

Rheumatology Patients and Covid-19 – Updated 19 March 2020

Q – Should I stop taking my naproxen/ibuprofen?

A – We currently do not advise stopping your regular anti-inflammatory at this time. However, the most recent NHS advice from 18th March is that if you develop a temperature/symptoms then you should use regular paracetamol rather than Ibuprofen to reduce your temperature.

Q – Should I stop taking my disease modifying (DMARD) medication and/or Biologic drug? (Disease Modifying medications include Methotrexate, Mycophenolate Mofetil, Azathioprine, Leflunomide, Sulfasalazine, Hydroxychloroquine.)

A – We would not recommend stopping your DMARD/Biologic if you are currently well and do not have any symptoms. However, as with any symptoms of infection, you should stop your DMARD/Biologic and ensure that you inform any healthcare professional that you normally take a DMARD/Biologic drug. If you have symptoms suggestive of Covid-19, please follow the 111 advice which can be found at <https://111.nhs.uk/covid-19/>

Q – I am taking prednisolone. Should I stop this if I become unwell or are in contact with a confirmed case of Covid-19?

A – You should never stop taking your steroids (prednisolone) without medical advice, no matter what dose you are on. If you develop any symptoms of infection, you should ensure that you inform any health professional you are seeing that you are taking prednisolone, the dose you are taking and the length of time you have taken it. Again, if you have symptoms suggestive of Covid-19, please follow the 111 advice which can be found at <https://111.nhs.uk/covid-19/>

Q – Am I more at risk of developing Covid-19 because I take a biologic/DMARD/steroids?

A – People who have an auto-immune condition and are currently taking medication which can affect the immune system may have a greater risk of developing infections. However, there is currently no medical evidence to suggest that stopping your medication will reduce your risk in the short term. Stopping your medication when well may cause your inflammatory condition to flare which may make it more difficult for you to manage your normal activities. Stopping steroids abruptly can make you very unwell and should never be stopped without medical advice. The advice provided by Gov UK and NHS to reduce your risk of infections should be followed. This includes the advice about maintaining high standards of personal hygiene and reducing social contact, such as working from home where this is possible.

Q – I am a health professional with an auto-immune condition taking DMARDs/Biologics/steroids. Should I continue to work in the hospital/GP surgery?

A – Wherever possible you should try to reduce your risk of direct patient contact with high risk patients. You should contact your line manager and Occupational Health and, if possible, to undertake working from home or within another area. Wherever available, patient consultations should be via electronic methods rather



than face to face. We can of course provide written information with your consent about your condition/medication if required to give to managers.

Q – Should I still have my blood test monitoring for my medication?

A – It is very important that we continue to monitor your bloods for safety reasons. We would advise that you attend your GP surgery for your blood monitoring rather than attending the phlebotomy departments at Stoke Mandeville or Wycombe Hospitals. At the present time, if you have to attend the hospital for blood tests we would recommend that you attend Amersham Hospital Phlebotomy service rather than Stoke Mandeville or Wycombe.

Q – I am due to have my scheduled Biologic infusion; will it go ahead?

A – We are not stopping planned infusions of biologic drugs at the present time. However, for some patients whose disease is stable, and they wish to defer their treatment, this can be discussed with the consultant in charge of an individual's care. If you are unwell and are unable to proceed with your planned infusion, please let us know as soon as possible to ensure that the medication is cancelled in pharmacy in good time.

Q – I am due to start/switch to a new DMARD or Biologic; should I start it now?

A – If possible, we are now planning to defer starting/switching any new DMARD or Biologic drug. However, for some patients, it may be that commencing the treatment is more beneficial than deferring treatment. Commencing/switching treatment at this time will be on Rheumatology Consultant advice only after discussion with the individual patient.

Q – I am due to attend for a rheumatology appointment. Should I cancel?

A – Please do not cancel your appointment at the present time. If you have a scheduled appointment, are currently well and your condition is stable, you do not have to attend the clinic, and instead you will get a telephone call from your consultant on the same day. If your consultant feels that you do need to be seen, arrangements will be made to see you in one of the Out-patient clinics.

Q – I am due to start my Denosumab or have my 6 monthly injection. Should I attend?

A – If you are having 6 monthly Denosumab injections, we will contact your GP surgery to arrange for you to have your injection there if at all possible. For those starting Denosumab, we are going to defer commencing the treatment at the present time and will contact you to arrange this.

Q – I am due to have Zoledronate infusion for osteoporosis. Should I attend?

A- If you are due for zoledronate infusion please contact our department to defer it . Your safety from COVID-19 infection takes a priority. Your infusion will be rearranged due course.