



Inflammatory Eye Disease Service COVID-19 Response: Identifying high-risk patients for shielding and self-isolation

Risk Stratification Guide	Definite High Risk: To be advised to shield for a minimum of 12 weeks	Moderate Risk: Social Distancing	Low Risk: Social Distancing
Immunosuppressive medication	 Corticosteroid dose of ≥20mg (0.5mg/kg) prednisolone (or equivalent) per day for more than four weeks Corticosteroid intravenously within the previous 4 weeks Cyclophosphamide at any dose orally or within last six months if given intravenously Corticosteroid dose of ≥5mg prednisolone (or equivalent) per day for more than four weeks plus at least one other immunosuppressive medication*, biologic/ monoclonal** or small molecule immunosuppressant (eg JAK inhibitors)*** Any TWO agents amongst immunosuppressive medications, biologics/monoclonals** or small molecule immunosuppressants with any comorbidity**** 	 Well-controlled patients with minimal disease activity and no co-morbidities on SINGLE agent broad spectrum immunosuppressive medication, biologic/monoclonal** or small molecule immunosuppressant Well-controlled patients with minimal disease activity and no co-morbidities on SINGLE agent broad spectrum immunosuppressive medication plus Sulphasalazine or Dapsone and/ or hydroxychloroquine Well-controlled patients with minimal disease activity and no co-morbidities on a SINGLE agent broad spectrum immunosuppressive medication* at standard dose (eg Methotrexate up to 25mg per week) plus single biologic** (eg anti-TNF) or small molecule immunosuppressant*** (eg JAKi) 	 Single agent 5-ASA medications (eg mesalazine) Singleagent6-mercaptopurine Hydroxychloroquine Doxycycline Sulphasalazine Topical immunosuppressant such as ciclosporin drops/ointment, tacrolimus ointment, or topical steroids within 4 weeks Intravitreal steroids and immunosuppressants within 6 months Intramuscular steroids within the previous 4 weeks Topical serum eye drops

^{*} Immunosuppressive medications include: Mycophenolate (mycophenolate mofetil or mycophenolic acid), Azathioprine, Methotrexate, Ciclosporin, Tacrolimus, Cyclophosphamide, Sirolimus, Dapsone. It does **NOT** include Doxycycline, Hydroxychloroguine or Sulphasalazine either alone or in combination

- *** Small molecules include: all JAK inhibitors Baracitinib, Tofacitinib etc
- **** **Co-morbidity includes**: Age >70, Diabetes Mellitus, any pre-existing lung disease, renal impairment, any history of Ischaemic Heart Disease or hypertension
- NB This advice applies to both adults, children and young people with rheumatic disease. We do NOT advise that patients increase steroid dose if they become unwell

BMEC-IED_COVID-19_Patient Advice – adapted from the British Society of Rheumatology 'Advice for immunosuppressed patients' Version 0.08 date 31 March 2020

^{**} **Biologic/monoclonal includes**: Rituximab or intravenous immunoglobulin within last 12 months; all anti-TNF drugs (etanercept, adalimumab, infliximab, golimumab, certolizumab and biosimilar variants of all of these), Tocilizumab, Abatacept, Belimumab, Anakinra, Secukinumab, Ixekizumab, Ustekinumab, Sarilumab, Canakinumab





Sandwell and West Birmingham Hospitals NHS

Risk Stratification of Patients with Inflammatory Eye Disease

To be used in conjunction with BMEC-IED_COVID-19_Patient Advice 31 March 2020

Summary

- Score of 3 or more: Patients to shield Score of <3:
 - To exercise once a day either alone, or with members of your household
 - Shopping for basic necessities, although this should be done as little as possible
 - Medical need or to provide care for a vulnerable person
 - Travel to or from work but only where this is absolutely necessary
 - Patients to wear eye protection where appropriate

Risk Factor		
20mg or more (0.5mg/kg) <u>Prednisolone</u> per day for more than four weeks	3	
5mg or more Prednisolone but less than 20mg per day for more than four weeks	2	
Any Cyclophosphamide within last six months	3	
1 drug of immunosuppressive medication* or biologic**	1	
2 or more drugs of: immunosuppressive medication* or biologic**	2	
 Any one or more of these: age >70 years, Diabetes Mellitus, lung disease, kidney disease, heart disease or high blood pressure 	1	
 Local immunosuppressants such as topical ciclosporin drops/ointment, tacrolimus ointment ortopical steroids; intravitreal injections (steroids, rituximab), orbital floor or periocular steroid injections 	0.5	
Topical serum eye drops	0	
Hydroxychloroquine, Sulfalsalazine, Dapsone, Doxycycline/Erythromycin alone or in combination	0	

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- ** **Biologic/monoclonal includes**: Rituximab or intravenous immunoglobulin within last 12 months; all anti-TNF drugs (etanercept, adalimumab, infliximab, golimumab, certolizumab and biosimilar variants).
- NB Immunosuppressive agents do NOT include: Doxycycline, Hydroxychloroquine or Sulphasalazine either alone or in combination; or topical immunosuppressants such as ciclosporin drops/ointment, tacrolimus ointment, or topical steroids

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Supplementary Table 1 Inflammatory Eye Disease Service COVID-19 Response: Identifying high-risk patients for shielding and self-isolation (Page 2 of 2)