71 ANALYSING THE IMPACT OF VIRTUAL TEACHING SESSIONS ON LEARNING EXPERIENCES OF PHYSICIANS DURING THE COVID-19 ERA AT CHI

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To determine how virtual teaching sessions have impacted learning experiences of physicians during the COVID-19 era at CHI.

We created an anonymous survey on Google forms with a fixed time frame to complete. Our target population included all physicians working at CHI.

Our questions focused on

- 1) Individual educational resources available across CHI
- 2) External webinars

3) Accessibility around the applications used to broadcast the virtual sessions Data was collected prospectively and was analysed availing Micro-soft Excel -We received a total of 71 respondents with a mix of sites and grades.

-Responses to individual sessions including journal club and grand rounds were generally positive, with some negative feedback around accessibility, interaction and quality of IT - Over half of all participants were relying on their personal phone (63.4%) and mobile data (69%) rather than hospital IT equipment

- Most popular session to continue online was cross-city grand rounds (63.4%).

Only 10% of respondents did not want to continue any sessions virtually post pandemic According to the results from the questionnaire above, virtual learning experiences for NCHDs and consultants were positive, with most very satisfied with the ease of access. However, further improvements in the IT department at CHI and addition of radiology meetings could be added to further enhance learning experiences.

72 PAEDIATRIC MULTISYSTEM INFLAMMATORY SYNDROME, A NEW ENTITY: A 3-CASE SERIES

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Introduction/Description Covid-19 is usually mildly symptomatic in children. However, in April 2020 the first reports of an inflammatory generalized syndrome associated with

SARS-CoV-2 emerged. We report 3 cases of this new entity in a secondary hospital.

A 9-year-old female, with a low-risk contact with SARS-COV 2 infected person, was admitted to the Emergency Department (ED) due to persistent fever with lasting for 6 days, fleeting rash at the trunk, oral mucositis, cheilitis and painful cervical lymphadenopathies. Laboratory studies showed leucocytosis, elevation of erythrocyte sedimentation rate (ESR), C-Reactive Protein (CRP), D-Dimers and fibrinogen. Echocardiography depicted hyperechogenicity in the coronary arteries. Treatment with a single dose of intravenous immunoglobulin (IVIg) and aspirin (ASA) was performed, but clinical worsening

motivated the introduction of oral corticotherapy. She was discharged after 8 days with clinical and analytical improvement.

An 8-year-old female, infected with SARS-COV-2 twenty days before the admission, presented to the ED complaining of persistent fever with a 2-days evolution, associated with abdominal pain and maculopapular rash in the trunk and face. Laboratory data showed lymphopenia, thrombocytopenia and elevation of inflammatory markers (CRP, ESR and ferritin), D-Dimers, fibrinogen and cardiac enzymes. Echocardiography revealed hyperechogenicity of the coronary arteries. She began treatment with IV methylprednisolone pulses for 3 days, ASA and oral corticoid. A clinical and analytical improvement was observed and she was discharged after 8 days of hospitalization.

A 12-year-old female, infected with SARS-COV 2 one month before, was admitted to the ED due to persistent fever with a 2-days evolution.

Analytical study revealed lymphopenia, thrombocytopenia, elevation of CRP and D-Dimers. The child was hospitalized for clinical surveillance. After 5 days of hospitalization, she referred more tiredness associated with persistent fever and bilateral non-exudative conjunctivitis. Laboratory data showed elevation of inflammatory markers and D-Dimers, worsening of thrombocytopenia, hypoalbuminemia and elevation of troponin.

Echocardiography evaluation was normal. IVIg and oral ASA was initiated with analytical and clinical improvement. In this case, genomic sequencing was possible and the variant SARS-COV 2 B.1.221 was identified.

Conclusion Paediatric Multisystem Inflammatory Syndrome temporally associated with

Covid-19 (PIMS-TS) is a new entity not always a straightforward diagnosis.

Considering the virus dissemination, it is hard to keep track of the potential high-risk contacts. Therefore, we should be aware of PIMS-TS to archive an early diagnosis and potentially avoid severe complications. There is still insufficient data to conclude if certain variants are more susceptible to cause this syndrome.

73 ABDOMINAL PAIN IN POST-COVID 19 PEDIATRIC PATIENTS

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The coronavirus pandemic first broke in December 2019. Unlike adults, children have been reported to present with milder clinical manifestations of the virus, sometimes even acting as asymptomatic carriers of infection.

However, as early as mid-2020, pediatric patients who developed multisystem inflammatory syndrome (MIS-C), along with fever, cardiorespiratory symptoms and neurocognitive problems, were found to exhibit marked gastrointestinal (GI) manifestations, sometimes confounding diagnosis by mimicking GI infections, inflammatory bowel disease (IBD) or surgical conditions, such as acute appendicitis.

We present series of cases of the school age children, who presented with severe abdominal pain during Bulgaria's first peak of COVID-19 pandemic.