



PAEDIATRIC COVID 19 INFECTION AND IMMUNIZATION

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COVID 19 INFECTION

ASYMPTOMATIC

MILD TO MODERATE
INFECTION

SEVERE INFECTION

SYMPTOMS

FEVER/
CHILLS

COUGH

STUFFY,
RUNNY
NOSE

VOMITING

DIARRHOEA

POOR
FEEDING

DIFFICULTY
BREATHING

SYMPTOMS

SORE THROAT

HEADACHE

TIRED/
LETHARGY

MUSCLE
ACHE/JOINT
PAIN

DECREASE/LOSS
TASTE OR SMELL

CHEST PAIN

TREATMENT

SYMPTOMATIC
TREATMENT

FEVER
CONTROL

FLUIDS FOR
HYDRATION

PAIN
CONTROL

REST

NOSE DROPS/
HUMIDITY

TREATMENT

HOSPITALIZATION

IV FLUIDS

IV MEDICATIONS

RESPIRATORY SUPPORT OXYGEN

ICU CARE IN SEVERE CASES

DIAGNOSIS

SYMPTOMS

CONTACT HISTORY

SWAB

RAT (RAPID ANTIGEN TEST)

PCR

COVID 19 VIRUS

SPREAD FROM INFECTED PERSON

COUGH, SNEEZE, SPEAK, SING, BREATHE AND
SPREAD PARTICLES

INFECTED BY BREATHING IN VIRUS

INFECTED BY TOUCHING CONTAMINATED
SURFACE AND TOUCHING EYES, NOSE OR MOUTH

VIRUS CAN SURVIVE HOURS TO DAYS ON
SURFACES

INDOOR SPREAD GREATER THAN OUTDOOR

RISK SERIOUS COVID 19 ILLNESS

UNDER 1 YEAR

OBESITY

DIABETES

ASTHMA (12 TO 17 YEARS AGE)

CONGENITAL HEART DISEASE

GENETIC CONDITIONS (T 21)

NERVOUS SYSTEM/ METABOLIC CONDITION

IMMUNOCOMPROMISED

OTHER
EFFECTS
COVID 19
INFECTION

MYOCARDITIS/PERICARDITIS

MIS -C (MULTISYSTEM
INFLAMMATORY SYNDROME IN
CHILDREN)

POST COVID (LONG HAUL)
SYNDROME with headache,
fatigue, sleep / concentration
problem, cough, muscle/joint pain

UNFORSEEN EFFECTS COVID 19

ISOLATION

SCHOOL
PROBLEMS

SOCIAL
INTERACTION

DEPRESSION/
BEHAVIOURAL
PROBLEMS

EATING
DISORDERS

DETERIORATION
FAMILY
SITUATIONS

PREVENTION

HAND
WASHING

MASKS

PHYSICAL
DISTANCE

IMMUNIZATION

PREVENT

PREVENT INFECTION

PREVENT

PREVENT SPREAD AT HOME AND SCHOOL

PREVENT

PREVENT SEVERE ILLNESS

ALLOW

ALLOW CHILD TO STAY IN SCHOOL

ALLOW

ALLOW SAFE PARTICIPATION IN GROUP
ACTIVITIES

IMMUNIZATION

A PROCESS BY WHICH A PERSON BECOMES PROTECTED AGAINST A DISEASE THROUGH VACCINATION

VACCINATION.....THE ACT OF INTRODUCING A VACCINE INTO THE BODY TO PRODUCE PROTECTION FROM SPECIFIC DISEASE

IMMUNIZATION

INTRODUCES VIRUS PARTICLE (NOT LIVE) TO BODY AND STIMULATES CELLS TO PRODUCE ANTIBODIES

THE BODY NOW HAS AMMUNITION (ANTIBODIES) AVAILABLE TO KILL VIRUS AS SOON AS VIRUS ENTERS BODY TO PREVENT INFECTION OR LIMIT INJURY

IMMUNITY



PROVIDED BY ANTIBODY



ANTIBODY LEVEL FALL
WITH TIME BUT MEMORY
PERSISTS IN B AND T
CELLS



HIGHER LEVELS RESULT IN
LONGER LASTING
INFECTION AND BETTER
OMICRON PROTECTION



PROTECTION AGAINST
SERIOUS DISEASE PERSISTS
AT LOWER LEVELS

m RNA COVID 19 VACCINES

CHILDREN 6-11 YEARS

Pfizer- BioNTech Comirnaty 10mcg DOSE

Moderna Spikevax 50mcg DOSE

LOCAL SIDE EFFECTS

PAIN

REDNESS

SWELLING

GENERAL
SIDE
EFFECTS

FEVER/CHILLS

HEADACHE

FATIGUE

MUSCLE/JOINT PAIN

SWOLLEN LYMPH NODES



SERIOUS SIDE EFFECT

ALLERGY

MYOCARDITIS/PERICARDITIS

VACCINES

8 WEEK INTERVAL - > LONGER INTERVAL = STRONGER IMMUNE RESPONSE = HIGHER VACCINE EFFECTIVENESS = LONGER PROTECTION

LONGER INTERVAL DECREASES RISK MYOCARDITIS/ PERICARDITIS

BOOSTER DOSE HIGHER IMMUNE RESPONSE THAN AFTER 2ND DOSE

INFECTION BEFORE VACCINE...8 WEEKS AFTER START SYMPTOM OR POSITIVE TEST

INFECTION AFTER 2 DOSES.....3 MONTHS AFTER INFECTION OR AT LEAST 6 MONTHS FROM 2ND DOSE

WHY VACCINATE

CHANCE OF
SYMPTOMATIC COVID
19 WITH SEVERE ILLNESS
WITH HOSPITALIZATION
OR RARE DEATH

MIS-C AFTER
INFECTION

ASYMPTOMATIC AND
SPREAD TO OTHERS

LONG TERM AFTER
EFFECTS COVID 19

SAFE

BOOSTER

FOR 12-17YEARS

6MONTHS AFTER LAST
COVID 19 VACCINE

6MONTHS AFTER COVID
19 INFECTION

EARLIER IN SPECIAL
CASES eg
IMMUNOCOMPROMISED

BOOST ANTBODY LEVELS

PROLONG IMMUNE
MEMORY

SAFETY CONTINUED MONITORING

HEALTH CANADA

PUBLIC HEALTH AGENCY OF CANADA

VACCINE MANUFACTURERS