

# **Shielding the vulnerable patient from Covid-19**

**Written by: Dr. Kevin Barrett and  
Dr. Toni Hazell**

# What is shielding and how is it different from social distancing?

- Strictly avoid contact with someone who is displaying symptoms of coronavirus (COVID-19). These symptoms include high temperature and/or new and continuous cough.
- Do not leave your house.
- Do not attend any gatherings. This includes gatherings of friends and families in private spaces for example family homes, weddings and religious services.
- Do not go out for shopping, leisure or travel and, when arranging food or medication deliveries, these should be left at the door to minimise contact.
- Keep in touch using remote technology such as phone, internet, and social media.

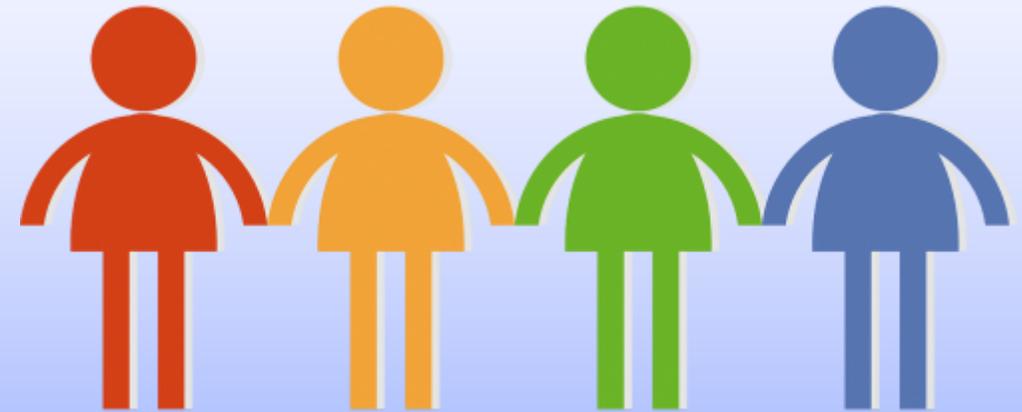


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# Who needs to start shielding?

4 groups:

- Group 1 have been sent letters
- Group 2 will be contacted by cancer units
- Group 3 will be contacted by secondary care
- **We need to identify Group 4**



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# Group 1

- Solid organ transplant recipients
- People with specific cancers:
  - people with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
  - 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 which 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 COPD.
- People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
- People on immunosuppression therapies sufficient to significantly increase risk of infection.
- Women who are pregnant with significant heart disease, congenital or acquired.



# Group 4

- Patients with Chronic Obstructive Pulmonary Disease (COPD) who have required hospitalisation in the last 12 months or patients who have required 2 or more courses of steroids and/or antibiotics in the last 12 months.
- Patients with asthma with a history of hospitalisation in the last 12 months or ever been admitted to intensive care.
- Patients with significant heart failure which has required hospitalisation for their heart failure within the last 12 months.
- Patients with multiple long-term conditions.
- Patients who have had a splenectomy.
- Patients taking continuous oral corticosteroids of the equivalent of 20 mg of prednisolone or more for over 4 weeks.
- Patients taking immunosuppressive or immunomodulating medication such as ciclosporine, cyclophosphamide, azathioprine, leflunomide, methotrexate, mycophenolate.
- Other patients that the general practitioner considers would be at high risk such as patients with severe dementia, cognitive impairment.

# Which patients should definitely shield due to their medication?

- Prednisolone  $\geq$  20mg/day
- Use of oral cyclophosphamide or IV dose in the last 6 months
- For all other drugs the guidance varies depending on what body system is affected by the disease



# Dermatology

## Social distancing only:

- Topical treatments
- Certain oral treatments e.g. hydroxychloroquine and isotretinoin

## Shield only if other concerns or high-risk circumstances:

- Well controlled disease
- No co-morbidities
- On a single immunosuppressant and/or biologic and/or hydroxychloroquine or sulfasalazine (two medications at most, no more than one from each category)

## High risk – advise to shield:

- Patients on at least two immunosuppressants/biologics who either have co-morbidities or whose disease is not well controlled
- Prednisolone  $\geq$  5mg per day plus at least one other immunosuppressant or biologic
- Rituximab or infliximab use for a skin condition



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# Gastroenterology

## Social distancing only:

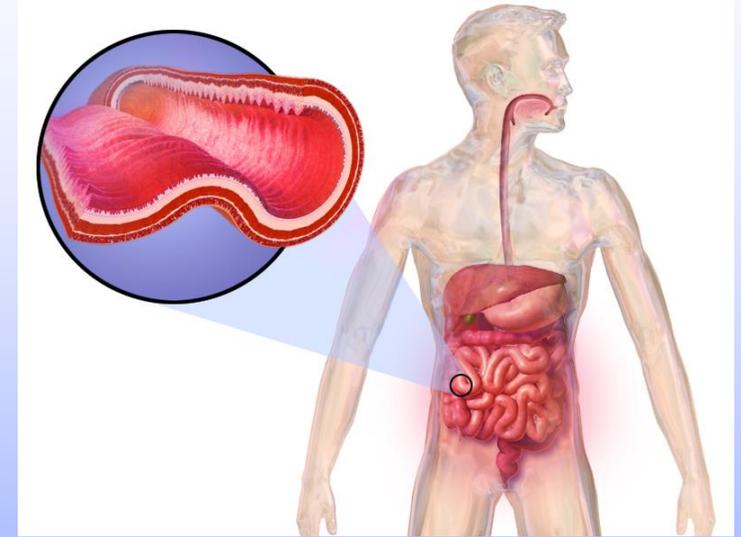
- Rectal therapies
- Drugs for diarrhoea and bile acid diarrhoea (loperamide, colestyramine)
- 5ASA drugs, prophylactic antibiotics, oral budesonide or beclometasone

## Shield only if other concerns or high-risk circumstances:

- Most patients on a single immunosuppressant
- Stable patients on combination therapy

## High risk – advise to shield:

- Patients who are  $\geq 70$  or have a co-morbidity such as diabetes or hypertension and are on therapy other than those mentioned in the social distancing section above
- Started a biologic therapy in the previous six weeks or using TPN
- Disease which is moderately or severely active despite biologics/immunosuppression
- Short gut syndrome



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# Rheumatology

## Social distancing only:

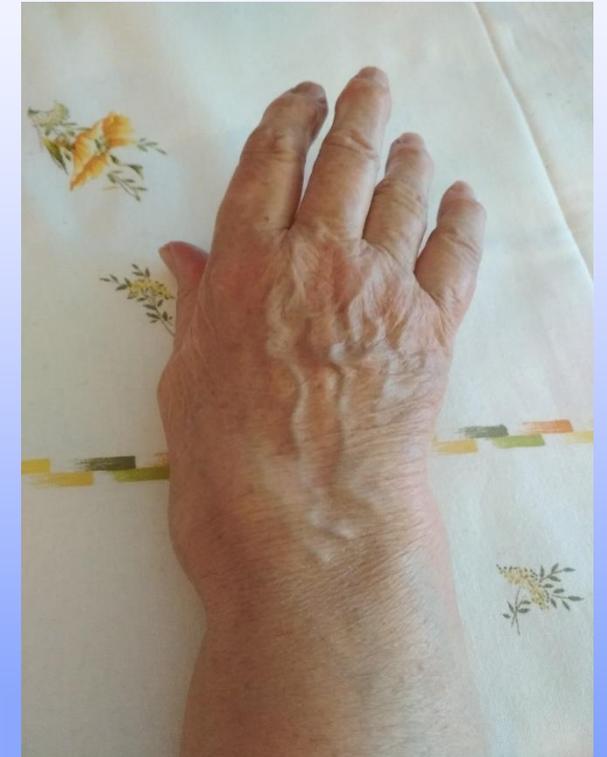
- One immunosuppressant or biologic drug
- Age >70 or any co-morbidities

## Self-isolate or use social distancing at patient's discretion:

- Oral prednisolone <20mg but  $\geq$  5mg per day for more than four weeks
- Those using up to one immunosuppressant and one biologic drug

## High risk – advise to shield:

- Patients on two immunosuppressants or two biologic drugs
- Steroids of  $\geq$  5mg per day plus at least one other immunosuppressant or biologic



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# What to do now?

- Work out how you will identify group 4 and send them a letter (template in resources section)
- Find out what your local arrangements are for patients who are shielding and need to see a doctor in person. Is there an extra visiting service? If not, does there need to be?
- Consider identifying lines of communication with your local rheumatology, dermatology and gastroenterology departments in case there are any patients for whom the situation isn't clear and you need further advice.



# References

**British Society for Rheumatology – identifying high-risk patients**

<https://www.rheumatology.org.uk/News-Policy/Details/Action-needed-coronavirus-identifying-high-risk-patients>

**British Association for Dermatologists – advice regarding immunosuppressed patients**

<http://www.bad.org.uk/shared/get-file.ashx?itemtype=document&id=6648>

**British Society of Gastroenterology COVID-19 Guidance on IBD patient risk groups**

<https://www.bsg.org.uk/covid-19-advice/bsg-advice-on-ibd-patient-risk-groups/>

# Resources

## Letter to send to patients who need to shield

[https://www.rheumatology.org.uk/Portals/0/Documents/At\\_risk\\_patient\\_letter\\_210320.pdf?ver=2020-03-22-171419-000](https://www.rheumatology.org.uk/Portals/0/Documents/At_risk_patient_letter_210320.pdf?ver=2020-03-22-171419-000)

# Thank you for listening

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