

This information sheet was last updated on 4th May 2020 at 12pm

Coronavirus (COVID-19) – information for children, young people and families from the Inflammatory Bowel Disease team

We understand that you might be worried about coronavirus – also known as COVID-19 – particularly if your child has a long-term health condition, such as inflammatory bowel disease (IBD). This information sheet from the Gastroenterology team at Great Ormond Street Hospital (GOSH) sets out our advice for children, young people and families who use our services.

Please read this alongside our general FAQs for families at gosh.nhs.uk/covid-19-FAQ. You can also find the latest news, information and resources in our COVID-19 information hub at www.gosh.nhs.uk/covid-19.

This information has been approved by the clinical team at GOSH.

Does COVID-19 affect children?

The evidence to date shows that although children do develop COVID-19, very few children will develop severe infection with COVID-19. This includes children with inflammatory bowel disease, whether they are immune-compromised or not.

What is the national advice for children with a chronic illness?

Everyone should take widely published precautions to avoid infection, through good handwashing, not touching your eyes, nose and mouth and avoiding unnecessary close contact with others.

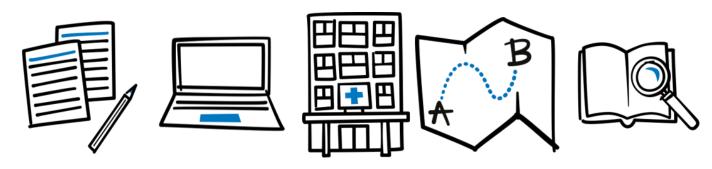
The NHS has said this advice is particularly important for those with underlying health conditions

The NHS also recently sent letters to anyone identified as being extremely vulnerable to, or at highest clinical risk from COVID-19 – this includes people taking immunosuppressant medication.

What are immunosuppressant medications used for Crohn's and Colitis?

Immunosuppressive medicines include azathioprine, ciclosporin, mercaptopurine, methotrexate, sirolimus, tacrolimus and thalidomide.

Biologic medicines include infliximab (Remisa), adalimumab (Humira, Amgevita), ustekinumab (Stelara), vedolizumab (Entyvio)



Ref: 2020F2287 GASTRO © GOSH NHS Foundation Trust, April 2020

Higher strength steroid include oral prednisolone (>20mg per day or >0.5mg/kg per day)

Medium strength steroids include oral prednisolone (<20mg per day or <0.5mg/kg per day)

Lower strength steroid include oral budesonide

If you received this letter, you should follow the advice carefully. There are three different precautions you should undertake, based on your child's level of risk.

- Shielding (Higher Risk)
- Strict social distancing (Moderate Risk)
- Social distancing as for the general population (Lower Risk)

What precautions should I take for my child?

Crohn's and Colitis UK have published a helpful flowchart to help you determine the risk level for your child, which you can find online at www.crohnsandcolitis.org.uk/decision-tree-children - this is also included later in this information sheet.

The precautions you and your child should take during the COVID-19 pandemic will depend on this risk level, as explained below:

Higher risk: patients in this group are advised to shield, which includes staying at home and avoiding face to face contact with anyone else for 12 weeks. This may include children taking higher strength oral prednisolone, intravenous steroids or those who recently started on a biologic medicine in the last 6 weeks (see table above).

These patients will have received a letter from GOSH stating that they should shield. You can read more about what shielding means for your child children at

www.gosh.nhs.uk/news/coronavirus-covid-19information-hub/coronavirus-covid-19-andvulnerable-children. **Moderate risk**: these patients are strongly advised to follow 'strict social distancing' guidance, which means reducing social interactions with others as much as possible.

This includes children taking the immunosuppressant medications listed in the table above, or those who have been taking a biologic medication longer than 6 weeks.

Lower risk: these patients are instructed to follow the same 'social distancing' guidance given to the general public. This includes children taking only oral 5-ASA (mesalazine, pentasa, asacol, salofalk); and oral viscous budesonide.

The IBD service has reviewed all the children in our care to classify their risk of COVID-19. In line with national guidance, the service recommends that all children taking immunosuppressant medications (see above) take particular care in following social distancing guidance.

My child's treatment or health has changed. Are they at high risk of COVID-19?

We will be reviewing our recommendations every fortnight to ensure each patient is in the right risk group.

We will contact you directly if anything changes, so that you have the information and support you need to take the necessary precautions to protect your child.

You can also find the more current guidance in this information sheet, which will be updated regularly and made available at www.gosh.nhs.uk/covid-19-specialty-guides.

If your child develops any additional medical problems, please seek advice from the other teams involved in their care.

If your child has symptoms of COVID-19, please use the NHS 111 online service at 111.nhs.uk for



urgent medical advice and then contact the IBD team for further support.

If you are very worried about your child, you should always call 999 or go to your local A&E or urgent care centre as you normally would.

Should my child stop taking their medication as a precaution?

No, it's very important that your child continues to take their medications unless your clinical team tells you otherwise.

The current advice from IBD specialists internationally, is that the benefit of staying on medication is greater than the risks associated with stopping it.

Taking your child off their medications can lead to a flare-up of their disease, which can lead to hospitalisation.

Should we make alternative clinic appointments?

Clinicians are looking to remove the need for patients to attend face-to-face appointments wherever possible. This might involve telephone appointments or a video consultation.

If your child has an upcoming clinic appointment, we will be in touch with you to discuss how we can best carry this out remotely.

Your IBD team is here to support you!

If you require further advice, please contact us via MyGOSH at mygosh.nhs.uk

Further information and support

Information from Crohn's and Colitis UK at: www.crohnsandcolitis.org.uk
Information from CIRCA (IBD Charity for Children in the UK) at: www.cicra.org/news/coronavirus/
Information from the NHS at: www.nhs.uk/conditions/coronavirus-covid-19/
Information about COVID19 in children from the NHS at: what0-18.nhs.uk/popular-topics/coronavirus
Information for children is available on the BBC Newsround website at: www.bbc.co.uk/newsround



CROHN'S & COLITISUK

What's my child's risk level?

Society of Paediatric
Gastroenterology, Hepatology and
Nutrition (BSPGHAN), who have
put together specific guidance for
children with Crohn's and Colitis.
Please follow this advice unless
you are told otherwise by your
child's IBD Team. You can find
more information at

We are working with the British

Currently taking (or has taken within the last 2
 weeks) and or introvenous storoids (overall as introvenous storoids (overall as introvenous storoids (overall as introvenous storoids).

Is your child taking any of the following medicines?

Yes

No

No

weeks) oral or intravenous steroids (except budesonide or beclomethasone) equivalent to 20mg or more prednisolone per day (weigh more than 40kg), or 0.5mg/kg prednisolone per day (weigh less than 40kg).

Do any of the following apply to your child?

- Started a new biologic medicine within the last 6 weeks, in combination with another immunosuppressant or steroids (except budesonide or beclomethasone)
- Has short gut syndrome which requires nutritional support

Your child's Crohn's or Colitis is

No

active - e.g. they're in a flare

Does your child have any other health

risk of severe illness from COVID-19?

Cardiac (heart conditions)

Yes

disorders, genetic conditions)

conditions that could put them at a high

Respiratory (e.g. asthma, cystic fibrosis)

· Endocrine or metabolic (e.g. diabetes, growth

Yes

Such as

Takes parenteral nutrition

Yes

is your orma taking any or the following modernies

With the exception of steroids, answer yes if your child has taken any of these medicines within the last three months

BIOLOGICS

- Ustekinumab (Stelara)
- Vedolizumab (Entyvio)
- Infliximab (Remicade, Inflectra, Remsima, Zessly)
- Adalimumab (Humira, Amgevita, Hyrimoz, Imraldi, Hulio)
- · Golimumab (Simponi)

JANUS KINASE INHIBITORS

Tofacitinib (Xeljanz)

STEROIDS

 All other steroid doses (except those in the previous box, budesonide or beclomethasone)

IMMUNOSUPPRESSANTS

- Azathioprine (Imuran
- Mercaptopurine (6-MP)
- Tioguanine (6-thioguanine)
- Methotrexate (Maxtrex, Methofill, Metoject, Ebetrex, Namaxir, Nordimet and Zlatal)
- Tacrolimus
- Ciclosporin

OTHER

No

My child's Crohn's or Colitis is

active - e.g. they're in a flare

 Immunosuppressant or biologic medicine as part of a clinical trial

No

Yes

Is your child taking any of the following medicines?

crohnsandcolitis.org.uk/COVID-19

- 5-ASAs (e.g. mesalazine, sulphasalazine, olsalazine)
- Rectal therapies (e.g. steroid or 5-ASA suppositories or enemas)
- Orally administered topically acting steroids (budesonide or beclometasone)
- Exclusive Enteral/Partial
 Enteral Nutrition (Liquid diets)
 or other diet based therapy for
 Crohn's Disease
- Antibiotics for bacterial overgrowth or perianal disease

No

Shielding
Your child has a higher risk of
severe illness from COVID-19. For
their safety, they are required to
self-isolate

Strict social distancing*
Your child has a moderate risk of
severe illness from COVID-19. It's
strongly recommended they strictly
follow the government's advice on
staying at home and social
distancing

population*
Your child has a low risk of severe illness from COVID-19. They should follow the government's advice on staying at home and social distancing

Social distancing as for general

* This information on risk is only about Crohn's and Colitis. If your child has another health condition their risk may be higher. Speak to the healthcare professionals treating your child if you're unsure.

Version 2

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