

Comparison of Clinical Presentations and Disease Severity of Children Hospitalized with Influenza A and B

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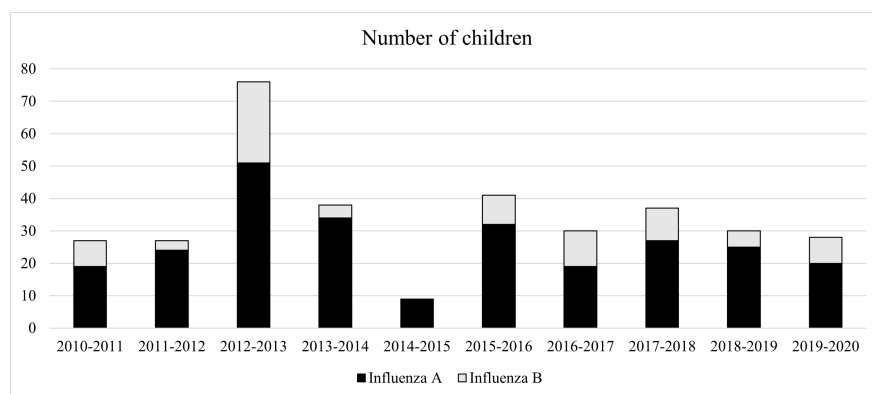
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Abstract

The impact of influenza B (FLUB) was relatively less researched than influenza A (FLUA), because of its lower pandemic potential. We aimed to compare the clinical presentations and disease severity between FLUA and B. This study involved children hospitalized with virologically-confirmed influenza between 2010-2020. The disease severity was assessed according to admission to the intensive care unit (ICU), mechanical ventilation requirement, length of hospital, and ICU stay and death. FLUA and B were compared within predefined age groups (0-2, 3-9, and 10-18 years) and in all age groups. Of 343 patients, FLUA and B were detected in 260 (75.8%) and 83 (24.2%) children, respectively. Headache and abdominal pain were more common in FLUB ($P<0.05$). Children with FLUA were prescribed antibiotics and antivirals 1.6 and 2.3-fold more than those with FLUB. From subgroup analysis by age, patients between 3-9 with FLUB had a higher rate of headache and abdominal pain; additionally, headache occurred in 5 (100%) children aged 10-18 years with FLUB and 10 (38.5%) with FLUA ($P<0.05$). Children between 0-2 with FLUA were more often admitted to ICU than those with FLUB (22.9% vs. 6.0%; $P<0.05$). Eight patients with FLUA died, and one with FLUB ($P>0.05$). The clinical presentation was similar between FLUA and B, except for headache and abdominal pain, which were notably more common in older patients with FLUB. Children aged 0-2 years with FLUA had a significant risk for ICU admission. Higher levels of awareness and attention should be paid to children under two years with FLUA.

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