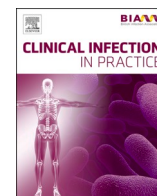




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The COVID-19 pandemic management strategies and the acute severe hepatitis outbreak of unknown origin in children

To Editor,

Nishiura et al. (2022) recently reported that prior exposure to the Omicron variant might be associated with an increased risk of severe hepatitis among children. Other authors also showed evidence from the previous SARS and the current SARS-CoV-2 that infected individuals can rapidly progress to a multiple organ dysfunction syndrome, among which the liver, even in asymptomatic cases (Brisca et al. 2021; Osborn et al. 2022).

However, at this stage, we must also consider the vast majority of cases are coming from European countries and the US, where the COVID-19 pandemic management strategies and outcomes have differed substantially from East Asia. Especially during the Omicron wave when began treating COVID-19 as an endemic illness while Asian countries kept elimination strategies. This is particularly worrying as most European governments and many health professionals, especially paediatricians, assured parents that becoming infected with COVID-19 was not a big problem for children. While severe clinical outcomes were less frequent with Omicron than with Delta variant, the incidence rate of SARS-CoV-2 infection with Omicron was 6–8 times that of Delta variant in children younger than five years (Wang et al. 2022).

Although correlation does not imply causation, the extensive infection in the child population during the Omicron wave in Europe and the US could reflect the current growth of acute severe hepatitis cases of unknown origin in children and predict the outbreak's evolution, supporting the findings by Nishiura et al. (2022). Therefore, a transparent assessment and communication by governments and health authorities will be necessary as soon as possible to avoid speculation. Moreover, accurate statistics are essential for policy guidance and decisions (Pearce et al., 2020). Quick data sharing would help find the cause for the acute severe hepatitis outbreak of unknown origin in children to develop appropriate treatment and public health decisions accordingly.

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Ethical approval statement

The letter did not require ethical approval.

Declaration of Competing Interest

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