# RECOV-Brasil: COVID-19 in children undergoing cancer treatment or HSCT in Brazil

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Brazil is the largest country in South America with continental dimensions and significant regional differences. Recently, the country has faced a great challenge in establishing adequate strategies to mitigate the strong impact caused by the arrival of COVID-19 in the national territory. Since the first case diagnosed on February 26th, 2020, we have gone through a 18 week period that resulted in 58.300 deaths and more than 1.370.000 confirmed cases<sup>1</sup>. Despite having a public and universal health system, most pediatric oncology centers are located in more urbanized regions, such as state capitals or economic centers. Few reports describe the impact of SARS-CoV-2 on the population of pediatric patients accompanied by cancer or undergoing hematopoietic stem cell transplantation (HSCT)<sup>2,3,4</sup>. Less frequent still are the descriptions of the situation of these children in low or middle income countries5. Faced with this new and unknown scenario, the present study aims to describe the clinical presentation and the evolution of children affected by COVID-19 undergoing treatment in units of oncology, hematology or HSCT. We are analyzing the interregional differences in the presentation, management and prognosis of these children, while drawing a national panorama that can be compared with other countries through a national and multicenter registry of children evaluated for SARS-CoV-2.

Through dissemination by the Brazilian Society of Pediatric Oncology (SOBOPE), Brazilian Association of Hematology and Hemotherapy (ABHH) and Brazilian Society of Bone Marrow Transplantation (SBTMO). 36 centers across the country agreed to participate in this project (Figure 1). All regions of the country are included. The variables evaluated are clinical symptoms, diagnostic method, therapeutic measures and treatment location. In addition, the repercussions of infection on baseline treatment and overall prognosis are being assessed. Despite being in an initial phase, the database already counts with 64 registered cases.

This joint work of the centers for pediatric oncology and bone marrow transplantation in our country is an advance that is allowing the development of one of the largest databases on the influence of COVID19 in the treatment of children in developing countries. Considering the small number of current literature on this subject, the heterogeneity of our population and regional differences, centralization of records is essential to better understand the extent and impact of this epidemic in our country, in addition to comparing the effect of local health strategies. It is important to highlight that the Sistema Único de Saúde (SUS), one of the largest and most complex public health systems in the world, guarantees universal health care and presents itself as a significant differential in combating the pandemic in Brazil through primary care, as well as medium and high complexity assistance.

The development of this study will contribute to a better understanding of the clinical presentation, evolution and impact of that of COVID-19 in pediatric cancer patients or those undergoing HSCT in middle-income countries.

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### Conflict of Interest

The authors declare that there is no conflict of interest.

## Acknowledgment

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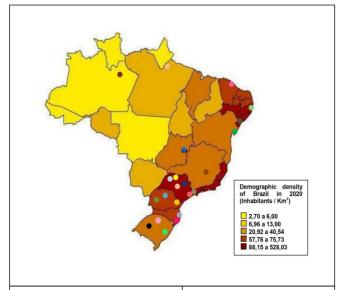
## Ethical statement and consent to participate

Ethical approval to conduct this study has been granted by the Ethics Committee of Hospital de Clínicas de Porto Alegre (HCPA). Participating adults as well as those responsible for minors signed informed consents in duplicate, keeping a copy for themselves.

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Figure 1 legend: Geographical distribution of participating centers



- Porto Alegre / RS: Hospital de Clínicas de Porto Alegre; Hospital Criança Concelção; Hospital da Criança Santo Antônio; Hospital Moinhos de Vento; Passo Fundo / RS: Associação Hospitalar Beneficente São Vicente de Paulo:

- Conceiges, risopista da Cirança Santo Antonio, risopista Monicon de Vento;

  Passo Fundo / RS: Associació Hospistala Reneficentes São Vicente de Paulo;

  Santa María / RS: Centro Tratamento Criança e Adolescentes com Câncer (Universidade Federal de Santa María-UFSMI);

  Criciliums / Sic Unidade de Concoligia Pedidirrica do Hospistal São José;

  Florisniopolis / SC: Hospistal Infantiti Joana de Gusmão;

  Curritian / Pri Hospistal do Câncer de Londrina;

  Curritian / Pri Hospistal do Câncer de Londrina;

  Londrina / PR: Hospistal do Câncer de Londrina;

  São José Gazmapor / SP: Chrup de Assistância à Criança com Câncer-GACC;

  São Paulo / SP: Instituto da Criança HCFMUSP; Instituto de Oncologia Pedidirrica GRAACC; Instituto de Oncologia Pedidirica; Hospital São Camilo Pompeia; Hospital São Camilo Pundes Santana; Hospital São Camilo Pompeia; Hospital São Camilo Pundes Santana; Hospital São Camilo Pompeia; Hospital São Camilo Pundes Santana; Hospital S

- Jundial / SP: Grupo em Defesa da Criança com Câncer GRENDACC;

  Jau á SP: Hospital Amaral Carvalho;

  São José do Rio Preto / SP: Hospital da Base;

  Barretos / SP: Hospital de Cancer de Barretos Fundação Pio XII;

  Balo Horizonte / Minas Gerais: Hospital de Clinicas da Universidade Federal de Minas Gerais: U-WGO);

  Universidade Federal de Minas Gerais: U-WGO);

  Brasillar OP: Hospital da Criança de Brasilla;

  Salvador / BA: Hospital Martagão Gesteira;

  Aracaju / SE: Centro de Oncologia de Sergipe;

  Recife / PE: Instituto de Medicina Integral Professor Fernando Figueira (MINI);

  Foratakza / CE: Hospital Universitário Walter Cantidio;

  Balém / PA: Hospital Oncologio Infantil Cávio Lobo;

  Manaus / AME: Fundação Hospitalar de Hematologia e Hemotorapia do Amazonas;