

Returning to school or day care for the child with respiratory disease

We understand that this is a very stressful time for everyone, particularly for parents with children who have respiratory problems. There are still many unknowns about COVID-19, and we continue to learn more daily. We share your concerns and will try to provide as many as possible.

If you **do not feel comfortable** sending your child to school after reading this, you should keep your child at home. We also realize that not everyone is in a situation that enables one parent to stay home with children. In these situations, where children must return to school, good hygiene including social distancing and frequent, effective handwashing for 20 seconds with soap and water are essential.

The majority of the children followed by Respiratory Medicine at the Montreal Children's Hospital **can go to school** and should not develop significant symptoms from COVID-19. However, there are particular conditions or severe forms of disease in some children, and they may be more affected by COVID-19. As detailed below, we recommend those children stay home.

Healthy siblings can return to school. Of course, they need to practice good hygiene, including social distancing at school and effective handwashing, after coming home.

In situations where we think your child can return to school, you can also return to work. In situations where we recommend that your child stays home, you may still return to work but practice good hygiene, including social distancing at work, effective handwashing, and showering and changing clothes once you've arrived home.

To simplify matters, we would like to address the most common conditions of the patients we follow.

Asthma

The Canadian Thoracic Society has recently published guidelines concerning asthma and COVID-19: https://cts-sct.ca/wp-content/uploads/2020/04/Final_CTS-COVID-19-Asthma-Position-Statement.pdf. **Most children who have asthma can go to school.**

Who should not go to daycare or school?

- Children that often end up with a trip to the emergency room (once every 1-2 months) and/or hospitalization (2 or more in last year) should stay home.
- Children who have been admitted to the ICU (intensive care unit) with asthma in last 24 months should stay home.



- Those taking high doses of inhaled corticosteroids (see table below) should stay home.
- Those who are taking Xolair or other asthma injections should stay home.
- Those who regularly take prednisone (dexamethasone/cortisol) by mouth should stay home.

To determine if your child is taking a **high dose of inhaled corticosteroids**, you must know the name of the medication and the dose that your child takes regularly every day.

Here is a guide of which dose of **inhaled corticosteroids** is considered high for each brand. We are using tradenames below not as an endorsement, but to make these criteria easier to understand:

For children aged 6 and older

| Name of Medication | High dose (total daily dose) | Comment |
|--------------------|------------------------------|---|
| Alvesco | greater than 400 mcg daily | 2 puffs daily of Alvesco 200 mcg; the child can go to school or daycare. |
| Advair | greater than 400 mcg daily | 2 puffs twice daily of Advair 125/25 mcg would be high dose. The child should stay home. |
| Asmanex | greater than 400 mcg daily | 2 puffs twice daily of 100 mcg or 1 puff twice daily of 200 mcg or 1 puff daily of 400mcg; the child can go to school or daycare. |
| Flovent | greater than 400 mcg daily | 2 puffs twice daily of Flovent 125 mcg would be high dose. The child should stay home. |
| Pulmicort | greater than 800 mcg daily | 2 puffs twice daily of Pulmicort 200 mcg; the child can go to school or daycare. |
| QVAR | greater than 400 mcg daily | 2 puffs twice daily of QVAR 200 mcg; the child can go to school or daycare. |
| Symbicort | greater than 800 mcg daily | 2 puffs twice daily of Symbicort 200/6 mcg; the child can go to school or daycare. |
| Zenhale | greater than 400 mcg daily | 2 puffs of Zenhale 100/6 mcg twice daily or 1 puff of 200/6 |



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| | | mcg twice daily; the child can go to school or daycare. |
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For children aged 5 and younger

A high dose would be approximately **half** of the above. Alvesco up to 200 mcg a day total, Flovent 125 mcg twice daily and QVAR 100 mcg twice daily: the child can go to school or daycare. Any regular daily doses higher than these would be considered a high dose and your child should stay at home.

IMPORTANT: Whether you choose to have your child go to school or daycare or stay home, it is very important during this time that they take their medications regularly as prescribed.

Please note that there is a shortage of Ventolin (salbutamol) puffers, and so when you refill your prescription, it might be replaced by a dry powder formulation such as Ventolin diskus or Bricanyl. Please follow the instructions of the pharmacist for replacement carefully.

Cystic Fibrosis

The international data available to date has not demonstrated major difficulties for most people with Cystic Fibrosis. However, there are some people with Cystic Fibrosis who should stay home:

- Children less than 2 years of age;
- Children with less than 60% lung function (your nurse can tell you this if you do not know);
- Children with a recent large decrease in lung function;
- Children with frequent hospitalizations;
- Children who also have diabetes.

Bronchopulmonary Dysplasia, other chronic lung disease in young children

These following children should stay home:

- Children less than 2 years of age;
- Children with frequent hospitalizations;
- Children who do not tolerate viral infections, and these often lead to emergency room visits or hospitalization;
- Children with less than 60% lung function.

Please consult the section on Asthma if your child is older and has asthma.

Children with the need for oxygen or ventilatory support



- If your child is on oxygen for any part of the day or night or requires BIPAP or an oxygen saturation monitor, they should stay home.
- If your child has a tracheostomy and/or requires ventilatory support, they should stay home.
- If your child uses a cough assist to help remove secretions, they should stay home.

Children on CPAP for obstructive sleep apnea **can go to school or daycare** if this is their only health condition.

Primary Ciliary Dyskinesia

We don't know how people with this disease will react to COVID-19. Your child should stay home if they are under 2 years of age, or are frequently hospitalized, or have less than 60% lung function.

Sickle Cell Disease

If your child has Sickle Cell Disease of any form, the Sickle Cell Foundation recommends that they stay home. They do not need to stay home if they have Sickle Cell Trait.

Other conditions

If your child has one of the conditions listed below, they should stay home:

- less than 60% lung function;
- does not tolerate viral infections and often needs a trip to the emergency room (once every 1-2 months) and/or hospitalization (2 or more in last year);
- are otherwise immune-suppressed.

If your child has another condition, and you have questions, please contact us by phone at 514-412-4400 extension 22725 or by email at respmch@muhc.mcgill.ca.