COVID-19 Transaminitis & Chronic Diarrhoea as a Presentation in Pediatric Population: A Case Study

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Abstract

COVID 19 has change the entire healthcare delivery system time to time, various strains has been observed and different complication has been observed time to time in different age group. Similarly case presented here with refractory diarrhea and Transaminitis.

COVID 19 is a deadly Pandemic and effecting people throughout the world. Whole world is looking for the varied option for treatment and the second wave has almost caused the lot of mortality and morbidity. No age group is spare of the COVID 19 manifestation from pediatric & Geriatric age group.

Keywords: Chronic Diarrhoea, COVID-19, Pediatric, Transaminitis.

INTRODUCTION

Case Study

The case discussed here of female child of age 11 years reported to have persisting loose stools since 20 days and high grade fever with pain abdomen. The patient treated for two weeks on OPD Basis at outside other hospital. Later in view of persisting complaints of loose stools and fever

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Later patient approached Chugh Multispecialty Hospital, Bhiwani, in view of poor oral tolerance on day of hospitalization patient undergone routine investigation found to have normal CBC except mild thrombocytopenia with enteric positive and raised CRP more than 80 and ESR above 90. RT PCR sent in view of ongoing pandemic and found to have positive on day 2 and isolated and managed conservatively with antipyretics, broad spectrum antibiotics and intravenous fluids.

On subsequent examination she was found to have reduction in platelet count and increase in OT/PT and TLC remains same as in the subsequent reports. The patient continues to have the spike of the fever and managed accordingly and later found to have the hepatosplenomegaly NCCT abdomen & Pelvis. Patient responded well with the antimalarial and spike of fever has subsided. The patient was later managed with empirical on antimalarial and started responding and wellbeing achieved, but there were no significant improvement in the SGOT/SGPT and the Platelet count.

The patient managed with the empirical management in isolation with the standard COVID Protocol. Patient managed well and responded and discharge to home with stable vitals.

Thus this was case discussed with refractory diarrhea which was presented and not responding to the medical management. This was case off refractory diarrhea in COVID 19 patient which was evaluated and managed accordingly. There was various presentation of the COVID 19 in different age group and Refractory diarrhea was one which was noticed in the Pediatric population.

CONCLUSION

The conclusion drawn from the above is the variants of COVID 19 in different age group observed and need evaluation time to time. Transaminitis was the presentation in all the patients of COVID 19 unusual and peculiar in 2022 wave of COVID 19. The complications which arises in the COVID 19 is different at each interval ranges from respiratory to the hepatobiliary and neurological.

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