

School-driven explosion of COVID cases in children linked to alarming spike of MIS-C

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As the number of COVID-19 cases continues to rise exponentially throughout the world, the toll that the disease is having on children finds expression in increasing numbers of cases, hospitalizations and deaths. According to the latest report by the American Academy of Pediatrics (AAP), for the week ending January 20, 2022, child COVID infections surpassed 1.15 million, in the worst week of the pandemic, while the death toll of 27 children was the second-worst week.

In addition to these tragic figures, thousands of children are suffering crippling outcomes, as COVID-19 infections cause Multisystem Inflammatory Syndrome-Children, or MIS-C, a condition characterized by inflammation of vital organs such as the heart, lungs and brain.

As of January 3, the Centers for Disease Control and Prevention (CDC) reports that 6,431 children have developed MIS-C, and 55 have died. This means that the number of children with MIS-C has more than doubled in the past nine months from the 3,185 cases reported as of last April.

Even this is likely an undercount.

The state of Virginia reported its first MIS-C death last November, the day after Thanksgiving. The child, who was between the ages of 10 and 19, lived in Prince William County in the Washington D.C. suburbs.

No other details have been released regarding the child or the family. At that time, the CDC had reported 48 child deaths from MIS-C. Seven more children have died from the sickness since that time, yet the media has been silent on this tragic syndrome.

MIS-C develops two to six weeks after initial exposure or infection. Children who develop MIS-C experience symptoms such as fever, heart palpitations, rapid breathing, abdominal pain, vomiting, diarrhea,

fatigue, headache, enlarged lymph nodes or redness and/or swelling of the eyes, lips, tongue, hands, or feet.

Perhaps the most problematic of these conditions is inflammation of the heart. In some cases, the progression of the condition can cause heart dysfunction, and cardiogenic shock. This effectively impedes the heart's ability to circulate enough blood to the entire body.

Additionally, children can develop cardiomyopathy, a stiffening of the heart muscle, or experience an abnormal heartbeat.

Dr. Sophie Katz of the Vanderbilt University Medical Center in Nashville, Tennessee and an assistant professor of pediatric infectious diseases told *U.S. News*: “Whenever that happens, usually we see children who are pretty seriously ill—kind of in shock—and their heart ... doesn't pump quite as well as it normally should.”

Last April, the *Journal of the American Medical Association (JAMA) Pediatrics* reported that the vast majority of young children and adolescents who went on to develop MIS-C had suffered only mild or asymptomatic forms of COVID-19. Of the 1,000 cases studied, 75 percent of children did not display symptoms, demonstrating COVID-19's sinister ability to wreak havoc on the youngest of its victims despite their cases presenting as asymptomatic.

Parents often don't connect their child's symptoms of MIS-C to their previous infection of COVID-19 and some families are even unaware that their child contracted the coronavirus until a diagnosis of MIS-C is made.

On January 6, the US Department of Health and Human Services (HHS) published updated guidelines, which will no longer require hospitals to report deaths of COVID-19 to the federal government. States such as

Nebraska, South Dakota, Maine, Michigan and Alaska have stopped reporting or have altered the days they report COVID-19 cases and related deaths.

The lack of reporting coincides with a general movement by states and the federal government to minimize the health impact of COVID-19. According to the AAP, for the week ending January 13, 21.4 percent of all positive cases were those for children under 18. This represented over 981,000 positive child cases, a 69 percent increase over the week ending January 6.

This alarming upward trend will no doubt lead to many more cases of MIS-C, with debilitating medical conditions and even death.

In the aftermath of a record-breaking holiday travel season and the reopening of schools closely after, a crushing new wave of infections has devastated already overwhelmed hospitals and other health care facilities

In Atlanta last Thursday, several representatives of the local health care systems met to issue a statement about the dire situation facing their medical facilities, announcing that care would be rationed to treat only the most ill patients. Dr. Andrea Shane of the Children's Healthcare of Atlanta told WSB-TV2 Atlanta that there was an alarming spike in the number of child hospitalizations, stating, "In the past three, four weeks, we've seen more than 100 children with post-COVID complications." She added that "the way to prevent MIS-C is to prevent COVID-19."

The horrific toll of MIS-C on children and their families is a damning indictment of the ruling class and its murderous "herd immunity" strategy. The CDC, in concert with the Biden administration, continues to peddle the lie that the pandemic can be fought by immunizations only, with a secondary emphasis on masking.

Likewise, the National Education Association (NEA) and the American Federation of Teachers (AFT), have followed suit by pushing for the forced reopening of schools across the country in order for parents to return to work. Both organizations have echoed the claim that schools are "the safest place" for children to be, feigning concern over the consequences of remote learning for students' mental health. This despite the evidence to the contrary that schools are a main driver of COVID-19 transmission.

Between the Biden administration, the CDC and the

openly right-wing, fascistic elements in the Republican Party, the barbarism of American capitalism is on full display. The ruling class has decided that it will not intervene to save the lives of working people or their children, but will continue to bear down upon them to ensure the uninterrupted flow of profits to the ultra-wealthy.

Opposition to these deadly policies is finding expression through walkouts, sickouts and strikes from students, teachers and other workers, alike.

Last week, 1,000 students in Montgomery County, Maryland walked out over unsafe conditions, as did students in Texas and Colorado, while 500 students and teachers in Oakland held an online Zoom meeting to discuss COVID-19 safety concerns. Graduate students at the University of Oregon organized a walkout due to insufficient COVID-19 measures. Students at Pasadena City College have gathered at least 1,800 signatures to demand the continuation of online instruction.

Internationally, thousands of educators and students around the world have joined together to oppose in-person instruction. In Greece, France, Austria, the United Kingdom and in Manitoba, Canada demonstrations took place in the form of strikes and walkouts.

These mass demonstrations are proof that workers in the US and throughout the world will not remain passive as they continue to watch their loved ones get sick and die or live with debilitating conditions. However, they require political direction. At every school site and workplace parents and teachers must organize rank-and-file safety committees, independent of the unions and both big business parties, to fight not just to close the schools but to put an end to the pandemic through the fight for a strategy of eliminating the virus on a global scale.



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