

Updated 24th March 2020

COVID-19: Guidelines for the Neuromuscular Service, Guys and St Thomas' NHS Foundation Trust

General Health Advice (from DHSC/PHE/FCO, updated 23 March 2020)

1. The risk of Coronavirus has been raised to high.
2. The government published its coronavirus action plan on 3 March. The Prime Minister has issued strong and clear guidance on 23rd March 2020 to **STAY AT HOME**
3. The Health Protection (Coronavirus) Regulations 2020 have been put in place to reduce the risk of further human-to-human transmission in this country by keeping individuals in isolation where public health professionals believe there is a reasonable risk an individual may have the virus.
4. **STAY AT HOME** except for essential grocery shopping, medical visits or one trip for exercise per day and do not congregate in groups of more than 2. Stay 2 metres apart
5. All non-essential travel has been strongly discouraged both within and outside the UK, if it is possible at all. Risks of not being able to return are very high. People who are returning to the UK and have symptoms of coronavirus have been advised to self-isolate for 14 days.
6. Patients with symptoms to suggest Coronavirus should self-isolate for 7 days and contact 111. Patients contacting 111 should state that they have an autoimmune neurological condition and that they are taking immunosuppressant medications (state the name of the drug, dose and duration of treatment).
7. Patients at High Risk (on immunosuppressant drugs or with some neurological and other conditions are advised to **self isolate** for 12 weeks. The important list of conditions and drugs can be found [here](#)
8. If you in a high risk group advised to self isolate please register at <https://www.gov.uk/coronavirus-extremely-vulnerable>

Preventing Coronavirus infection:

- a. **STAY AT HOME**
- b. Avoid close contact with any other people, not only those who are unwell.
- c. Social isolation is now essential for those over 70, and those under 70 but with other underlying medical conditions – see ABN guidance
- d. Hand hygiene is very important for preventing spread of infection - wash hands with soap and water (or use alcohol hand gel) as often as possible especially after going outside.
- e. Cover the mouth and nose when coughing or sneezing with a tissue or a sleeve
- f. There is no evidence that wearing surgical masks reduces the risk to an unaffected individual.
- g. If you have a new continuous cough or high temperature please self-isolate for 7 days. If a member of your family or somebody that you live with has symptoms then your household will need to self-isolate for 14 days. Ask someone else to do your shopping for essential groceries.

General advice

Advice from PHE is updated daily <https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public>

Consult your patient information booklet for the medication you are taking for specific advice. If you don't have one please contact your team.

If you or any members of your family have symptoms suggestive of coronavirus please do not come to the hospital unless it is absolutely essential

Do not travel

Immunosuppressant medications

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People who are immunosuppressed *may* be at increased risk of COVID-19 infection., and infection may in some cases be more severe.

If you are on IVIg or receiving regular PLEX your treatment will not be altered you are at a particularly high risk of infection, or if the risk of attending hospital outweighs the potential benefit. IVIG augments your immune response but do not suppress it; the treatments offer no specific benefit against COVID19.

If you are already being treated with azathioprine, methotrexate or mycophenolate your care will continue as before. These agents take many weeks or months to leave the body stopping the drug may lead to a flare of symptoms and potentially more risk. Please be very careful to follow the General and Prevention advice above. If you have already been treated with cyclophosphamide or rituximab your care will continue as before, though the Neuromuscular team will be in contact if you are due repeat treatment soon, to discuss if this treatment will go ahead as planned or be deferred.

If you are waiting to start a treatment such as cyclophosphamide or Rituximab the Neuromuscular Team will be in contact with you to discuss this; in many cases, where possible, this will be deferred.

High dose steroids

1. High-dose steroids *may* increase the risk of developing COVID-19 infection, and potentially the risk of severe infections.
2. The decision about whether the symptoms you are experiencing require steroid treatment will be decided by your Consultant, as sometimes the risk of stopping may outweigh the risk of continuing. Please contact us specifically if you are concerned about this, or contact 111 as above if you have symptoms.

IVIg treatment

Intravenous immunoglobulin infusions (IVIg) do not increase your risk of contracting COVID-19 or being more unwell due to COVID-19. Please do not attend hospital for IVIG if you are feeling unwell – contact your consultant. Your consultant will contact you if there is a specific reason why we should delay your IVIg for now, as some treatments are being rescheduled.

Myasthenia Gravis

There have been reports that drugs including chloroquine, hydroxychloroquine and azithromycin (possibly other macrolides) *may* be beneficial in severe COVID infection. However, these agents have potential to worsen neuromuscular transmission and precipitate a Myasthenic Crisis. These should not be routinely taken by patients with MG and should be used cautiously only in specific circumstances. If you have doubts about taking any new medication, please consult your GP or pharmacist. There is also a list of drugs and information regarding Covid 19 and Myasthenia Gravis on the MY Aware website. <https://www.myaware.org>

We are advising those who are at increased risk of severe illness from coronavirus (COVID-19) to be socially isolate immediately for 12 weeks.

This group includes those who are:

- aged 70 or older (regardless of medical conditions)
- Anyone with the neurological conditions listed in the ABN document
- In addition to the neurological conditions, anyone under 70 with an underlying health condition listed below (ie anyone instructed to get a flu jab as an adult each year on medical grounds):
 - chronic (long-term) respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
 - chronic heart disease, such as heart failure

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- chronic kidney disease
- chronic liver disease, such as hepatitis
- diabetes
- problems with your spleen – for example, sickle cell disease or if you have had your spleen removed
- a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets or chemotherapy
- being seriously overweight (a BMI of 40 or above)
- those who are pregnant

Clinic appointments

If you have a clinic appointment booked with the neuromuscular team, these appointments are almost all being undertaken by telephone. **DO NOT** come to your clinic appointment unless you are specifically asked to do so. You will be telephoned to either check on your status or to re-schedule. In exceptional circumstances we will ask you to attend.

If you are due to have routine monitoring blood tests for your treatment you will still need to have these blood tests done, either in a hospital or via your GP and we will access the results remotely. Please let us know if you have done this.

If you are unwell, and have any symptoms suggestive of coronavirus- please do not attend outpatients or the hospital unless absolutely necessary, please contact 111 as suggested above.

Should you be advised that you have coronavirus, please do inform the Neuromuscular Team as soon as possible.