seeing many of the other usual winter respiratory viruses (e.g., influenza) so the % positive seems quite high.*

### **Q: Does anyone know if Burlington wastewater is still being tested for certain variants?**

*A: Wendy Davis, MD, VCHIP: I do not know the answer to that. I have not heard the Mayor speak about it recently, but I know we can find that out.*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: My contact has left the Mayor's office. He was supportive of continuing testing (and other things too) but not sure.*

### **Re: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): IT was great; I was testing in the office. Many parents were not vaccinated.**

*C: Ellen Gnaedinger, APRN, South Royalton Health Center: In the past week, six preschool kiddos with fever & cough, RSV negative, one with croup. All COVID negative thus far.*

*C: Susan Sykas DNP, Appleseed Pediatrics: Similar pediatric illnesses in our office.*

*C: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): I was excited to test patients, but not excited that parents were not vaccinated and firm on never getting vaccinated, which is not good.*

**Re: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: The data suggests parents who are firm in their own belief are less likely to immunize their children. :(**

*C: Susan Sykas DNP, Appleseed Pediatrics: On a positive, many of my parents are vaccinating.*

*C: Ellen Gnaedinger, APRN, South Royalton Health Center: Most of parents I ask are vaccinated against COVID, counseling with all others.*

*C: Alex Bannach, MD, North Country Pediatrics: Ellen, agree, using every patient encounter still to address vaccine hesitancy, many teens/YA are not vaccinated yet. I feel that talking about Delta variant helps sway some of them towards getting vaccine.*

*C: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): With vaccine resistant parents, I also talk about that wedding in Texas that required vaccine and the Delta variant. Some parents will not budge unless it is mandated.*

*C: Susan Sykas DNP, Appleseed Pediatrics: Beyond the Delta variant, people need to learn the research on this vaccine was not just this year but lots of research was done years ago, just brought to forefront now. People think it is just experimental versus well researched!*

*C: Wendy Davis, MD, VCHIP (verbally): Great point. That was brought out in those parent-family forums, and we still have those materials posted if you want to draw on those.*

**Re: Stephanie Winters: I have outreached to BCBSVT on this Synagis topic as well.**

**Re: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Yes We meet tomorrow AM to discuss masking and other issues; heard from ChAD as well this AM.**

*C: Susan Sykas DNP, Appleseed Pediatrics: Keep it simple. Mask everyone since we know it helps.*

*C: Elliot Rubin, MD: CDC was also using no mask for vaccinated as a carrot to get everyone vaccinated.*

*C: Susan Sykas DNP, Appleseed Pediatrics: Right, Elliot.*

*C: Colleen Moran, MD, Appleseed Pediatrics: I fully agree with AAP guidance masks for all in schools. Lots of parents feel the same way - would only send to school if masks required*

*C: Carolyn Lorenz-Greenberg, MD, MPH, Central Vermont Medical Center, Pediatric Primary Care: totally agree with the AAP on this.*

*C: Alex Bannach, MD, North Country Pediatrics: I am glad to see the AAPs guidance. It makes me feel supported in the conversations I have been having with parents all along.*

**Q: Thanks, Becca! I had one parent say, regarding the masking preventing other respiratory illnesses, that "kids need to get sick and strengthen their immune system." How do you respond to that? I talk about my time living in Japan during the H1N1 pandemic, but I cannot get through. Any advice?**

*A: Becca (Rebecca) Bell, MD, UVM Medical Center: Shannon, I would say that a lot of these respiratory viruses are those we get every year. It is not like you get RSV once and then you're immune and never get it again.*

*A: Stephanie Winters, Vermont Medical Society: I think a lot of people are thinking that if not exposed to some of these viruses then if you do come in contact you will get sicker.*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Immunization is ALWAYS better than natural disease. Exposure has NOTHING to do with strengthening the immune system and natural infection with respiratory viruses does not give much protection against the virus in subsequent years.*

*A: Shannon Hogan, DO, UVM Medical Center, Pediatric Primary Care (Burlington): Bill, I often tell parents this with COVID that immunity due to vaccination lasts longer than natural immunity, which swayed some in the beginning to get vaccinated.*

**Q: I find some backlash on masking in schools from other physicians not in pediatrics. Any thoughts?**

*A: Lori Racha, MD, UVM Medical Center, Pediatric Primary Care (Burlington): Masks avoid stigma of those kids who cannot get vaccine w/o guardian approval.*

*A: Kristan Outwater, MD, Brattleboro Primary Care, Pediatrics: I would remind parents that pre pandemic there were children that died due to influenza and RSV and last year those rates were very low, proving that if we want to we can prevent many deaths in children from respiratory illnesses. Why wouldn't we?!*

*A: Carolyn Lorenz-Greenberg, MD, MPH, Central Vermont Medical Center, Pediatric Primary Care: If there is any way we as pediatricians in the state can help lobby for masks in schools this fall, please let us know.*

**Q: Any recs around the rapid COVID testing that is available in a lot of offices --- efficacy -- I have heard anecdotal many false negatives when patients have PCR as well.**

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Colleen, it depends a bit on the kit used. We have used them in populations that are surveyed frequently.*

*A: Colleen Moran, MD, Appleseed Pediatrics: Higher false negative with variants.*

*A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: We tend not to use them in low prevalence areas for a one off unless high pre-test probability.*

*A: Colleen Moran, MD, Appleseed Pediatrics: Helpful, thank you.*