

August 11, 2021

#### Community Leaders and Families of Our Patients:

As COVID-19 cases in Taylor county rise exponentially due to the Delta variant, we as pediatricians have become overwhelmed with sick visits: routine viral illnesses that we typically see during cold and flu season (late October through mid March) as well as rising cases of COVID-19 in children. Additionally, we have begun to see cases of COVID-19 require hospitalization in our pediatric patients. As schools are scheduled to start next week, we are concerned that this increase will speed up rapidly as children are once again consistently in closer contact with one another, further contributing to the strain being put on our hospital system. Last week alone pediatric cases rose 84% in the United States. We are already having difficulty transferring patients with critical needs to Cook Children's Medical Center due to high patient volumes in their pediatric intensive care unit, and we fear this will affect the care of our local patients who may become severely ill with COVID-19 or for those who continue to become severely ill with the other circulating viruses that we are experiencing in our community.

Due to the extraordinary measures taken in the fall of 2020 by our local school districts, we saw historically low volumes of common viruses that typically circulate amongst children yearly as well as relatively low numbers of COVID-19 in school age children. Masks are an incredibly easy intervention that do not cause harm and have shown to drastically reduce many illnesses, including COVID-19. The most effective strategy to protect us from COVID-19 has clearly been vaccination, and our concern is that this will not be available to children under 12 until late fall/early winter. Until all who desire to be vaccinated are able, we as the adults in children's lives should do everything that we can to protect them. Masking is simple, cheap and effective. There are car seat safety laws in place for children because of clear and convincing data, despite parents' protests when these laws were being created, that they simply save lives. Universal masking for the safety of children should be no different. We also know and have seen clearly over the last 18 months that children learn best when they are receiving in person education. We want to prevent closures of schools while also ensuring that children are as safe as possible. Masks will help achieve both results. There is no evidence that masks are harmful to children or adults.

At the beginning of the pandemic, information at the time indicated that children were not affected to the same degree as older adults and adults with preexisting conditions. However, as many of those individuals have received a COVID-19 vaccine, the Delta variant seems to have developed a penchant for causing more severe disease in younger, healthier patients. Our colleagues in larger cities have warned us about what is to come: pediatric intensive care units overwhelmed with children with respiratory failure due to COVID-19, and of course the MIS-C (multisystem inflammatory syndrome in children) that can follow 4-6 weeks after an asymptomatic or mild COVID-19 infection and cause life threatening complications. We are strongly recommending that all local school districts follow the CDC and AAP (American Academy of Pediatrics) recommendations which are as follows:

To protect students, teachers and staff, all children over the age of 2 years and all adult staff should wear face masks, regardless of whether they are vaccinated.


At this time, the AAP recommends universal masking in schools for the following reasons:


- a significant portion of the student population is not eligible for vaccination
- protection of unvaccinated students from COVID-19 and to reduce transmission
- lack of a system to monitor vaccine status among students, teachers and staff
- potential difficulty in monitoring or enforcing mask policies for those who are not vaccinated; in the absence of schools being able to do this monitoring, universal masking is the best and most effective strategy to create consistent messages, expectations, enforcement, and compliance without the added burden of needing to monitor vaccination status


- \* possibility of low vaccination uptake within the surrounding school community
- \* continued concerns for variants such as the Delta variant that are more easily spread among children, adolescents and adults.

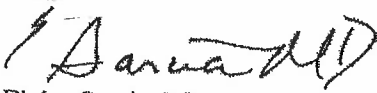
We thank you for your time and consideration as we work together to navigate our community and the children of our community safely through this ongoing pandemic.

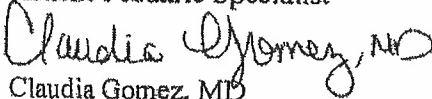
Respectfully,  
Pediatricians of Abilene and the Abilene Public Health District

  
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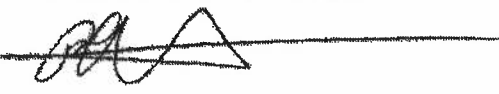
  
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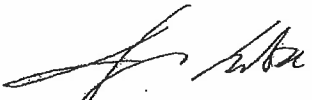
  
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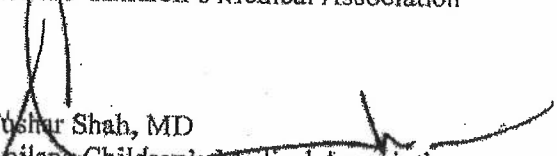
  
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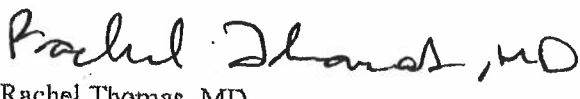
  
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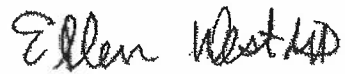
  
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