

## Study: 3 infants with COVID-19 had fever, poor feeding, no cough

May 13, 2020

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Article type: [News](#)

Topics: [COVID-19](#), [Fetus/Newborn Infant](#), [Infectious Diseases](#)

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**Editor's note:** For the latest news on COVID-19, visit

<https://www.aapublications.org/news/2020/01/28/coronavirus>.

Three infants with COVID-19 had fever, difficulty feeding, lymphopenia and thrombocytosis but no cough, according to a new report.

**Studies have suggested** children with COVID-19 typically have mild disease, but infants are more vulnerable to severe illness than older children.

Researchers reported on the symptoms and outcomes of three infants in New York, two of whom had known exposure to SARS-CoV-2. Their findings were published today in “A Case Series of the 2019 Novel Coronavirus (SARS-CoV-2) in Three Febrile Infants in New York,” (Feld F, et al. *Pediatrics*. May 13, 2020, <https://doi.org/10.1542/peds.2020-1056>).

Patient 1 was a 43-day-old male with fever, lethargy, difficulty feeding and nasal congestion. He did not have a cough or difficulty breathing, common symptoms of COVID-19, when he was presented to the pediatric emergency department (PED). He developed mild respiratory distress with tachypnea and subcostal retractions on day two. Doctors found lymphopenia, neutropenia and thrombocytosis. Respiratory viral panels (RVP) and cerebrospinal fluid (CSF) polymerase chain reaction (PCR) panels were negative. SARS-CoV-2 PCR was positive. He was given antibiotics and discharged on day three.

Patient 2 was a 28-day-old male who presented with fever, sleepiness and poor feeding. He did not have a cough, nasal congestion or gastrointestinal symptoms. Laboratory studies showed lymphopenia and thrombocytosis, and his RVP was negative. SARS-CoV-2PCR was positive. He was given antibiotics and discharged on day two.

Patient 3 was a 43-day-old female who had a fever at home but was afebrile at the PED. Labs showed lymphopenia, neutropenia and thrombocytosis and a negative RVP. SARS-CoV-2 PCR was positive. The infant was discharged but brought back briefly due to a positive blood culture for *streptococcus salivarius* that later was attributed to a contaminant.

“Our limited experience with hospitalized febrile infants with SARS-CoV-2 infection shows while respiratory manifestations may be present, they are less prominent; irritability, lethargy and poor feeding is more frequently encountered,” authors wrote. “Lymphopenia, thrombocytosis, and possibly neutropenia, in the absence of another fever source, may prompt investigation for SARS-CoV-2 infection.”

