

# Performance of the Brighton Case Definition for Multisystem Inflammatory Syndrome in Children (MIS-C) Among a Large Single Center Cohort

<sup>1,2</sup>Jessica Nguyen, <sup>1,3</sup>Isabella Osuna, <sup>1,2</sup>Eyal Muscal, <sup>1,2</sup>Kristen S. Sexson Tejtzel, <sup>1,2</sup>Marietta M. DeGuzman, <sup>1,2</sup>Flor Munoz, <sup>1,2</sup>Tiphonie P. Vogel  
<sup>1</sup>Texas Children's Hospital and <sup>2</sup>Baylor College of Medicine and <sup>3</sup>Rice University, Houston, TX



## Background

- MIS-C is a rare, potentially life-threatening hyperinflammatory condition that follows 4 to 6 weeks after SARS-CoV-2 infection.
- The clinical features of MIS-C overlap with numerous other inflammatory conditions:
  - Kawasaki Disease
  - Toxic Shock Syndrome
  - Viral Myocarditis
  - Macrophage Activation Syndrome
- MIS-C is an adverse event of special interest following immunization.
- It is not yet clear which patients are at risk for MIS-C following SARS-CoV-2 vaccination.

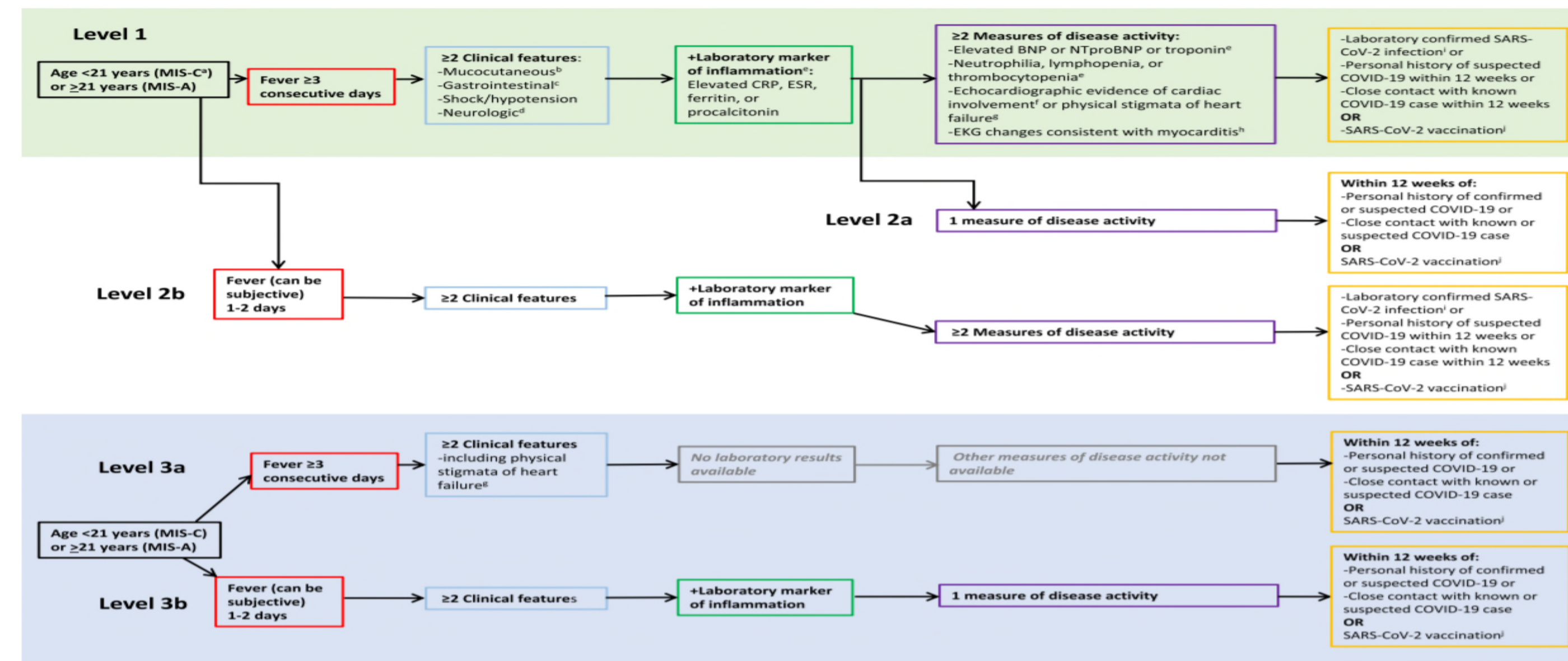
## Aim

Determine the performance of the Brighton Collaboration (BC) MIS-C case definition among a large, single-center MIS-C cohort.

## Methods

- Retrospective review.
- First 100 MIS-C cases at Texas Children's Hospital, between May 2020 and February 2021.
- All cases met the Centers for Disease Control and Prevention (CDC) case definition<sup>1</sup>.
- Data on age, presentation, laboratory results and cardiac studies were collected and used to determine cases that fulfilled the BC case definition for MIS-C.

## Brighton Collaboration Case Definition<sup>2</sup>

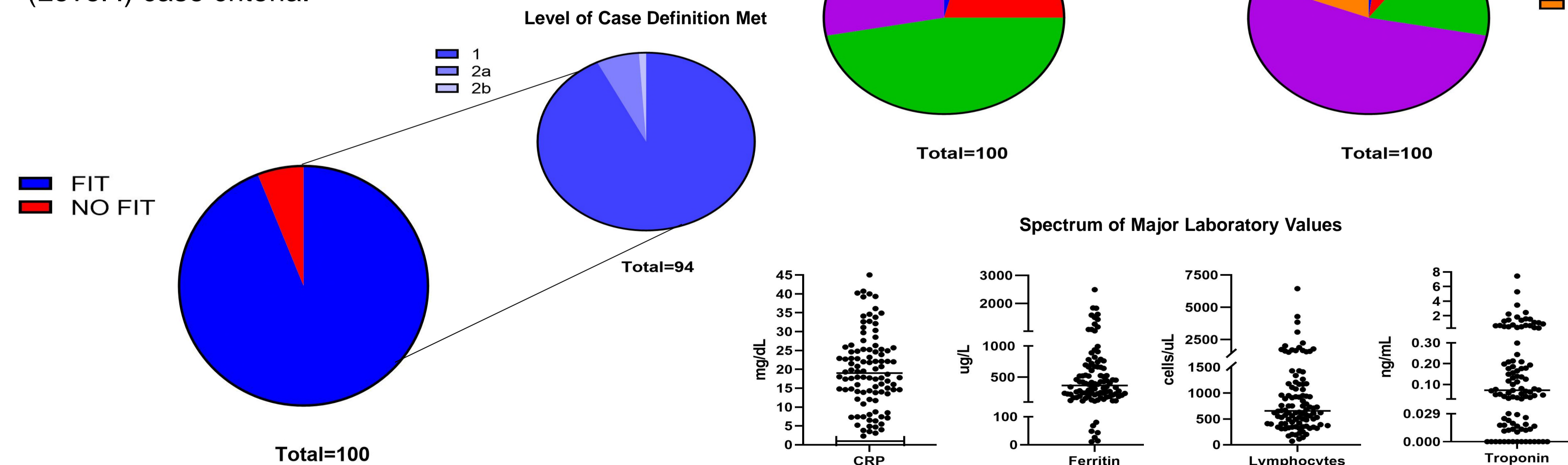


## Demographic Table

Table 1. Clinical and Laboratory Characteristics of the Patients	
<b>Characteristic</b>	
Age, median (IQR), years	8 (4 - 13)
Duration of Fever, median (IQR), days	7 (5 - 8)
Positivity of SARS-CoV-2 PCR, no./total no.	56/100
Positivity of SARS-CoV-2 Antibody, no./total no.	100/100
IgG Positive	58/100
IgG and IgM Positive	36/100
Clinical Features at Presentation, no./total no.	
Mucocutaneous	82/100
Gastrointestinal	92/100
Shock or Hypotension	78/100
Neurologic	47/100
Laboratory Markers, no./total no. (%)	
Elevated C-reactive Protein	100/100
Elevated Erythrocyte Sedimentation Rate	55/61 (90)
Elevated Ferritin	93/100
Elevated Procalcitonin	66/99 (67)
Elevated BNP or NT-Pro-BNP	79/100
Elevated Troponin	67/100
Lymphopenia	84/100
Neutrophilia	77/100
Thrombocytopenia, no./total no.	57/100
Abnormal Electrocardiogram, no./total no.	21/100
Abnormal Echocardiogram, no./total no.	79/100

## Results

Among the first 100 cases of MIS-C, 94 cases fulfilled the BC case definition for MIS-C. Of the 94 patients that met the BC definition, 87 (93%) met definite (Level I) case criteria.



## Conclusions

- The original MIS-C case definitions were created for surveillance.
- Modifications based on new knowledge will allow for more precise diagnosis.
- The BC case definition performed well at our institution and should be adapted to distinguish MIS-C from other inflammatory conditions or post-vaccine events.
- Future studies need to be designed to uncover correlations between clinical presentations and disease severity.

## References

1. Centers for Disease Control and Prevention. Multisystem Inflammatory Syndrome in Children (MIS-C) Associated with Coronavirus Disease 2019 (COVID-19). <https://emergency.cdc.gov/han/2020/han00432.asp> (2020).  
 2. Vogel, T. P. et al. Multisystem inflammatory syndrome in children and adults (MIS-C/A): Case definition & guidelines for data collection, analysis, and presentation of immunization safety data. *Vaccine* 39, 3037–3049 (2021).