

This information sheet was last updated on 20th March 2020 at 4pm

Coronavirus (COVID-19) – information for children, young people and families from the Cardiology team

We understand that you might be worried about coronavirus – also known as COVID-19 – particularly if your child has a long-term health condition, such congenital (present at birth) heart conditions. This information sheet from the Cardiology team at Great Ormond Street Hospital (GOSH) sets out our advice for children and young people who use our services. Please read this alongside our general information about coronavirus (COVID-19) available online at www.gosh.nhs.uk/news/coronavirus-covid-19-information-children-young-people-and-families

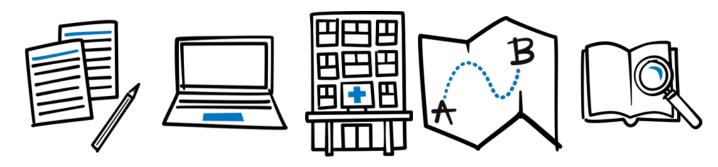
This information comes from the British
Congenital Cardiac Association and has been
approved by the clinical team at GOSH. It may
also help to read the latest guidance from the
British Heart Foundation at
bhf.org.uk/informationsupport/heart-mattersmagazine/news/coronavirus-and-yourhealth/congenital-heart-disease-and-coronavirus.

Does COVID-19 affect children?

The evidence to date shows that although children do develop COVID-19 very few children will develop severe infection with COVID-19.

However, in adults, young people and children with congenital heart disease, we would suggest that the following groups should be considered more vulnerable to becoming unwell with respiratory infections, including COVID-19, and should therefore be particularly strict in following the social distancing measures outlined in the Government guidelines.

- Children with functionally univentricular circulation, such as Hypoplastic Left Heart Syndrome, and those with Fontan circulation (Total Cavopulmonary Connection or TCPC).
- Children under 1 year of age who have not yet had their heart defect repaired but surgery or catheterisation is planned. This does not apply to those with small septal defects that are expected to close without treatment.
- Children whose oxygen saturation (level of oxygen in the blood) is less than 85 per cent for most of the time – chronic cyanosis.
- Children taking medicine to improve their heart function, such as enalapril, captopril, lisinopril, losartan and digoxin. This includes those with cardiomyopathy. It does not include those taking medicine for a dilated aorta.
- Children with pulmonary hypertension (high blood pressure in the lungs) who are taking medicine to manage it.
- Children who have had a heart transplant.



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 Children with other underlying conditions as well as a congenital heart condition, such as chronic kidney disease or chronic lung disease.

If your child has reduced immunity or is taking antibiotics long term to prevent infection your family should follow the guidance on social distancing unless advised otherwise by the clinical team. If you are unsure, email or phone your clinical team.

Children who have had their thymus gland removed during heart surgery are not at increased risk of infection.

Specific information about medicines from the Cardiology team

Taking your medication is very important and not taking it could make your condition worse. Please

consult your specialty team before making any decisions regarding your medication.

This is particularly important for medicines to improve heart function and prevent blood clots.

Should we make alternative clinic appointments?

Clinicians are looking to remove the need for patients to attend face-to-face appointments wherever possible. This might involve to telephone appointments or exploring video consultations.

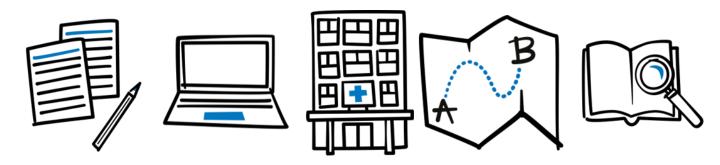
If your child has an upcoming clinic appointment, we will be in touch with you to discuss how we can best carry this out remotely.

Further information and support

Advice from the British Heart Foundation at https://disease-and-coronavirus-and-your-health/congenital-heart-disease-and-coronavirus

Information from the NHS at www.nhs.uk/conditions/coronavirus-covid-19/

Information for children is available on the BBC Newsround website at www.bbc.co.uk/newsround



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