

We understand patients and their families with rheumatological diseases requiring immunosuppressants are concerned in light of the current coronavirus pandemic and wish to seek advice from their clinical teams.

The situation in the UK is changing rapidly with advice being reviewed regularly. We therefore recommend that you follow the advice being provided by Public Health England for the latest information to keep you, your family and your community safe. This website has been updated with information up to the 19th January 2021.

We are currently in a new national lockdown as of January 4th 2021.The [Bradford City Council](https://www.bradford.gov.uk/health/health-advice-and-support/coronavirus-covid-19-advice/) and [National lockdown](https://www.gov.uk/guidance/national-lockdown-stay-at-home) websites provide further information on what you are and are not allowed to do.

Coronavirus (COVID-19) is spreading fast. By reducing our contact with people, we can reduce the spread of infection.

1 in 3 people who have the virus have no symptoms, so you could be spreading it without knowing it.

**The NHS and medical services like GPs and dentists are still open.** It is vital that anyone who thinks they need urgent medical care come forward and seek help.

Unfortunately at Bradford Teaching Hospitals, we are cancelling some elective work as the rheumatology team supports the COVID-19 response BUT we are still providing urgent care as needed and most routine appointments are still going ahead.

Please contact our helpline number for any urgent rheumatology queries but please have a read through this website first as many queries can be addressed with the information on here as our helpline is busier than normal at present.

**The main symptoms of coronavirus are:**

* a high temperature – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
* a new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
* a loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

Most people with coronavirus have at least 1 of these symptoms.

**What to do if you have symptoms:**

If you have any of the main symptoms of coronavirus:

* Get a test to check if you have coronavirus as soon as possible.
* You and anyone you live with should stay at home and not have visitors until you get your test result – only leave your home to have a test.

Anyone in your support bubble should also stay at home if you have been in close contact with them since your symptoms started or during the 48 hours before they started.

Have a look at these websites for information on [Test and trace](https://www.nhs.uk/conditions/coronavirus-covid-19/testing-and-tracing/get-an-antigen-test-to-check-if-you-have-coronavirus/) and [When to self isolate](https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/).

**Am I at higher risk of COVID 19?**

It remains the case that some people are more clinically vulnerable to COVID-19 than others.

People at moderate risk from coronavirus include people who:

* are 70 or older
* have a lung condition that's not severe (such as asthma, COPD, emphysema or bronchitis)
* have heart disease (such as heart failure)
* have diabetes
* have chronic kidney disease
* have liver disease (such as hepatitis)
* have a condition affecting the brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis or cerebral palsy)
* have a condition that means they have a high risk of getting infections
* are taking medicine that can affect the immune system (such as low doses of steroids)
* are very obese (a BMI of 40 or above)
* are pregnant – see [advice about pregnancy and coronavirus](https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/pregnancy-and-coronavirus/)

If you're at moderate risk from coronavirus, it's very important to follow social distancing advice to reduce your chances of catching or spreading the virus.

Unlike people at high risk, you will not get a letter from the NHS.

**What is the Clinically Extremely Vulnerable Group (CEV)?**

There is a group of people who are defined on medical grounds as [**clinically extremely vulnerable**](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19) to coronavirus – that is, people with specific serious health conditions. Some of our patients within rheumatology will fall within this group.

If you think there are good clinical reasons why you should be added to the Shielded Patient List, discuss your concerns with your GP or hospital clinician. People with the following conditions are automatically deemed clinically extremely vulnerable:

* solid organ transplant recipients
* people with specific cancers:
* people with cancer who are undergoing active chemotherapy
* people with lung cancer who are undergoing radical radiotherapy
* people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
* people having immunotherapy or other continuing antibody treatments for cancer
* people having other targeted cancer treatments that can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
* people who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs
* people with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD)
* people with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell disease)
* people on immunosuppression therapies sufficient to significantly increase risk of infection (this is relevant to some of our rheumatology patients)
* problems with your spleen, for example splenectomy (having your spleen removed)
* adults with Down’s syndrome
* adults on dialysis or with chronic kidney disease (stage 5)
* women who are pregnant with significant heart disease, congenital or acquired

Some of our rheumatology patients may have received a letter advising to shield during the first wave of the pandemic in March. As our patients’ medications change and clinical condition evolves, patients may fall in or out of the CEV group. Please have a look at the chart below, to see if you fall under the CEV group now and if you should follow guidance for the [Clinically Extremely Vulnerable](https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19).

The chart below focuses on identifying patients within rheumatology and does **not** cover other specialties**.** There may be other health grounds that have identified you as being CEV. If this is the case, then please discuss this with your GP or hospital specialist.

**Within our department, we have identified rheumatology patients that fall under the CEV group and letters are being sent out letters to our patients. If you have not received a letter yet, please have a look at our chart below, so you can follow the correct guidance.**

**If you think you fall under the CEV guidance and have not been identified, please let us know by contacting your consultant’s secretary.**

For additional support, please look here: [NHS volunteer responders](https://nhsvolunteerresponders.org.uk/) and have a look at the [Every Mind Matters](https://www.nhs.uk/oneyou/every-mind-matters/%20) website which is very good

**What do I do if fall under the CEV group?**

Some of our patients in rheumatology will fall under the clinically extremely vulnerable (CEV) group. As part of the national lockdown, the Government is advising all CEV people to take extra shielding measures to protect themselves. This advice will apply until 21st February 2021 for now but may be reviewed nearer the time. Here is more information on shielding. [Letter to CEV group](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/952748/Clinically_Extremely_Vulnerable_Letter_Jan_National_Lockdown_Final.pdf)

**Clinically Extremely Vulnerable Chart Patients:**



**What is our advice for our rheumatology patients?**

Should I stop my treatment?

Our general advice is to continue all your immunosuppressant medications because the health risk associated with a flare of your disease is likely to be greater than the risks associated with COVID-19. This is because of;

1. symptoms of your disease itself;
2. infection risk can be higher if your disease is not well controlled;
3. if you had a flare, the treatments needed to control the flare could be risky.

However, should you develop any symptoms of any infection, then we would recommend that your treatment is paused for the duration of the infection. This should be done in consultation with your clinical team. For advice on steroid medication (e.g. prednisolone), please read on for more information. You should **not** stop prednisolone or steroid treatment abruptly.

Will my treatment change?

There may be individual circumstances where your clinical teams may contact you to review your treatment, should any new evidence emerge about specific treatments. If you are on Infliximab, Abatacept or Tocilizumab and have this treatment on our day case unit (Ward F4), and if you fall under the CEV group, then please discuss with the rheumatology team if you wish to consider switching to injections that can be administered at home rather than on the day case unit.

Specific information on Rituximab:

We are reviewing treatment with Rituximab and in some cases we may suggest delaying treatment with Rituximab or we may suggest switching your treatment to an alternative drug. This will be decided on a case by case basis. This is because Rituximab in particular reduces the effectiveness of vaccines as it blocks the body from making antibodies.

If you have already had Rituximab, then it is safe to have the vaccine if you are offered it.

If you are offered the vaccine close to an infusion of Rituximab, then please contact us and we can consider delaying your treatment with Rituximab by a few weeks if it is safe to do so.

If you are offered the vaccine, we would encourage you to have it. A delay or not having the vaccine leaves you at risk of COVID-19 infection.

Advice on steroid tablets (for example prednisolone) and adrenal insufficiency:

Steroids should **NOT** be stopped suddenly and the dose will need to be reviewed by your clinical team.

Please make sure you tell your treating doctors that you are taking steroids and/or immunosuppressive treatments. You can print out a [Steroid alert card](https://www.endocrinology.org/media/3563/new-nhs-emergency-steroid-card.pdf) to keep with you.

Your body needs a little bit of steroid to function every day and this is made naturally in your adrenal glands. Your body needs a bit of extra steroid if you have a serious infection to help your body work during this time. Adrenal insufficiency occurs when your body cannot make this extra natural steroid.

If you have been taking 5mg of prednisolone or more for 4 weeks or longer, this may cause **adrenal insufficiency.** This can also occur once the dose of prednisolone has been reduced to below 5mg.

If you have coronavirus infection and are taking 5-19mg prednisolone daily, you should take 10mg prednisolone every 12 hours while you are unwell. This will be an increase in your total prednisolone dose.

Patients on more than 20mg prednisolone, should continue their usual dose but take it split into two equal doses of at least 10mg every 12 hours while you are unwell.

Should you develop coronavirus, you should drink plenty of fluids especially if you have adrenal insufficiency.

Are you unwell

with coronavirus infection and on prednisolone?

All patients should drink plenty of fluids especially if you have adrenal insufficiency.

Are you taking between

5-19mg prednisolone a day

Are you taking more than 20mg prednisolone a day?

You should continue your usual dose of prednisolone but take it split into two equal doses of at least 10mg every 12 hours (twice a day) while you are unwell.

You should increase your prednisolone to 10mg every 12 hours (twice a day) while you are unwell.

If you have any concerns about what to do with your medications, please contact the rheumatology helpline or your GP.

**Vaccines:**

People who catch COVID-19 can become very unwell. Many people will need hospital treatment even if they were previously fit and well.

Vaccines are a good way for people with rheumatology conditions to stay safe.

The rheumatology team (including your consultants and nurses) have been vaccinated or are waiting to be called for their vaccines. The rheumatology team have also volunteered in the vaccination programme as we appreciate how important it is to get our patients, colleagues and the population vaccinated to provide immunity and reduce the risk of COVID-19 infection.

**All of the COVID-19 vaccines available in the UK are safe for people with arthritis and people taking drugs that suppress the immune system, even if your condition is active. We would encourage you to take up your vaccine. If you are offered the vaccine and delay taking it, you leave yourself at risk of COVID-19.**

The NHS will contact you when it is your turn to have the vaccine. If you are not sure that the NHS has the right information about your COVID-19 risk level, then you should get in touch with your GP.

Many individuals who are clinically extremely vulnerable will have some degree of immunosuppression or be immunocompromised and may not respond as well to the vaccine. Therefore, those who are clinically extremely vulnerable should continue to follow government advice on reducing their risk of infection. Consideration has been given to vaccination of household contacts of immunosuppressed individuals. However, at this time there is no data on the size of the effect of COVID-19 vaccines on transmission.

More information on vaccinations can be found here [COVID Vaccine - your questions answered](https://www.versusarthritis.org/covid-19-updates/vaccines-for-covid-19-your-questions-answered/)

**Self management**

We encourage you to have a look at this website for self-management in the first instance [Managing pain at home](https://www.csp.org.uk/conditions/managing-pain-home). Simply click on the relevant body part to be taken to a full list of resources to help manage symptoms at home.

**Advice on Vitamin D**

If you're not going outdoors often, you should consider taking a daily supplement with 10 micrograms of vitamin D. These supplements can be bought in many supermarkets and from January 2021, the CEV group can apply for free vitamin D [here](https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/get-vitamin-d-supplements/)

**Work and Coronavirus**

Information on working safely during the COVID-19 pandemic can be found here [Working safely during coronavirus](https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19). The Versus Arthritis website is also very helpful. [Versus Arthritis Employment Advice](https://www.versusarthritis.org/covid-19-updates/covid-19-employment-and-work-information/)

**How is our service changing?**

We have moved to telephone consultations to reduce the need for patients to travel to reduce face to face contact. We appreciate that this is a significant change in how the NHS has operated, but it is necessary to protect you and your family. If we feel a face to face review is needed following a telephone or video consultation we can arrange this.

If you have a face to face appointment at the hospital, all visitors and outpatients will now need to wear a form of face covering to prevent spread of infection from the wearer.

PLEASE DO NOT ATTEND THE HOSPITAL OR YOUR GP’S SURGERY IF YOU HAVE A CONTINUOUS COUGH, FEVER OR LOSS OR CHANGE IN TASTE OR SMELL. You should self-isolate and follow NHS advice, which is continuously updated. [Stay at home guidance for households with possible coronavirus](https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection)

**Blood monitoring:**

The way we are arranging blood tests to be done is also changing. If bloods are needed following a telephone clinic, you will be asked to make an appointment with our blood taking department. In some circumstances, we may be able to increase the interval between blood tests and your GP and rheumatology team will be aware of this.

We appreciate this is very difficult for people and further government support can be found here [Coronavirus support](https://www.gov.uk/find-coronavirus-support). There is useful information on [Mental health and well being](https://www.gov.uk/government/publications/covid-19-guidance-for-the-public-on-mental-health-and-wellbeing) here as well.

**Summary of links provided above**

**National Lockdown Information**

https://www.gov.uk/guidance/national-lockdown-stay-at-home

**Bradford Council**

[https://www.bradford.gov.uk/health/health-advice-and-support/coronavirus-covid-19-advice/#local](https://www.bradford.gov.uk/health/health-advice-and-support/coronavirus-covid-19-advice/%23local)

**Versus arthritis**

<https://www.versusarthritis.org/news/2020/march/coronavirus-covid-19-what-is-it-and-where-to-go-for-information/>

**Test and Trace**

<https://www.gov.uk/get-coronavirus-test>

**Guidance on shielding and Protecting the Clinically Extremely Vulnerable**

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

**Government advice on Mental health and well being**

<https://www.gov.uk/government/publications/covid-19-guidance-for-the-public-on-mental-health-and-wellbeing>

**Working safely during Coronavirus:**

<https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19>

**Staying at home guidance for household with possible coronavirus**

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

**Coronavirus support**

<https://www.gov.uk/find-coronavirus-support>

**Managing pain at home**

<https://www.csp.org.uk/conditions/managing-pain-home>

**NHS Volunteer Responders**

<https://nhsvolunteerresponders.org.uk/>

**There is also support from:**

NRAS (National Rheumatoid Arthritis Society)

<https://www.nras.org.uk/news/coronavirus-what-we-know-so-far>

NASS (National Axial Spondyloarthritis Society)

<https://nass.co.uk/news/coronavirus-advice-for-people-on-biologic-therapy/>

Vasculitis UK

<https://www.vasculitis.org.uk/news/coronavirus-covid-19>