**Shielded patient list: updated NHSE guidance 10.04.20**

**NHSE Central list**

1) Solid organ transplant recipients who remain on long term immune suppression therapy

 2) People with specific cancers:

 a. people with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer

 b. people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment

c. people having immunotherapy or other continuing antibody treatments for cancer

d. people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.

e. People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs

 3) People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD

4) People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)

5) People on immunosuppression therapies sufficient to significantly increase risk of infection.

6) People who are pregnant with significant congenital heart disease

**Respiratory**

<https://digital.nhs.uk/coronavirus/shielded-patient-list/methodology/medicines-data>

<https://www.phauk.org/coronavirus-pulmonary-hypertension/an-open-letter-from-the-national-uk-pulmonary-hypertension-group/>

<https://www.sarcoidosisuk.org/information-hub/coronavirus-faq/>

* Asthma patients on LABA or LABA/ICS or LRA **plus** ≥ 4 prescriptions for prednisolone from July – Dec 2019
* COPD patients with LABA **and** LAMA **and** ICS in Nov/Dec 2019
* COPD patients with Roflumilast in Nov/Dec 19
* Pulmonary Hypertension
* Pulmonary Sarcoidosis *(James Calvert advised if no treatment and structurally normal lungs, then probably not high risk)*
* Interstitial lung disease
* Bronchiectasis

**Neurology**

 (<https://cdn.ymaws.com/www.theabn.org/resource/collection/C5F38B64-DC8F-4C67-B6FC-F22B2CDB0EE5/ABN_Neurology_COVID-19_Guidance_v6_9.4.20_FP.pdf>)

* Active myositis/polymyositis
* Muscular dystrophies
* Motor Neurone Disease
* Any neurological condition impacting on respiratory/bulbar function

**Gastroenterology**

<https://www.bsg.org.uk/covid-19-advice/bsg-advice-for-management-of-inflammatory-bowel-diseases-during-the-covid-19-pandemic/>

* IBD over age 70 on anti-TNF or biologic or immunosuppressant
* IBD and co-morbidity on anti-TNF or biologic or immunosuppressant
* IBD on ≥ 20mg prednisolone equivalent per day
* IBD and recent combination biological/immunomodulatory/steroids last 6/52
* IBD and short gut syndrome requiring nutritional support
* IBD and TPN requirement

**Renal**

<https://renal.org/stratified-risk-prolonged-self-isolation-adults-children-receiving-immunosuppression-disease-native-kidneys/>

* Renal dialysis
* Autoimmune disease on biologics/cytotoxics last 6/12
* Intravenous immunosuppressant
* Oral cyclophosphamide
* ≥ 20mg prednisolone daily equivalent > 4/52 in the last 6/12
* > 5mg daily prednisolone equivalent plus one other immunosuppressant > 4/52 in last 6/12
* Nephrotic range proteinuria
* History of repeated high dose immunosuppressant over a number of years
* Any immunosuppressant and:
	+ Over 70
	+ Autoimmune lung or heart disease
	+ Co-morbidities – DM/respiratory/HTN/CVD/CKD3 or more

**Rheumatology**

<https://www.rheumatology.org.uk/Portals/0/Documents/Rheumatology_advice_coronavirus_immunosuppressed_patients_220320.pdf?ver=2020-03-22-155745-717>

* ≥ 20mg prednisolone daily equivalent > 4/52
* Oral cyclophosphamide
* Intravenous cyclophosphamide in last 6/12
* > 5mg daily prednisolone equivalent plus one other immunosuppressant > 4/52

 (not hydroxychloroquine or sulphasalazine)

* Any 2 immunosuppressant therapies (not hydroxychloroquine or sulphasalazine)
* JAK inhibitors (baracitinib/tofacitinib) with age > 70 or co-morbidity

**Dermatology**

<https://www.bad.org.uk/shared/get-file.ashx?itemtype=document&id=6674>

* Any 2 immunosuppressant therapies (not hydroxychloroquine or sulphasalazine)
* ≥ 20mg prednisolone daily equivalent > 4/52
* > 5mg daily prednisolone equivalent plus one other immunosuppressant > 4/52

 (not hydroxychloroquine or sulphasalazine)

* Oral cyclophosphamide
* Intravenous cyclophosphamide in last 6/12
* Rituximab or Infliximab for skin conditions
* Single agent immunosuppressant and other comorbidities or age > 70

**Haematology**

<https://haemoglobin.org.uk/covid-19/>

* Sickle cell anaemia (not trait)
* Thalassaemia at risk of iron overload (eg cardiac problems)
* Splenectomy
* Diamond-Blackfan anaemia as per guidance above