September 10, 2020

Revised message from the PHO re: multi-system inflammatory syndrome in children

This message is being sent to all registrants on behalf of Dr. Bonnie Henry, provincial health officer. Additions to an earlier version of this message sent on August 28, 2020 are noted in red.

Dear physicians and surgeons,

I have received reports of children and adolescents in British Columbia presenting with a syndrome that could have been COVID-19 associated multi-system inflammatory syndrome in children (MIS-C). While no case has been linked to COVID-19, it is important that we track this closely to inform parents and clinicians about this syndrome in BC.

Therefore, I am hereby providing notice of a duty to report each suspected incidence of MIS-C and information about each incidence to the medical health officer in your regional health authority.

Description of MIS-C and the information to be reported

Incidences of people with MIS-C are to be promptly reported to the medical health officer and include any cases with onset since January 1, 2020.

Patients to be reported are children and adolescents 0-19 years of age requiring hospitalization with fever ≥ 3 days

AND two of the following:
• acute gastrointestinal symptoms (abdominal pain, vomiting, diarrhea)
• rash or bilateral non-purulent conjunctivitis or muco-cutaneous inflammation signs (oral, hands or feet)
• hypotension or shock
• features of myocardial dysfunction, or pericarditis, or valvulitis, or coronary abnormalities (ECHO findings or elevated Troponin/BNP/NT-proBNP)
• evidence of coagulopathy (abnormal PT, PTT, elevated d-dimer)

AND

Elevated markers of inflammation such as ESR, C-reactive protein, or procalcitonin

AND

No other obvious microbial cause of inflammation, including bacterial sepsis, staphylococcal or streptococcal shock syndromes, or no alternative plausible obvious diagnosis.

Such people should be tested for evidence of SARS-CoV-2 infection (by PCR test and serology) and asked about exposure to others with COVID-19.

The information to be reported about each incidence includes:

• first name
• last name
• personal health number
• phone number
• sex
• date of birth
• age (in years)
• date of symptoms onset
• health care facility contact (i.e. name of hospital or clinic at which patient was assessed/admitted)
• name and contact information of reporting health professional

Please refer to the BCCDC website for the following resources:

• case report (surveillance) form
• case definition criteria
• clinical guidance
Thank you for your continued support of measures to prevent and manage COVID-19 in BC.

Sincerely,

Bonnie Henry, MD, MPH, FRCPC
Provincial Health Officer
Ministry of Health