

## Dudley Group Rheumatology Coronavirus Patients Frequently Asked Questions: Version 3, Nov 2020

Guidance from the government about Coronavirus is changing constantly, so we would advise you refer to <https://www.gov.uk/coronavirus> for the most up-to-date information and guidance. We also recommend the Versus Arthritis website as an excellent source of information <https://www.versusarthritis.org/news/2020/april/coronavirus-covid-19-and-arthritis-where-to-go-for-information/>

Since the beginning of the pandemic the rheumatology helpline has had a lot of questions about issues related to the coronavirus pandemic. So we have created a local information sheet to help answer some of the frequently asked questions, which we are updating regularly. We have based the answers to these questions on national guidance and our local experience.

This FAQ includes advice about:

- Medication and blood tests advice during the coronavirus pandemic
- Update on advice for the clinically extremely vulnerable?
- Changes to rheumatology clinics: our 'new normal'
- Will it be safe to come to the hospital?
- What about the helpline?

### Medication and blood tests advice during the coronavirus pandemic

#### Should I stop my rheumatology drugs as a precaution?

**No.** All patients should continue to take their medication, unless directed otherwise by their rheumatology team or other medical doctor.

**As you would do normally, if you develop symptoms of any infection, we would advise that you should stop your DMARD/ biologic therapy until you feel well again. If you have been taking steroids (also known as prednisolone), please continue taking these at your normal dose, unless you are told to do otherwise by your rheumatology team or another doctor.**

#### What about starting new DMARD/biologic drugs during the pandemic?

We have many excellent drugs to treat rheumatic conditions now. However rheumatologists are still not sure of the exact risks of immunosuppressive drugs have in people who contract coronavirus. We are therefore favouring drugs that can be stopped quickly rather than longer acting drugs such as rituximab. If your medication is being changed your rheumatologist should have discussed the benefits and risks with you at length. Bear in mind that if you are changing your medication it may also mean that you may then be considered as clinically extremely vulnerable.

#### Can I have joint injections or Steroid injections (depos) during the coronavirus pandemic?

As is current practice, if you have an infection you should not have a joint injection or steroid injection/depo. With the coronavirus in particular, you may not have infection symptoms if you are in the early stages and the injections could possibly be doing you more harm than good. We are therefore only carrying out these procedures in patients that truly need them and are currently otherwise well. For further information please see **Dudley Rheumatology Helpline Number: 01384 244789**

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<http://www.dgft.nhs.uk/wp-content/uploads/2020/10/Rheumatology-COVID-Information-For-Joint-Injections.pdf>

### Should I continue taking my anti-inflammatory drugs /NSAIDs?

Examples of Non-Steroidal Anti Inflammatory drugs (NSAIDs) are ibuprofen, naproxen, and etoricoxib. For now, advice for patients with confirmed or suspected coronavirus is to use paracetamol in preference to NSAIDs to treat symptoms of the virus infection. Those currently on NSAIDs for other medical reasons (e.g. arthritis) should **NOT** stop them.

### What should I do about having my blood monitoring tests?

The British Society for Rheumatology guidelines state that it is usually safe to reduce the frequency of blood testing for most people to every three months. **We therefore are advising that if you have been on a rheumatology drug for >6 months, without a problem, that routine blood monitoring blood tests should only be required every 3 months**, unless you are unwell for no obvious reason.

We have written to GPs about this too, because we know that some GP practices until now would not provide some patients with their drug unless you they have had a blood test every month. This just isn't practical/ advisable in the current situation.

There will be some people that will still need to have blood monitoring tests more regularly:

- If you have recently started a new drug, i.e. within the last 3 months
- If you have had problems with a rheumatology drug/ blood tests in the past 3 months
- If you are taking tocilizumab (RoActemra) or sarilumab (Kevzara).

Our computer systems can identify patients who will require more regular blood tests, but most of you will already know who you are. If you are not sure, please call the helpline.

### Where can I have my blood tests done?

If you have previously had blood tests done at the Guest, Corbett or Russells Hall hospital these can continue, however you will need to book an appointment.

**To book a blood test appointment: online:** <http://www.dgft.nhs.uk/patients-and-visitors/blood-tests/> or by phone on 01384 244330.

A lot of GP practises are continuing to offer blood tests, but you should contact your own practice to find out their individual arrangement. If you **do not** live locally we ask if you could request that your GP to sends a copy of the results to your consultant.

### **Update on advice for the clinically extremely vulnerable?**

In March the government asked us to identify the patients we would consider to be at increased risk from coronavirus complications based on treatments and other health issues. If we considered you to be in the higher risk group, you should have had a shielding letter from us – or text from Public Health England. This letter can be found at <http://www.dgft.nhs.uk/services-and-wards/rheumatology/>.

Shielding ceased on the 1<sup>st</sup> August 2020 and clinically extremely vulnerable people are advised to follow strict social distancing advice. However, as we progress through winter and further periods of lockdown, local and national guidance will change. Please see updates at: <https://www.gov.uk/government/news/clinically-extremely-vulnerable-receive-updated-guidance-in-line-with-new-national-restrictions>.

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Most of you will know already whether you are considered to be in a high risk or clinically extremely vulnerable group. This is sometime complicated, but we have found a flowchart from the Leeds rheumatology team (at the end of this document) helpful: If you are in the 'high risk', red box, you are in the clinically extremely vulnerable group and should follow latest government advice accordingly!

## **Changes to rheumatology clinics: our 'new normal'**

### What will happen with my rheumatology appointments in the future?

The rheumatology team have continued to see patients throughout the pandemic. However at peaks in the virus numbers, our services have been (and may be again) disrupted as members of our teams are redeployed to other areas, are ill or isolating. These changes are unavoidable and tend to occur without much warning. So we apologise if your clinic appointment is affected or cancelled. If you feel that you need a rheumatology appointment, as ever please let us know via the helpline and we will do our best to arrange an appointment.

Due to social distancing in the waiting rooms, fewer patients can come into clinic. Therefore we are scheduling a mixture of remote/ virtual consultations and face-to-face appointments. Your clinic letter will tell you if you need to come to the hospital or whether your appointment is a remote consultation.

Over the past months, we have become used to this way of working and are familiar with the pros and cons of telephone/video clinics. If we recognise that we need to see you in person, we will do our best to see you at a face-to-face appointment at the earliest opportunity. Alternatively, if you have been allocated a face-to-face appointment and you would prefer a telephone/video appointment, then please let your consultant's secretary know at least 2 working days before the consultation date.

As you might imagine a lot of clinics have needed to be rearranged and many of your appointments will have been cancelled/rescheduled. Please bear with us! However, if you think you have been missed or you need advice sooner, as usual either seek advice from your GP or via the helpline.

**If you have recently changed your contact details or are unsure whether we have the correct contact numbers for you then please contact the Out Patient Booking Team to ensure that your records are up to date on 01384 365 100**

### What will happen in a remote (telephone/video) consultation?

If you have been allocated a remote consultation, it will say this in the clinic letter or text you receive from the hospital. You will be contacted by the doctor, nurse or member of the team as close to the time slot as possible (but it may be anytime during the morning, afternoon or evening of the appointment). Please make sure your contact details are up to date and, if there is a preference for home or mobile number to be used, that this is known. The hospital phone number may come up as 'No caller ID'. If you do not answer we will try again, either on another available number or a little later. Because of confidentiality we will not leave an answering machine message.

When you receive the telephone call the rheumatology team member will introduce themselves and ask you to confirm a few details. You will then have a discussion, as we

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would do if you were in clinic and agree on an action plan. You will receive a copy of the letter we send to your GP.

### Remote consultation tips:

- Please make sure you are in a suitable and safe environment to be able to talk
  - If you would like a relative to be involved use a speaker phone. You may be asked to confirm that you consent to them taking part
- Please make sure you have a list of medication close to hand
- Please also make sure you have anything else you might need such as your glasses or hearing aid.
- If readings of blood pressure or weight have been a concern in the past, it would be good to have an up-to-date reading available, if you have the means to do so.

### **Will it be safe to come to the hospital?**

We have risk assessed our hospital to ensure that the service we provide meets the standards required to reduce the risk of COVID transmission.

- If you have any symptoms such as cough, high temperature, loss of smell (or taste) please do not attend for your appointment.
- **Do not arrive more than 15 minutes before your appointment**
- On arrival at the hospital, all patients will be provided with a face mask and asked to use the hand gel.
- You will be asked about symptoms and your temperature will be measured.
- To maintain social distancing only patients, not relatives, will be allowed in the department. Please speak to the nurse in charge at the time of arrival, if this is not possible or appropriate.
- All staff will be using appropriate personal protective equipment.

These measures are designed to keep you and our staff safe and we hope these measures will let you feel confident to attend your appointment.

### **What about the helpline?**

The Nurse helpline continues to run as usual. So, if you have any queries or concerns, we will do our best to help you. We are obviously experiencing a high volume of calls and messages, so we ask you for your patience while we are dealing these.

### **Here are some other links and sources of advice that can be of help:**

<https://www.gov.uk/government/topical-events/coronavirus-covid-19-uk-government-response>

<https://www.nhs.uk/conditions/coronavirus-covid-19/>

<https://111.nhs.uk/covid-19/>) or call NHS111

<https://www.nras.org.uk/covid-19-shielding-advice-for-england>

<https://www.versusarthritis.org/news/2020/april/coronavirus-covid-19-and-arthritis-where-to-go-for-information/>

These are difficult times for us all! We will work with you to keep you and ourselves as safe as possible from Coronavirus whilst still caring for your rheumatology condition.

The Dudley Rheumatology Team

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## Guide to social distancing for rheumatology patients

Based on guidelines from British Society for Rheumatology and related medical associations and agreed by consultant rheumatologists at Leeds

