

Coronavirus (Covid-19) patient information for adults with sickle cell disease

Shielding for patients with sickle cell disease

As of 24.03.20, sickle cell disease (incl. HbSS, HbSC, HbS beta thal etc.) is specifically mentioned as a 'vulnerable group' for whom shielding is advised. Please read UK Government advice on shielding: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

You are strongly advised to stay at home at all times and avoid any face-to-face contact for a period of at least 12 weeks. It may take several days for you to receive your NHS letter. Please note that the length of time suggested for shielding could change.

This is the 'Easy read' version of this guidance

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/875126/Easy_read_guidance_on_shielding_March_2020.pdf

Work: If you are unable to work from home and need a letter for your employer outlining your need for shielding, please contact Sandy.hayes@ouh.nhs.uk

Am I at increased risk of catching Covid-19?

No, your risk of catching Covid-19 is the same as everyone else in the population.

Would I get a more severe version because of my "underlying health condition"?

Looking at what is happening in other countries and having spoken to doctors in Italy where they also have sickle cell disease and Covid-19, there does not appear to be a higher risk of severe disease. However, the worry with sickle cell disease is that if Covid-19 infection gives you pneumonia (lung infection) and you have lower levels of oxygen in your blood, this could trigger a chest crisis requiring hospital admission.

Are there risks from the blood transfusion itself?

Due to precautions being taken, we anticipate no additional risk of either being unable to find safely matched blood for blood transfusions or any additional risk of contracting Covid-19 from the blood itself.

Should I stop my hydroxycarbamide because of the increased risk of infection?

No, you should continue your hydroxycarbamide as it is protecting you from crises and having to come in to hospital. It does not increase the risk of viral infections. Your medical team will contact you if dose changes are required.

Are there any medications I should avoid?

Yes, we currently advise against using Ibuprofen/Naproxen or any other non-steroidal inflammatory drugs.

What else should I do to protect myself from catching Covid-19?

We recommend that you do everything you can to stay well and out of hospital to minimise your chances of having to come in to hospital where other patients may have Covid-19. This means taking your regular penicillin prophylaxis, being up to date with your vaccines, staying warm and hydrated.

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What do I do if I think I have Covid-19?

If you have a cough and a fever, current NHS guidance is to self-isolate until you get better or your symptoms get worse and you have difficulty breathing.

THIS IS NOT SAFE FOR PEOPLE WITH SICKLE CELL DISEASE- that is because your cough and fever may be due to something else. For example, if you have a bacterial infection and need antibiotics, staying home and delaying contact with the hospital could be dangerous.

Therefore our advice is to Contact 111. Explain you have sickle cell disease, cough and a fever and ask if you need to be tested for Covid-19.

- (1) If they say yes, follow their instructions about where to get tested.
- (2) If they say no and that you should self-isolate, follow **the usual instructions you would if you were having a sickle cell crisis.** Depending on where you are, this may be to attend A&E, or a triage unit.

Please let your haematology team know if you have contacted 111.

Hydroxycarbamide for sickle cell disease in the context of Covid-19

Many patients who are on hydroxycarbamide have been asking what they should do about this medication. This is because they are well aware that:

- (1) Sickle cell disease puts you at risk of increased infections because of a non-functioning spleen
- (2) Hydroxycarbamide puts you at risk of increased infections by lowering your white blood cell count.

It is therefore logical to wonder whether you should be stopping your hydroxycarbamide until the Covid-19 epidemic has passed.

The short answer is: do not stop your hydroxycarbamide.

Being on hydroxycarbamide does not increase your risk of viral infections. In contrast, it keeps your sickle cell disease under control and reduces your risk of coming in to hospital with a sickle cell crisis. In the event of Covid-19 spread, we anticipate that many hospital patients will have Covid-19 infection, and therefore we would want to avoid patients with sickle cell disease coming in to hospital with a crisis and contracting Covid-19 as an inpatient.

Current advice to health professionals is to:

- (1) Avoid starting any new patients on hydroxycarbamide
- (2) Avoid increasing the dose of hydroxycarbamide for the next few weeks
- (3) Continue all current patients on hydroxycarbamide on their current dose

If you have any further questions or worries about this, please contact your haematology team.

UK Government advice on Covid-19: <https://www.gov.uk/guidance/coronavirus-covid-19-information-for-the-public>

We will update this document as more information is available. Use this link: <http://nssg.oxford-haematology.org.uk/covid19/>

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