

# COVID-19 and Children: Is it Just a Cold?

By Lydia Greene, Back to the Vax

Pediatricians will tell you that while COVID-19 can be mild for most children, they are seeing an increase in certain health problems after even mild infection.

Children are not immune to long COVID (Funk et al. 2022), and experience symptoms like fatigue, anosmia (loss of smell), ageusia (loss of sense of taste), dizziness, fainting, hives, autoimmunity and breathing issues long after the initial infection is over. The virus that causes COVID-19 is a new one, so we still do not know the long-term effects of infection. There are other vaccine-preventable diseases that will present as mild in most children, but we vaccinate because we know that there are long-term effects. For example, approximately 70% of all polio infections in children are asymptomatic (CDC), but 1/200 infections of poliomyelitis leads to irreversible paralysis (WHO). When the polio vaccine became available parents lined up immediately. Contrast that with today. If polio happened today in the world of social media, I fully believe we would see the same low vaccination rate that we see for children and COVID-19. Parents have been scared by disinformation and when their children get COVID-19 they cross their fingers and hope it's mild. They tell themselves that only immune-compromised children will get severely sick or die. The data doesn't support this theory. Yes, immune-compromised children have a higher risk, but the risk is also present for healthy children. Since the beginning of the pandemic to January 11, 2023, 1,620 children have died from COVID-19. A study published in September 2020 on COVID-19-associated deaths among persons aged <21 years reported 25% were previously healthy with no pre-existing conditions (CDC MMWR). That is much higher than the diseases we already vaccinate for.

I see anti-vax doctors pushing the narrative that children shouldn't be vaccinated for COVID-19, but none of them are pediatricians. These doctors are incentivized by money and followers to spread falsehoods when they have never treated a child seriously ill with COVID-19. They speak on the side effect of myocarditis, which is a risk in teen boys and young men post-vaccination (1 in 6,837). They fail to point out that the risk of myocarditis following COVID-19 infection is 6x higher and much more severe when caused by infection (Singer et al. 2022). Millions of children under 12 have been vaccinated and there are no myocarditis cases like were observed in teen boys. Also, the fact that this increased risk was caught shows that the monitoring systems are working. That is a good thing. Myocarditis from the vaccine was much milder as opposed to myocarditis from COVID infection or other viruses (Mevorach et al. 2021).

COVID can cause many more complications than myocarditis. For example, multisystem inflammatory syndrome in children (MIS-C) is a serious post COVID complication and vaccines reduce the risk of that occurring after an infection (Yusuf et al. 2020).

**Table S1. Demographic and Clinical Characteristics of the Study Participants.**

In the table, you can see that death is rare for children overall, but non-existent in vaccinated children. Hospitalization was also lower in vaccinated children.



Characteristic	No. of Children	SARS-CoV-2 Infection		Hospitalization		Death	
		No. and Proportion		No. and Rate Out of Infections*			
		All	Omicron	All	Omicron	All	Omicron
<b>Total</b>	887,193	193,346	103,338	309 (0.4%)	99 (0.4%)	7 (0.0%)	3 (0.0%)
<b>Vaccination Status</b>							
Unvaccinated	614,036 (69.2%)	174,281 (90.1%)	84,466 (81.7%)	294 (0.5%)	84 (0.5%)	7 (0.0%)	3 (0.0%)
1 dose	37,759 (4.3%)	3,048 (1.6%)	2,924 (2.8%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
2 doses	228,123 (25.7%)	15,986 (8.3%)	15,917 (15.4%)	15 (0.1%)	15 (0.3%)	0 (0.0%)	0 (0.0%)
Booster	7,275 (0.8%)	31 (0.0%)	31 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)

(Dan Yu Lin et al 2022)

As a parent who was once against vaccination, I witnessed the effects of vaccination in my own home. It verified that changing my mind was the right thing to do and the data supports this. My 3 children were caught up on all their missing vaccines in just over a year. In my experience, in terms of minor side effects, the COVID vaccine was the mildest vaccine they received. Side effects are consistent with other vaccinations and are typically mild. My 3 children tolerated them well, and my youngest had zero side effects. Unfortunately, my youngest couldn't get vaccinated before catching COVID. His vaccinated siblings had a minor course of the disease and recovered quickly. My youngest was not so lucky. The virus affected every body system. My son is a healthy, active, and robust little boy. He recovers from colds quickly with no severe illness. COVID was a different beast altogether. He had high fevers, ear infections, viral pink eye, fatigue, belly pain, and pneumonia. He needed emergency care. I had never seen any of my children this ill. It took him weeks to recover and had the strangest fatigue spells in the weeks that followed. This infection did not stop him from getting COVID again 4 months later. It was almost as bad except he didn't get an ear and lung infection that time.

Studies show hybrid immunity is best, ideally being vaccinated before infection. My youngest son wasn't fortunate enough to be vaccinated either time but that didn't stop me from vaccinating him at the first opportunity I had. COVID infection is a terrible lottery and you want to do what you can to prevent serious outcomes like what happened to my son, or worse. The data shows that vaccines will skew the odds in your favor.



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