



Australian Rheumatology Association

Important information for people with Rheumatoid and other Inflammatory Arthritis, Systemic Lupus Erythematosus and other Autoimmune Diseases in the COVID-19 (Coronavirus) pandemic April 2020

This is GENERAL advice. If you have specific questions please contact your specialist.

We understand that many of you are feeling particularly vulnerable and anxious because you have chronic illnesses and take medications that may affect the immune system, so we hope this information will help.

At present, there is insufficient data as to whether patients with rheumatic diseases or those using immunosuppressive therapy who contract COVID-19 are at increased risk of worse outcomes.

- Studies of the outbreak in Wuhan have not found that immunosuppressive treatments prescribed in rheumatology patients contribute to a worse outcome.
- Early experience from Italy shows patients with chronic arthritis treated with immunosuppressive do not seem to be at increased risk of respiratory or life-threatening complications from COVID-19 compared with the general population.
- An international registry for patients has been created and up to date information is being continuously monitored. This includes a patient experience survey (<https://rheum-covid.org/patient-survey/>).

There is a higher risk of worse outcomes in people who:

- Are Over 70 years of age.
- Have chronic lung, heart or kidney disease.
- Have poorly controlled diabetes or blood pressure.

What should I do if I am well?

Do NOT stop your medications. There is no evidence to suggest that **WELL** patients, without fever or signs of infection, should change or stop any of their regular prescribed medications including:

- DMARDs: methotrexate (including Methoblastin and Trexject injections), hydroxychloroquine (Plaquenil), leflunomide (Arava), sulfasalazine (Salazopyrin), azathioprine (Imuran), mycophenolate (CellCept, Myfortic).
- Biologics (bDMARDs): abatacept (Orencia), adalimumab (Humira), certolizumab (Cimzia), etanercept (Enbrel, Brenzys), golimumab (Simponi), infliximab (Inflixtra, Remicade), ixekizumab (Taltz), rituximab (MabThera, Riximyo, Truxima), secukinumab (Cosentyx), tocilizumab (Actemra), ustekinumab (Stelara).
- Targeted DMARDs (tsDMARDs): baricitinib (Olumiant), tofacitinib (Xeljanz).
- Anti-inflammatories: eg celecoxib (Celebrex), ibuprofen (Brufen), meloxicam (Mobic), naproxen (Naprosyn).
- Steroids: prednisone or prednisolone.

The COVID-19 pandemic may last months, so if you stop your medicine you may have a flare and need to restart or have to take more intensive treatment with steroids. **We do not recommend stopping your rheumatology medication. Do not stop steroids suddenly or you may become very unwell.**

To date there is no direct or clear evidence of harm or adverse events when anti-inflammatories are used in the setting of a COVID-19 infection. It is important if you use ibuprofen, naproxen or other such medication to treat your chronic diseases you should not stop treatment.

If you are on these medicines and have risk factors for COVID-19 noted above or have had a history of recurrent infections while on these medicines, it is especially important to take actions to reduce your risk of exposure and you should practice strict social distancing to protect yourself. An excellent resource from the UK can be found at <https://www.youtube.com/watch?v=uNGPfmtHgtI>.

If you are on a biological medication and someone close to you has a confirmed COVID-19 infection, talk to your GP or rheumatologist about delaying your next dose.

What should I do if I get sick?

If you think you have been exposed or have developed symptoms, seek medical advice from your general practitioner. If you have fever, sore throat, shortness of breath or cough, **CALL FIRST** and tell them you are on immunosuppressive medications. You can also call the National Coronavirus Health Information Line **1800 020 080** or your state or territory public health agency and they will be able to advise you.

If you are acutely unwell, please call an ambulance as you would do normally in an emergency situation.

If you develop symptoms of any significant infection, as usual you should pause immunosuppressive medicines for the duration of the infection in consultation with your rheumatology team. If you are on steroids (prednisone) do not stop suddenly; seek advice from your treating team.

If you have questions about your immunosuppressive treatment, contact your rheumatologist/immunologist or other prescribing specialist for advice.

What about work?

You may consider contacting your rheumatologist if you are vulnerable (<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/advice-for-people-at-risk-of-coronavirus-covid-19#chronic-conditions-that-increase-the-risk-of-serious-illness-from-covid19>) and require a letter for your employer.

What if I am a health professional but also have a rheumatic condition?

Talk with your line manager/clinical lead, occupational health and treating rheumatologist so they are all aware of your medication and scope of practice.

What can I do to help prevent the spread of coronavirus?

IT IS VITAL THAT EVERYONE IN AUSTRALIA FOLLOWS THE GENERAL PUBLIC HEALTH ADVICE

Avoidance of all non-essential contact with people is recommended. This includes:

- exercise personal responsibility for social distancing.
- working from home if possible.
- avoiding public spaces.
- avoiding unnecessary travel.
- using telehealth/phone to communicate with doctors where possible (see below)

Excellent personal hygiene is needed. This includes:

- Wash your hands frequently with soap and water, before and after eating, after going to the toilet, after being out in general community areas (schools, shops, after touching lifts, escalators, shopping trolleys etc).
- Washing your hands for 20 seconds with soap and water. Wash the backs of your hands, tips of your fingers, thumbs and wrists; use alcohol-based hand sanitiser if soap and water is not available.
- Sneeze/cough into a disposable tissue or your elbow and then wash your hands. Please dispose of tissues and use alcohol-based hand sanitiser.

- Limit touching your face.
- Sanitise your phone, computer and work surfaces regularly.

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There is no evidence to suggest that you should wear a mask unless you are advised by a health care professional to do so. Gloves do not replace the need to wash your hands as above.

What about vaccinations?

- It is really important your vaccines are kept up to date.
- Have the Flu vaccination when available and appropriate.
- Consider pneumococcal vaccination– please discuss this with your GP.

What about supply of medications?

There have been reports of supply issues with some medications such as hydroxychloroquine (Plaquenil) and sulfasalazine (Salazopyrin). Measures have been put in place to ensure those needing the medications for approved indications will be able to access them. Some pharmacies may ask for a letter to confirm you are taking the medication for an approved indication. Your rheumatologist can supply that. Please do not stockpile. Ask your pharmacist to contact the wholesaler as companies have confirmed there is adequate supply.

What about appointments and blood tests?

If you are on a b/tsDMARD, due to the exceptional circumstances, you do not have to see your rheumatologist face to face for a repeat prescription. Seek a review via the phone or telehealth. COVID-19 bulkbilled Medicare items numbers have been created; please contact your rheumatologist as soon as possible if you are under financial stress.

If you need blood tests, there are now Medicare rebates which may allow you to have these collected at home.

What about new services?

A number of new services are available during the current crisis that may help you including

- home delivery of medications.
- prescriptions sent directly to the pharmacy.
- priority shopping and/or home delivery.

What else can I do?

You should try to exercise each day. This is helpful for general physical and psychological health, but especially while in social isolation.

As your health care providers, all members of the Australian Rheumatology Association, (rheumatologists, nurses, physiotherapists, exercise physiologists and other allied health providers), are keen to provide you with information about the COVID-19 (Coronavirus) situation.

As more information becomes available, this document will be updated.

For the latest advice, information and resources, please refer to Department of Health at <https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources>. There are resources available in Farsi, Italian, Arabic, Vietnamese, Korean, Simplified and Traditional Chinese.

National Coronavirus Health Information Line **1800 020 080** – operates 24 hours, seven days a week. If translation or interpreting services needed, call **13 14 50**.

The phone number of your state or territory public health agency is available at <https://www.health.gov.au/about-us/contact-us/local-state-and-territory-health-departments>