

Recommendations for returning to school or day care for children with chronic illnesses or kidney diseases

We understand this is a stressful time for parents, particularly for those with children who suffer from chronic illnesses. There are still many unknowns about COVID-19, which we continue to learn more of daily.

The risk of serious illness from COVID-19 in children is low. Very few children have been hospitalized for COVID-19 infections in Canada, where no deaths have been reported. We are still learning about the virus and its effects on children with chronic illness.

Transmission of viruses between children and from children to adults is common with other types of viruses, so similar transmission with COVID-19 is possible. However, there is also good reason to believe children may be less likely to catch and transmit COVID-19 than other viruses. It is important to recognize we will be living with COVID-19 at least until an effective vaccine is developed. Every family will have to weigh the risks of staying isolated at home against the risks of returning to school or daycare. It is NOT compulsory to send your child back to school/daycare right now. Every family has to make this decision based on what feels right for them. There are also risks related to isolating children at home, especially for prolonged periods.

Children with chronic illnesses

Most children with chronic illness are at low risk of complications from the COVID-19 infection. But we will recommend that some children do NOT to return to school this academic year. Eventually, nearly all children will likely return to school/daycare but, until then, we suggest a cautious approach that would see healthier children return first.

Children followed at the MCH for chronic health conditions **can go to school** and should not develop significant symptoms from COVID-19. However, children with severe forms of disease who may be more affected by COVID-19 and who should stay home until the end of this academic year. **If your child has any symptoms that may be caused by COVID-19, they should NOT go to school** (these symptoms include fever; cough; stuffy nose; runny nose, sore throat, headaches with muscle aches, vomiting or diarrhea).

If you are keeping your child home for health reasons, healthy siblings may be able to return to school/daycare (this is NOT compulsory) and parents can return to work. It is essential to maintain frequent, effective hand washing for 20 seconds with soap and water and social distancing (keeping 2 meters distance from others). Anyone going out in public needs to practice social distancing and frequent effective hand washing, including when returning home.

If a healthy sibling develops any symptoms **that may be caused by COVID-19** (see list above), they should be isolated in the home, if possible, away from the child with the chronic condition and should not go to school/daycare. Transmission of the virus from person to person in the

same home is reduced if the sick person is isolated from the others and people in the home wash their hands often.

Children need to follow these physical distancing and handwashing recommendations while at school/daycare, and when they return home. Right now, masks are not essential when leaving the house, but should probably be used when it is not possible to ensure 2-metre physical distancing. We understand masks may be difficult to use with young children, which makes social distancing and handwashing essential.

It is difficult for our teams to answer every question, which is why we invite you to read the sections below before calling your doctor or nurse. If you **do not feel comfortable** sending your child to school/daycare after reading our recommendations, please think of keeping your child at home.

If you still have questions after reading this, please contact us (contact information for each department is included in guidelines below.)

Nephrology/ Kidney Diseases

The majority of children followed by our clinic because of chronic kidney conditions **can go to school** and should not develop significant symptoms from COVID-19.

However, we recommend children with kidney disease who are immunocompromised (have a weak immune system) should **NOT** return to school in this academic year. This includes:

- 1) Children being treated with hemodialysis or peritoneal dialysis; these children are considered immunocompromised.
- 2) Children who are immunocompromised due to the treatment they receive for kidney disease. Children who take daily medications to suppress the immune system are considered immunocompromised.

The medications commonly used to suppress the immune system include:

- Prednisone or predisolone
- tacrolimus (Prograf, Advagraf)
- MMF (Cellcept, Myfortic, mycophenolate mofetil)
- Azathioprine
- Sirolimus (Rapamune, rapamycin)
- Everolimus
- Cyclosporine
- Cyclophosphamide

- 3) Children receiving regular infusions of medications that affect the immune system are also immunocompromised. These include:
- Rituximab (Rituxan)
 - Eculizumab (Soliris, Eliziria)
 - Tocilizumab
 - Infliximab (Remicaid)
- 4) The most common kidney conditions treated with immune suppressing medications are:
- Kidney transplants
 - Nephrotic syndrome
 - Systemic lupus erythematosus
 - IgA nephropathy
 - Henoch-Schonlein purpura nephritis
 - Glomerulonephritis of other kinds
 - Atypical hemolytic uremic syndrome

If your child is taking medications daily or every second day for one of these conditions and you do not see the name of the medication on this list or you are unsure whether they are immunocompromised, please contact us.

If your child has one of these conditions but is **not** being treated with any of these medications on a daily or every second day basis, they may safely return to school.

What about siblings (brothers and sisters)?

We also recommend that siblings of immunocompromised children should not return to school this academic year. If this is not possible, precautions should be taken to protect the immunocompromised child, including hand hygiene and physical distancing within the family home.

Children with other kidney conditions

It is unclear how COVID-19 affects the kidneys. Adults who are sick with COVID-19 often have signs of kidney involvement such as small amounts of blood and/or protein in the urine. These usually recover once the person gets better. However, it only appears those with a loss of kidney function who become critically ill. Loss of kidney function may happen with any critical illness (not just with COVID-19) so it hard to tell whether it is really caused by COVID-19.

Children with mild kidney conditions do **not** appear to have any higher risk of kidney problems from COVID-19. Children with the following kidney conditions **can safely return to school!**

- Recurrent urinary tract infections
- Hydronephrosis (swollen kidney)



- Vesicoureteral reflux
- Single kidney
- Multicystic dysplastic kidney
- Horseshoe kidney
- Kidney stones
- Hypertension (high blood pressure)
- Kidney dysplasia
- Chronic kidney disease Stages 2-4 (this means mildly to moderately reduced kidney function)

If you still have questions, please contact the Department of Nephrology at 514-412-4461.