

S1. Paper patient COVID-19 risk stratification letter

To all RNHRD Rheumatology Patients,

We know that patients with certain rheumatological conditions are at increased risk of contracting Coronavirus (COVID) and may be at higher risk of becoming unwell with it.

As part of our response to the pandemic, we want to identify patients at very high risk. Public Health England (PHE) and the British Society of Rheumatology (BSR) have provided us with guidelines to evaluate patients risk and provide advice on what to do to minimise the risk.

We think the quickest way to help people understand their risk is to send this letter to all our patients and ask that you follow the instructions below. This will allow you to identify if you fall in to the at-risk group and if so, which risk category you belong to. We will then signpost you to information about how best to protect yourself based on your risk.

Please complete the **2 following tasks**:

Step 1

Please go to Section 1 on Page 3 of this document and follow the instructions

Section 2 is only for those who fall into the category of patients who might be at increased risk.

Section 3 is your risk category (please keep a note of this) and the advice you should follow based on the risk score.

Step 2

After completing the self-stratification process in this letter, it is also very important that you all go to the following website and fill in the same information relevant to you

<https://www.oc-meridian.com/RNHRD/completion/custom/default.aspx?slid=1133>

This is important as it is the best way of linking your risk recording with your hospital record and enables us to give you appropriate information about your care if you need further advice from us.

Importantly this information is related to your rheumatology condition. You may have been asked to shield because of another condition that you have. If you have already been asked to shield for another reason **PLEASE DO NOT STOP SHIELDING** even if you do not score high due to your rheumatology condition.

We know that in some cases it might be difficult to decide based on the information we have given you. So if you are unsure about which category you are in and how to

complete the scoring please do not hesitate to contact us via the advice line number 01225 428 823.

Yours sincerely,

The Rheumatology Team

Self-stratification process – the patient answers a series of clinical questions about their condition which then will help determine their risk

Risk stratification tool – a tool for identifying or predicting which patients are at high risk or likely to be at high risk and then used to best manage care

Section 1. Does this risk score apply to you?

Do you have any of the following conditions?

Conditions requiring further risk assessment

Inflammatory arthritis, this includes:

- Rheumatoid arthritis
- Psoriatic arthritis
- Seronegative spondyloarthritis
- Axial spondyloarthritis
- Enteropathic arthritis
- Ankylosing Spondylitis
- Juvenile onset inflammatory arthritis
- Adult onset stills disease
- Juvenile onset stills disease
- Inflammatory polyarthritis
- Inflammatory oligoarthritis
- Seronegative inflammatory arthritis

Connective tissue disease, this includes:

- Systemic lupus erythematosus (SLE or lupus)
- Systemic sclerosis/scleroderma/ CREST
- Sjogrens syndrome
- Mixed connective tissue disease
- Myositis
- Polymyositis
- Dermatomyositis
- Anti-synthetase syndrome
- Undifferentiated connective tissue disease
- Connective tissue disease overlap

Vasculitis including:

- ANCA associated vasculitis
- Granulomatous polyangitis (GPA)
- Eosinophilic granulomatous polyangitis (eGPA)
- Microscopic polyangiitis (MPA)
- Wegeners granulomatosis
- Churg Strauss
- Aortitis
- Takayasu's arteritis
- Giant cell arteritis/temporal arteritis
- IgA vasculitis
- Hypocomplementaemic urticarial vasculitis
- Polyarteritis nodosa
- Cryoglobulinaemia
- Behcet's disease
- Cogan's syndrome
- ANCA negative vasculitis

Auto-inflammatory syndromes including:

- Familial Mediterranean fever
- Tumour necrosis factor receptor associated periodic fever syndrome (TRAPS)
- Deficiency of the Interleukin-1 Receptor Antagonist (DIRA)
- Neonatal Onset Multisystem Inflammatory Disease (NOMID)
- Chronic Atypical Neutrophilic Dermatositis With Lipodystrophy and Elevated Temperature (CANDLE)
- Cryopyrin-associated periodic syndrome (CAPS)

Other conditions:

- Relapsing polychondritis
- IGG4 disease
- Sarcoidosis
- Polymyalgia rheumatica
- Severe osteogenesis (previously types III/IV) imperfecta
- Fibrodysplasia ossificans progressive
- Severe kyphosis/scoliosis from rare bone diseases, e.g. hypophosphatasia, Type 1 osteogenesis imperfecta (OI), Hadju Cheney

If yes- please continue to section 2 and complete the risk score

If no - you do not need to go any further as this risk score is not relevant to the condition that we see you for.

Section 2. Risk assessment

If you have any of the conditions listed in **Section 1** please now complete the table below.

- 1) If the answer is yes to any of the questions in the table please circle the number in the score column beside it.
- 2) Then add up all the numbers that you have circled to enter a total score in the bottom box on the right
- 3) Once you have your total score please go to section 3.

Table 2 Risk stratification tool¹

If yes, please circle the corresponding score	Score
1. Do you currently take prednisolone dose 20mg or higher a day and have been on it for more than 4 weeks?	3
2. Do you currently take Prednisolone dose 5mg or more but less than 20mg a day and have been on this for more than 4 weeks?	2
3. Have you had cyclophosphamide treatment (tablet or drip) within the last 6 months?	3
4. Do you take any of the medications mentioned in the top box on page 5? If you take one of these medications circle 1 point If you take two or more of these medications circle 2 points instead	1 2
5. Do you take two or more medications listed in the top box page 5?	2
6. Do you have any of the conditions listed in the bottom box on page 5?	3
7. Have you been diagnosed with interstitial lung disease (ILD), pulmonary fibrosis, lung fibrosis or pulmonary hypertension?	3
8. Are you over 69 years old or have any of the following conditions? (even if you have more than 1 of these it still only counts as 1 point) <i>Diabetes</i> <i>Lung disease</i> <i>Kidney impairment/disease</i> <i>Ischaemic heart disease e.g. heart attack , angina, heart bypass or heart stents</i> <i>High blood pressure</i>	1
9. Hydroxychloroquine, sulfasalazine (alone or in combination)	0
TOTAL SCORE	

Relevant rheumatology medications for Questions 4 on the risk table

Immunosuppressive medications include: Azathioprine, Leflunomide, Methotrexate, Mycophenolate (Mycophenolate Mofetil or Mycopholic Acid), Ciclosporin, Tacrolimus, Sirolimus. It does **NOT** include Hydroxychloroquine or Sulfasalazine, either alone or in combination.

Biologic/monoclonal medication include: Rituximab (within the last 12 months); all anti-TNF drugs – Etanercept (Enbrel/Benepali), Adalimumab (Humira/Imraldi/Amgivita), Infliximab (Remsima/Remicade), Golimumab (Simponi), Certolizumab (Cimzia); Tocilizumab; Abatacept; Belimumab; Anakinra; Secukinumab; Ixekizumab; Ustekinumab; Sarilumumab; Canakinumab.

Small molecule medications include: JAK inhibitors (Baracitinib and Tofacitinib)

If you have any of these conditions then answer yes to Question 5 in the risk table

Connective tissue diseases (these include systemic lupus erythematosus [SLE or lupus], Systemic sclerosis/scleroderma/CREST, sjogrens syndrome, mixed connective tissue disease, myositis, polymyositis, dermatomyositis, Anti-synthetase syndrome, undifferentiated connective tissue disease, Connective tissue disease overlap)

Vasculitis (including ANCA associated vasculitis [granulomatous polyangitis, eosinophilic granulomatous polyangitis, microscopic polyangiitis, wegeners granulomatosis, churg strauss], takayasu's arteritis, giant cell arteritis, polyarteritis nodosa, IgA vasculitis, Hypocomplementaemic urticarial, vasculitis, Polyarteritis nodosa, Cryoglobulinaemia, Behcet's disease, Cogan's syndrome)

Auto-inflammatory syndromes (including Familial Mediterranean fever, Tumour necrosis, factor receptor associated periodic fever syndrome [TRAPS], Deficiency of the Interleukin-1 Receptor Antagonist [DIRA], Neonatal Onset Multisystem Inflammatory Disease [NOMID], Chronic Atypical Neutrophilic Dermatositis With Lipodystrophy and Elevated Temperature (CANDLE), Cryopyrin-associated periodic syndrome [CAPS])

Other conditions:

- Relapsing polychondritis
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- Severe osteogenesis (previously types III/IV) imperfecta
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- Severe kyphosis/scoliosis from rare bone diseases, e.g. hypophosphatasia, Type 1 osteogenesis imperfecta (OI), Hadju Cheney

Section 3. Risk category and further advice

Now please look at your total score and look at what category it puts you in.

Score 3 or more	High risk You are deemed high risk so <u>shield yourself</u> (currently for 12 weeks but follow further Public Health England advice as the situation develops).
Score of 2	Moderate Risk You are at moderate risk so Self isolate for the period enforced by Public Health England (currently 3 weeks) then you can either self-isolate or observe strict social distancing, which ever you feel most comfortable doing
Score of 0 or 1	Low risk You are at Low Risk (score 1 or less): Self-isolate for the period enforced by Public Health England (currently 3 weeks); then observe strict social distancing measures

We would now like you to read the most up to date government guidelines which is relevant to your category at www.gov.uk/coronavirus.

Further information on shielding and protecting vulnerable people including further support that is available can be found by clicking on the following link:

<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>

Please be aware that this advice is published as of 25th March 2020. Please continue to follow updated Public Health England advice that may supersede this document. Further information can be found at: www.gov.uk/coronavirus.

Again if you are still unsure as to what actions to take to protect yourself you can still contact us on the Patient Rheumatology Advice Line on 01225 428 823.

¹ Risk stratification table for patients with autoimmune rheumatic diseases (adapted for patient information from BSR guidance published 22nd-24th March 2020).