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Editorial

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Current Challenges in Managing and Preventing Pediatric Infections During Armed Conflicts and Humanitarian Emergencies

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The recent devastating earthquakes in Turkey and Syria had devastating effects on children and increased the risk of infectious diseases in the affected population. Children have been continuously victimized by military and civil conflicts across the world in countries such as Syria, Afghanistan, Iraq, Yemen, Somalia, South Sudan, the Democratic Republic of Congo, Bangladesh, Venezuela, and Ukraine [1-3].

The infectious diseases encountered in these conflicts include infections resulting from trauma (e.g., wounds, burns, crush and blast injuries, open fractures, and amputations) [4]; lack of vaccination (e.g., tetanus, diphtheria, polio, pertussis, measles, mumps, varicella, *Haemophilus influenzae* type B (Hib), meningococcus, pneumococcus, hepatitis B, rotavirus, tuberculosis, and COVID-19) [5-11]; overcrowding; poor hygiene, sanitation, and nutrition; as well as lack of clean food and water. Such conditions have led to acute respiratory (including COVID-19) [12], and diarrheal illnesses such as cholera, skin infections and enteric diseases (i.e., cholera, and other enteric diseases) [5, 6].

A rise in cases of vector-borne parasite diseases (i.e., malaria, leishmaniasis), vector-borne viruses, and other parasitic diseases in infant mortality has also been observed [7]. The lack of medical providers, medications and medical supplies has aggravated the situation leading to an increase in childhood morbidity and mortality [1, 5].

The World Health Organization addressed the need to vaccinate children in acute humanitarian emergencies by publishing the document entitled "Vaccination in acute humanitarian emergencies: a framework for decision making" [13]. It proposes an initial epidemiologic evaluation of the risk of vaccine-preventable diseases, followed by an analysis of the feasibility of vaccine supply, and lastly a thorough evaluation of the obstacles and potential enhancements of vaccine delivery programs, including safety, staffing, finance, and cooperation between all participants.

It is essential that medical providers address, prevent, and manage these infections to the best of their abilities. It is also imperative that the United Nations International Children's Emergency Fund (UNICEF), the World Health Organization, as well as local and regional government, pediatric organizations and societies provide continuous support. Collaboration between all such entities and agencies is vital to address the tasks needed to prevent and treat the myriad of infections associated with humanitarian emergencies and armed conflicts across the world.

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Conflict of Interest

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Data Availability

The author declares that data supporting the findings of this study are available within the article.

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