Investigating the impact of the coronavirus (COVID-19) pandemic on children presenting to emergency departments across Europe

Submission date 06/07/2020	Recruitment status No longer recruiting	Prospectively registered[X] Protocol
Registration date 14/07/2020	Overall study status Completed	 [] Statistical analysis plan [X] Results
Last Edited 03/09/2024	Condition category Not Applicable	[] Individual participant data

Plain English Summary

Background and study aims

COVID-19 is a condition caused by the coronavirus (called SARS-CoV-2) that was first identified in late 2019. This virus can infect the respiratory (breathing) system. Ever since the first cases of SARS-CoV-2 were reported in Europe, and since the initial outbreak in Italy in February 2020, the pandemic has caused significant challenges for health care systems and the societies at large across Europe.

One of the few reassuring aspects of this pandemic might be that children don't appear to get infected as often as adults, that severe disease in children is rare, and that children appear to play a limited role in the transmission of the virus. As a result, numbers of children attending hospital emergency departments have been reported to have fallen drastically. However, the reduced numbers appear to be out of keeping with what was to be expected as a result of the government 'lockdown' policies. It is thought that, as a result of the imposed restrictions on free movements by governments, children are not cross-infecting one another with other common childhood diseases with the closure of daycare facilities and schools, that they are less exposed to air pollution triggering the respiratory disease, and that they are less often involved in high velocity, traffic-related trauma.

Also, as an unwanted effect of the pandemic, frontline clinicians are noticing an increase in delayed presentations of children with serious illness. Furthermore, cases of children presenting with an emerging Paediatric Inflammatory Multisystem Syndrome - temporally associated with Sars-Cov-2 (PIMS-TS) have been reported, with some of these children testing positive and some testing negative for SARS-CoV-2. At present, no there is no evidence to confirm these findings across multiple European countries. Therefore, it is important to describe current patterns of children presenting to paediatric emergency departments across Europe and compare these with historical data. The aim of this is to provide evidence for changes to attendance to emergency departments for children; to monitor for possible new diseases; and to understand the timeliness of their presentations in relation to the disease severity, to confirm if children are attending emergency departments later than normal during the pandemic and therefore have more severe symptoms by the time they are first seen by healthcare staff.

This study will be performed by the EPISODES study steering group, in collaboration with the European Society of Emergency Medicine and the Research in European Paediatric Emergency Medicine network.

Who can participate?

The collective data of all children presenting to the emergency departments of the participating centres during the period between January 1st, 2018 and May 1st, 2020 will be included in this trial.

What does the study involve?

This study will involve analysis of routinely collected clinical data of all children presenting to emergency departments across Europe over a 2 and half year period. The data will not be identifiable and will be collected on a monthly basis for each individual participating centre during the period spanning the COVID-19 pandemic (beginning February 2020). The historical data (from January 2018 and prior to February 2020) will be collected to serve as a comparison.

What are the possible benefits and risks of participating?

As this study does not involve any change to the care of the children whose data is included and that no individual patient data or identifiable data will be collected, there are not thought to be any risks involved in this study. It is hoped that data will show the impact of the COVID-19 pandemic on the numbers of children presenting to emergency departments across Europe and may, therefore, be used to provide advice on emergency department attendance for children, and to respond rapidly to a potential second wave of the pandemic.

Where is the study run from?

Imperial College London (UK). There are currently 40 confirmed participating sites (1-4 centres per European country) providing data for the study.

When is the study starting and how long is it expected to run for? From June to December 2021

Who is funding the study? The study is investigator-initiated and funded.

Who is the main contact? Dr Ruud Nijman r.nijman@imperial.ac.uk

Study website

https://www.eusem.org/news/564-help-research-in-paediatric-emergency-medicine-moving-forward

Contact information

Type(s) Scientific

Contact name Dr Ruud Nijman

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Additional identifiers

EudraCT/CTIS number Nil known

IRAS number 284008

ClinicalTrials.gov number Nil known

Secondary identifying numbers IRAS 284008

Study information

Scientific Title

The epidemiology, severity, and outcomes of children presenting to emergency departments across Europe during the SARS-COV-2 pandemic: the EPISODES study

Acronym

EPISODES

Study hypothesis

This study aims to describe current patterns of children presenting to paediatric emergency departments across Europe during the SARS-CoV-2 pandemic and compare these with historical data, to understand the timeliness of their presentations in relation to the disease severity, and to monitor for emerging disease entities.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 18/06/2020, UK HRA, Imperial College Research Governance and Integrity Team (Joint Research Compliance Office Office Room 221, Medical School Building, St Mary's Campus, Imperial College London W2 1NY; n.shaikh@imperial.ac.uk; +44 (0)20 7594 9484), ref: 20SM6003

Study design

Retrospective analysis of routinely collected clinical data

Primary study design Observational

Secondary study design Epidemiological study

Study setting(s) Hospital

Study type(s) Diagnostic

Participant information sheet

No participant information sheet available

Condition

Paediatric emergency department presentation

Interventions

Current interventions as of 01/04/2021:

This study will involve retrospective analysis of routinely collected clinical data of all children presenting to emergency departments across Europe over a 2 and half year period. Aggregated, anonymous data will be entered on a monthly basis for each individual participating centre during the period spanning the COVID-19 pandemic (beginning February 2020). All data will be extracted from electronic health care records by the local clinical teams. Monthly aggregated data will be entered on a validated and secure online platform (RedCap). Aggregated, anonymous data will be presented on a weekly/monthly basis where each week period will start on the first Monday (00:00 am) of that time period, through to the last Sunday (11:59 pm) of that time period. The total time period of interest will be January 1st, 2018 to May 17th, 2020 to allow for the collection of historical data (prior to February 2020) for comparison. Once the data is collected it will be analysed after the end of the period of interest.

A quota sampling design will be used to select from which 1-4 institutions from each participating European countries data will be collected. Every site lead will complete a site-specific survey to inform on hospital-specific factors and local changes to healthcare pathways induced by the SARS-CoV-2 pandemic. No data with personally identifiable data will be collected, nor any data on a patient individual level. Data will be analysed by comparing absolute numbers and percentages of children presenting to emergency departments, the severity of their presenting problems, their working diagnoses, and the patient outcomes, over time during the study period.

We will use historic datasets to calibrate time series auto-regressive integrated moving average (ARIMA) forecasting models, in order to predict the expected number of ED attendances for different conditions using national-level and local data pre- and during the COVID-19 pandemic. We will compare the forecasted trends to the observed data for the same periods of time. Site-specific surveys detailing local health care pathways, and COVID-19 related changes to these pathways, will allow for unique local mediation analysis, and the ARIMA models will be adjusted for local policy interventions on social distancing and other lockdown measures.

An extension of the study period will allow data until May 2021 to be collected.

Previous interventions:

This study will involve retrospective analysis of routinely collected clinical data of all children presenting to emergency departments across Europe over a 2 and half year period. Aggregated, anonymous data will be entered on a monthly basis for each individual participating centre during the period spanning the COVID-19 pandemic (beginning February 2020). All data will be extracted from electronic health care records by the local clinical teams. Monthly aggregated data will be entered on a validated and secure online platform (RedCap). Aggregated, anonymous data will be presented on a weekly basis where each month or each week period will start at the first Monday (00:00 am) of that time period, through to the last Sunday (11:59 pm) of that time period. The total time period of interest will be January 1st, 2018 to May 1st, 2020 to allow for the collection of historical data (prior to February 2020) for comparison. Once the data is collected it will be analysed after the end of the period of interest.

A quota sampling design will be used to select from which 1-4 institutions from each participating European countries data will be collected. Every site lead will complete a site-specific survey to inform on hospital-specific factors and local changes to healthcare pathways induced by the SARS-CoV-2 pandemic. No data with personally identifiable data will be collected, nor any data on a patient individual level. Data will be analysed by comparing absolute numbers and percentages of children presenting to emergency departments, the severity of their presenting problems, their working diagnoses, and the patient outcomes, over time during the study period.

Intervention Type

Other

Primary outcome measure

Absolute numbers of children presenting to the paediatric emergency department over the period of interest; for all children and children with different typologies (i.e. working diagnosis, age)

Secondary outcome measures

1. The severity of illness of children presenting to the paediatric emergency department over the period of interest as defined by the following criteria: percentage of children with abnormal vital parameters; high triage urgency; a composite outcome of the need for emergency medications, the need for hospital admission for >24 h, the need for PICU admission, and death 2. Change of relative incidence of children with specific diagnoses of interest and the severity of their presentation as a proxy for timeliness of presentations. Calculated from: absolute numbers of children presenting to the paediatric emergency department; the percentage of children with abnormal vital parameters; the number of cases with high triage urgency; a composite outcome of the need for emergency medications, the need for hospital admission for >24 h, the need for PICU admission, and death; over the period of interest and over an equivalent historical time period for comparison

Overall study start date

14/06/2020

Overall study end date 31/12/2021

Eligibility

Participant inclusion criteria

1. All children presenting to the emergency department during the period of interest for unscheduled health care

2. Aged between 0 and 18 years (upper age limit determined by the upper age bracket for children being assessed at the local participating centre)

3. Undergo a formal clinical assessment by advanced nurse practitioner (or equivalent) or clinician in the emergency department

4. All or part of the data of the triaging process (including vital signs), consultation, management (including diagnostics and treatment) and outcomes (including working diagnosis and disposition) routinely documented in the electronic patient record

Participant type(s)

Patient

Age group

Child

Upper age limit

18 Years

Sex

Both

Target number of participants

Between 6,000 and 60,000 per participating centre, 40 confirmed participating centres at the time of submission

Participant exclusion criteria

1. Children visiting the emergency department who are then streamed to a primary care service for the initial consultation.

2. Children presenting to the emergency department for scheduled health care or a planned follow-up visit (children who have an unscheduled re-visit to the emergency department within one disease episode are not excluded)

Recruitment start date

01/01/2018

Recruitment end date 01/05/2021

Locations

Countries of recruitment Austria

England

France

Germany

Hungary

Iceland

Ireland

Italy

Latvia

Lithuania

Malta

Netherlands

Portugal

Slovenia

Spain

Sweden

Türkiye

United Kingdom

Study participating centre Imperial College London United Kingdom W2 1NY

Study participating centre Medical University Vienna Paediatric Emergency Outpatient Clinic Clinical Division of Pediatric Pulmonology, Allergology and Endocrinology Department of Pediatrics and Adolescent Medicine Währinger Gürtel 18-20 Vienna Austria 1090

Study participating centre Paracelsus Medical University Paediatric Emergency Department and Paediatric surgery Department Müllner Hauptstrasse 48 Salzburg Austria 5020

Study participating centre Medical University of Graz

Department of General Paediatrics Auenbruggerplatz 2 Graz Austria 8036

Study participating centre Hopital Universitaire Robert-Debre Paediatric Emergency Department Bd Sérurier Paris France 75019

Study participating centre Louis Mourier Hospital Paediatric Emergency Department 178 Rue des Renouillers Colombes France 92700

Study participating centre Armand Trousseau Hospital

Paediatric Emergency Department 26 avenue du Dr-Arnold-Netter Paris France 75012

Study participating centre

Jean Verdier Hospital

Paediatric Emergency Department 3 Rue Arthur Groussier Bondy France 93140

Study participating centre Dr. von Hauner Children's Hospital Paediatric emergency department Ludwig-Maximilians-University Munich Lindwurmstraße 4 Munich

Germany 80337

Study participating centre

Heim Pal National Paediatric Institute Paediatric Emergency Department Ulloi ut 86 Budapest Hungary 1089

Study participating centre Szent Gyorgy University Teaching Hospital of Fejer County Paediatric Emergency Department Szekesfehervar Hungary 8000

Study participating centre Barnaspitali Hringsins Hringbraut 101 Reykjavík Iceland 101

Study participating centre Children's Health Ireland at Crumlin Paediatric Emergency Department Cooley Rd Crumlin Dublin Ireland D12 N512

Study participating centre Children's Health Ireland at Temple Street Paediatric Emergency Department Temple St Rotunda Dublin Ireland D01 XD99

Study participating centre Children's Health Ireland at Tallaght Paediatric Emergency Department Tallaght Dublin Ireland D24 NR0A

Study participating centre University Hospital of Padova

Division of Paediatric Emergency Medicine Department of Women's and Children's Health Via Giustiniani, 3 Padova Italy 35128

Study participating centre ondazione Policlinico Universitario A. Gemelli IRCCS Department of Woman and Child Health and Public Health Via della Pineta Sacchetti, 217 Rome Italy 00168

Study participating centre

Children's Clinical University Hospital

Paediatric emergency department Riga Stradins University Vienības gatve 45 Riga Latvia

Study participating centre Hospital of Lithuanian University of Health Sciences Kauno Klinikos Eivenių g. 2 Kaunas Lithuania 50161

Study participating centre Mater Dei Hospital Department of Child and Adolescent Health Msida Malta MSD 2090

Study participating centre Erasmus MC Sophia Department General Paediatrics Dr. Molewaterplein 40 Rotterdam Netherlands 3015 GD

Study participating centre Medisch Centrum Alkmaar, Noordwest Ziekenhuisgroep Emergency department Wilhelminalaan 12 Alkmaar Netherlands 1815 JD

Study participating centre Hospital Pediátrico, Centro Hospitalar e Universitário de Coimbra Pediatric Emergency Service Avenida, R. Dr. Afonso Romão Coimbra Portugal 3000-602

Study participating centre Centro Hospitalar e Universitário de São João Alameda Prof. Hernâni Monteiro Porto Portugal 4200-319

Study participating centre Hospital Dona Estefania Centro Hospitalar de Lisboa Central Alameda Santo António dos Capuchos Lisboa Portugal 1169-050

Study participating centre Hospital Prof. Doutor Fernando da Fonseca Departamento da Criança e do Jovem- Urgencia Pediatrica IC19 Amadora Portugal 2720-276

Study participating centre Centro Hospitalar Tondela-Viseu Paediatric Department Av. Rei Dom Duarte Viseu Portugal 3504-509

Study participating centre University Medical Centre Ljubljana Univerzitetni Klinični Center Department of Infectious Diseases Zaloška cesta 7 Ljubljana Slovenia 1000

Study participating centre Cruces University Hospital Paediatric emergency department Cruces Plaza, S/N Barakaldo Spain 48903

Study participating centre Hospital Universitario Río Hortega Paediatric emergency unit Calle Dulzaina, 2 Valladolid Spain 47012

Study participating centre Astrid Lindgrens Children's hospital Paediatric emergency department Karolinska University Anna Steckséns gata 35 Solna Sweden 171 64

Study participating centre Sachs' Children and Youth Hospital Paediatric emergency department Sjukhusbacken 10 Stockholm Sweden 118 83

Study participating centre Faculty of Medicine, Ondokuz Mayıs University Paediatric Emergency Department Körfez 19 Mayıs University Samsun Türkiye 55270

Study participating centre Hacettepe University School of Medicine Division of Pediatric Emergency Medicine Department of Pediatrics Hacettepe A.Adnan Saygun Cd Ankara Türkiye 06230

Study participating centre Mersin City Training and Research Hospital Department of Pediatrics Division of Emergency Medicine Korukent Mah. 96015 Sok. Mersin Entegre Sağlık Kampüsü Toroslar Mersin Türkiye 33240

Study participating centre Leicester Children's Hospital Paediatric Emergency Medicine Leicester Academic Group Children's Emergency Department Leicester Royal Infirmary Infirmary Square Leicester United Kingdom LE1 5UE

Study participating centre St. Mary's Hospital Department of Paediatric Emergency Medicine Division of Medicine Imperial College NHS Healthcare Trust Praed Street London United Kingdom W2 NY1

Study participating centre

St. Thomas' Hospital Department of paediatric emergency medicine Guy's and St. Thomas' NHS Foundation Trust Westminster Bridge Rd South Bank London United Kingdom SE1 7EH

Study participating centre Birmingham Children's Hospital

Paediatric emergency department Birmingham women's and children's NHS Foundation Trust Steelhouse Ln Birmingham United Kingdom B4 6NH

Study participating centre Bristol Royal Hospital for Children Emergency Department Upper Maudlin St Bristol United Kingdom BS2 8BJ

Study participating centre Alder Hey Children's Hospital Paediatric emergency department Alder Hey Children's NHS Foundation Trust E Prescot Rd Liverpool United Kingdom L12 2AP

Sponsor information

Organisation Imperial College London

Sponsor details

Joint Research Compliance Office Medical School building, Room 221 Norfolk Place London England United Kingdom W211PG +44 (0)207 594 9465 cheuk-fung.wong@imperial.ac.uk

Sponsor type University/education

Website http://www3.imperial.ac.uk/

ROR https://ror.org/041kmwe10

Funder(s)

Funder type Other

Funder Name Investigator initiated and funded

Results and Publications

Publication and dissemination plan

Current publication and dissemination plan as of 01/04/2021:

Expect to publish the main manuscript in a leading international peer-reviewed journal and presentation at international conferences, planned for 01/06/2021 (i.e.: data from original EPISODES study, detailing period January 2018 - May 2020).

Anticipated additional production of short papers on both difficulties on harmonising routinely collected clinical data from European paediatric emergency departments, and changes in health care pathways across Europe amongst participants of the EPISODES study. Secondary analysis of the data may be performed with the approval of the EPISODES steering group after review of a

study proposal by any member of the EPISODES study group. Furthermore, the EPISODES study will position the trial group in a unique position to respond rapidly to a potential second wave of Sars-Cov-2 infections and to collect data on epidemiological issues in paediatric emergency medicine.

Previous publication and dissemination plan:

Expect to publication of the main manuscript in a leading international peer-reviewed journal and presentation at international conferences. Anticipated production of short papers on both difficulties on harmonising routinely collected clinical data from European paediatric emergency departments, and changes in health care pathways across Europe amongst participants of the EPISODES study. Secondary analysis of the data may be performed with the approval of the EPISODES steering group after review of a study proposal by any member of the EPISODES study group. Furthermore, the EPISODES study will position the trial group in a unique position to respond rapidly to a potential second wave of Sars-Cov-2 infections and to collect data on epidemiological issues in paediatric emergency medicine.

Intention to publish date

01/06/2021

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from r.nijman@imperial.ac.uk. Requests and study proposals will be reviewed by the steering committee. Any of the data needed for any (approved by the steering committee) proposed analysis will be shared. These data will not contain patient individual data and are only available in aggregated and fully anonymised form. UK HRA approval was obtained; no patient informed consent was needed. Data will become available after acceptance of first publication of the main study results. Data will be available for 10 years after study closure.

IPD sharing plan summary

Available on request

Study outputs

Output type Results article	Details	Date created 26/08/2022	Date added 30/08/2022	Peer reviewed? Yes	Patient-facing? No
<u>Protocol file</u>	version 3.0	13/05/2020	03/09/2024	Νο	No
Results article	paediatric emergency visits in Sweden	22/06/2021	03/09/2024	Yes	No