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## Managing risk of Reye's syndrome in children on long-term Aspirin treatment

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Reye's syndrome primarily affects children on aspirin recovering from viral illness most commonly varicella zoster and influenza virus. Though the incidence, Reye's syndrome has declined significantly after Centre for Disease Control (CDC) banned routine use of aspirin in children for fever, there has been increasing use of low dose aspirin in children with cardiac and hematological conditions. These children are prone for complications with viral illness. Literature review suggests differing practices and lack of clear evidence due to rarity of the problem. There is no clear evidence on safety of low dose aspirin and risk of Reye's syndrome following viral illness. In view of high risk of mortality, it would be prudent to stop aspirin and replace with other antiplatelet agent prior to vaccination or specific viral illness. Such children would benefit from vaccination against chickenpox and influenza but that also has its own risks. Patients, who are on long-term aspirin treatment could do better by following a plan to reduce the risk of flu. Currently, children are routinely offered a single-dose intranasal live attenuated vaccine which is contraindicated in children even on low dose aspirin. There is a risk that some of these children may present to an acute paediatric setting following inadvertent vaccination with nasal vaccine and it will be useful to have a clear plan on continuation of the use of aspirin. Ideally, children on long-term aspirin treatment should receive yearly inactive flu vaccine. Develop an understanding of the risks involved for children on long-term aspirin treatment with varicella and influenza infection, as well as the risks of immunization for guideline development to improve safety and avoid medicolegal complications. All children with long-term aspirin treatment should be screened for varicella immunity and should receive yearly intramuscular inactivated influenza vaccine.

### Biography

Samarth Burle is a Paediatric speciality trainee from Yorkshire School of Paediatrics, NHS England, working toward becoming paediatric critical care specialist in UK. He is also doing his Masters in Clinical education from Edinburg University. He has completed his Paediatric Residency and Fellowship in Critical Care from India, before relocating to UK. His practice focusses on Quality improvement and has special interest in investigating unexplained clustering of disease for root cause analysis as a part of his quality improvement projects.

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