**Haemophilia Treatment Centre Rawalpindi**

**COVID 19 Guidelines**

**Background**

Since December 2019 COVID-19 (**Corona Virus Disease 2019** ), caused by **SARS-CoV-2,** has become an ongoing public health issue. It is a virus that is new to public health and, as a result, there is much yet to learn about it. This is a swiftly evolving situation and recommendations at this writing may change.

Corona viruses belong to a large family of viruses that circulate in animals, including humans, and may cause illness. Human corona viruses are well known with an infection ranging from mild illnesses such as the common cold, to severe illnesses that cause respiratory complications such as pneumonia.  Examples of these severe illnesses include Severe Acute Respiratory Syndrome Corona virus (SARS CoV) and Middle East Respiratory Syndrome Corona virus (MERS CoV).

**Transmission  
 Person-to-person spread**, **main way of spread**

Between people who are in close contact with one another (within about 6 feet).

Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly

be inhaled into the lungs

People are thought to be most contagious when they are most symptomatic

## Spread from contact with contaminated surfaces or objects

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is **not thought to be the main way the virus spreads**

**There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to avoid being exposed to any source of transmission.**

The good news is that there is no evidence that hemophilia patients are at a higher risk to contract COVID 19 .Theoretically inhibitor patients may have some degree of immunosuppression( even if not on prednisone or rituximab) & would be at increased risk ( Dr Peter Kouides, personal communication)

**Preventive measures**

Centre staff is reminded to remain vigilant and to take these common sense measures both at work and off hours:

1. Wash your hands often with soap and water for at least 20 seconds

2. If your hands are not visibly soiled, using hand sanitizer is an alternative to soap and water

Cover all surfaces of your hands and rub them together until they feel dry.

3. Avoid touching your eyes, nose, and mouth with unwashed hands

4. Avoid close contact with people who are symptomatic (coughing, sneezing)

5. Maintain at least 2 meters (6 feet) distance from other people

6. Stay home if you feel unwell

7. Cover your cough or sneeze with a tissue sneeze or use the inside of your elbow.

Throw used tissues in the bin immediately & wash your hands with soap and water

or use a hand sanitizer

8. Clean and disinfect frequently touched objects and surfaces

9. Limit travel to & from work & for urgent needs. Stop visiting family & friends & discourage

their visits

10. All Centre related events and programs for March & April to be cancelled or postponed

**Specific measures to reduce exposure in patients with haemophilia**

1. Exposure to everyone, including lower risk individuals and children, is the single most important precaution to avoid infection.
2. Minimize the need to visit health care professionals in hospitals or HTC’s.
3. Non-urgent care and elective surgeries should be postponed.
4. Paracetamol (acetaminophen) reduces fever without inhibiting the inflammatory response needed for fighting corona virus and is recommended for persons with bleeding disorders
5. Paracetamol (acetaminophen) should not exceed 60mg/kg/day or 3g/day, since it causes liver damage at higher doses
6. Ibuprofen and other non-steroidal anti-inflammatory drugs (NSAIDs) are usually not advised in patients with bleeding disorders because they may increase bleeding though inhibition of platelet function. In addition, in particular ibuprofen has been suggested to either make COVID-19 worse or enhance risk of infection with SARS-CoV-2

**Specific measures in case of hospital admission of a bleeding disorders patient with COVID-19 infection**

1. Good liaison between the hospital where patient is admitted and the HTC

2. Some clinicians suggest prophylactic therapy and maintaining higher clotting

factor levels as a precaution against bleeding into lungs from potentially severe

damage inflicted by SARS-CoV-2 and severe coughing/nose blowing creating

increased blood pressure in brain that might lead to bleeding

**HTC SOP’s**

1. Normal working hours of the HTC to be observed

2. All staff to observe preventive precautions, including social distancing, mask, gloves,

white coats (these to be left at work)

3. **Telephone clinics**: All attendant’s/patients to call first and discuss their case with

Dr Bilquis.

4.Only patients **requiring treatment** to attend the HTC

5.Patients with COVID 19 symptoms (cough ,high temperature, shortness of breath) or

any member of their household with these symptoms should not attend the Centre.

Video consultation & if treatment required , it should be sent home via a courier

6.All regular patients to be communicated information about **Telephone clinics**

**7.**One attendant per patient or only one patient to be allowed in the HTC

8.Attendants/patients from different households to keep social distancing **.**

Stand or sit 2 meters apart & **o**bserve all preventive measures

9.No children allowed in the play room

10.Patients & attendants to be masked ,hand washed /sanitized before entering the

treatment room.They should not be allowed in any other room

11.If treatment is required for more than 1day, then the full treatment to be given. Empty

vials to be returned to the centre later

12.LDP joint assessment, if due now, to be delayed for 4 weeks

13.All elective operations (circumcision etc.) or procedures (synoviorthesis etc.) to be

postponed

**Treatment of patients**

1**.**For hemophilia patients currently treated with **standard or extended recombinant half- life FVIII or FIX concentrates, FEIBA, FVIIa** ,No reason to change the recommended treatment regimen

2.For patients treated with **plasma-derived FVIII/FIX,**Viral inactivation and elimination procedures employed are sufficient to destroy lipid-enveloped viruses like SARS-CoV-2.Not recommended to switch product

**3**. For patients treated with blood-components which are not virally inactivated (.FFP, cryoprecipitate, platelets),treatment decisions should be based on clinical risk/benefit analysis balancing the safety of not treating a bleeding event and any residual risk of acquiring another infection.

* [**WFH EVENTS**](https://news.wfh.org/category/wfh-events/)

**References:**

1.COVID-19 (coronavirus disease 2019) pandemic caused by SARS-CoV-2: practical recommendations for hemophilia patients.

[World Federation of Hemophilia](https://news.wfh.org/author/wfh/) - March 21, 2020

2 [World Federation of Hemophilia](https://news.wfh.org/author/wfh/) Statement: Update to COVID 19 ,March 4 2020.

Tahira Zafar

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