Guide to social distancing and shielding for child / teenage rheumatology patients A-see next page

This advice is a consensus of UK paediatric rheumatologists/ophthalmologists based on the current available information, and so may change as we understand more about COVID-19/coronavirus. Please be aware that your child may change risk category if their treatment plan changes

START HERE Is the child taking more than half a mg of prednisolone (steroid) for every kg they weigh, and have they been taking this for more than 4 weeks? (See typical weight for different ages on the next page B) Has the child been taking 5mg or more of prednisolone (steroid) every day for 4 weeks or longer, AND one or more of the medications in the BIG BOX at the bottom? Has the child taken cyclophosphamide within the last 6 months? Can you answer yes to either of the following? • Has the child ever had one of the following: diabetes, lung disease (not mild asthmac), Yes kidney disease, heart problems, or needed tablets for blood pressure? This includes involvement of their lungs, heart or kidneys from their rheumatic disease. Has the child had a flare requiring new treatment for their disease over the last 3 months?* (*NOT including eye drops, joint injections, or non steroidal medicines like Ibuprofen) Yes No Can you answer yes to either of the Can you answer yes to either of the following? following? Does the child take **ONE OR MORE** of the Does the child take **ONE OR MORE** of the

medications in the **BIG BOX** below?

Has the child been on 5mg or more of prednisolone every day for 4 weeks or longer?

medications in the BIG BOX below?

∩R

Has the child been on 5mg or more of prednisolone every day for 4 weeks or longer?

Yes

The child is at HIGH risk and we advise them to follow the government's **SHIELDING** recommendations at www.gov.uk/coronavirus

The child is at MODERATE risk and we advise STRICT **SOCIAL DISTANCING** and to significantly limit face-to-face interaction with people who do not live in the household

The child is at **LOW** risk and we advise they follow **SOCIAL DISTANCING** as for the general public

PLEASE NOTE that since 23rd March, all of the UK has been ordered to practice STRICT SOCIAL DISTANCING

BIG BOX (see the next page for full list of medication names)

Conventional immunosuppressant medications include: Azathioprine, Leflunomide, Methotrexate, Mycophenolate (Mycophenolate mofetil or Mycophenolic acid), Ciclosporin, Tacrolimus, Sirolimus. It does NOT include Hydroxychloroquine or Sulphasalazine either alone or in

Biologic/targeted synthetic medications include: Rituximab within last 12 months; all anti-TNF drugs (Etanercept, Adalimumab, Infliximab, Golimumab, Certolizumab and biosimilar variants of all of these); Tocilizumab; Sarilumab; Abatacept; Belimumab; Anakinra; Canakinumab; Secukinumab; Ixekizumab; Ustekinumab; and includes all JAK inhibitors

- A. This advice is for all those aged under 16 years, but is also consistent with the advice for all adults aged under 70 years
- B. The table below tells you typical weights for different ages
- C. Children with severe asthma should receive advice from their paediatric team looking after the asthma

Typical weight for different ages:				
Age	Typical weight	half a mg of prednisolone for every kg of child's weight is:		
<2 years	Under 10kg	5mg daily		
3 – 5 yrs	16kg	8mg daily		
6-8 yrs	20 kg	10 mg daily		
9-11 yrs	30 kg	15mg daily		
12 and older	40 kg	20 mg daily		

Heaful	website	and	links
oseiui	website	anu	IIIIKS

https://www.gov.uk/guidance/coronaviruscovid-19-information-for-the-public

https://www.versusarthritis.org

https://www.ccaa.org.uk

http://www.oliviasvision.org

https://wordday.org/wpcontent/uploads/2020/03/WORDday2020-CORONA-PReS-guidelines.mp4

Medicines in the big box: you can find the list of drug and trade names here.

Conventional immunosuppressant medications include:

Azathioprine (AZA)

Ciclosporin

Methotrexate (MTX)

Mycophenolate (mycophenolate mofetil, mycophenolic acid, MMF, Cellcept)

Leflunomide

Sirolimus

Tacrolimus

It does NOT include Hydroxychloroquine or Sulphasalazine either alone or in combination

Biologic/targeted synthetic medications include:

ALL anti-TNF drugs: Etanercept (Enbrel, Benepali), Adalimumab (Humira, Amgevita), Infliximab (Remicade), Golimumab (Simponi), Certolizumab (Cimzia) and biosimilar variants of all of these

Rituximab within last 12 months

Tocilizumab (Roactemra); Sarilumumab (Kevzara)

Abatacept (Orencia)

Belimumab (Benlysta)

Anakinra (Kineret); Canakinumab (Ilaris)

Secukinumab (Cosentyx); Ixekizumab (Taltz); Ustekinumab (Stelara)

and includes all JAK inhibitors (Baricitinib, Tofacitinib)