

**DEPARTMENT OF MEDICAL ONCOLOGY**

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Dear Patient,

This is our guidance for patients with lymphoproliferative disease, or with a history of previously treated lymphoproliferative disease, addressing your risk of SARS-CoV-2 (Covid-19). This is to help you make decisions regarding government advice on self-isolation.

The situation is fluid, guidance will likely change and you will be updated.

If you are on active immunosuppressive therapy for another condition, then please contact your managing team for advice. If you have other chronic health conditions, again please contact your managing team for advice.

You should also read “One Cancer Voice: Guidance for patients with cancer” on SARS-CoV-2 (Covid-19) - <https://lymphoma-action.org.uk/advice-coronavirus-people-cancer>.

We are aware that Public Health England has categorised many of you as extremely vulnerable, and many of you will have received letters (<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>). You were identified through your GP practice. While the guidance helps ensure all at risk patients are identified, it is however not necessarily applicable to all. Our professional view on the risk stratification is below, however this is only guidance and we cannot offer an individualised risk assessment to all.

	Severe risk	Moderate risk	Low/ No risk
Patient having chemotherapy, or who have received chemotherapy in the last three months	•		
Patient completed <u>curative</u> chemotherapy more than 3 months ago and you remain in remission.  (The more time elapsed since chemotherapy, the less likely there is risk)		•	•
Patient completed <u>non-curative</u> chemotherapy more than 3 months ago.  (The more time elapsed since chemotherapy, the less likely there is risk)	•	•	
Patient completed <u>palliative</u> chemotherapy more than 3 months ago.	•		
Patients with secondary immunodeficiency due to chemotherapy and is on active IVIG replacement and/or antibiotic prophylaxis	•		
Patients with previous secondary immunodeficiency needing IVIG with now normal IgG levels			•
People having immunotherapy or other continuing antibody treatments for cancer e.g. Rituximab or Obinutuzumab maintenance	•		
People having other targeted cancer treatments which can affect the immune	•		

system, such as protein kinase inhibitors e.g. Ibrutinib, Idelalisib, Venetoclax			
People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs	•		
Patients who have had a bone marrow transplant more than 6 months ago and are not taking immunosuppression drugs		•	
Untreated advanced stage CLL	•		
Untreated early stage CLL	•		
Untreated indolent lymphoma on active surveillance	•		

Evidence Source:

1. <https://lymphoma-action.org.uk/advice-coronavirus-people-cancer>

Other sources of information you may find helpful include;

General

<https://bloodwise.org.uk/blog/coronavirus-and-blood-cancer>

Lymphoma

<https://lymphoma-action.org.uk/lymphoma-action-statement-coronavirus-covid-19>

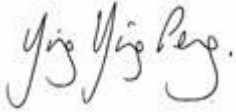
CLL

<https://www.cllsupport.org.uk/latest-advice-on-covid-19/>

Yours sincerely,



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**Honorary Consultant & Reader in**  
**Haematology & Lymphoma Medical Oncology**



**Dr Ying Ying Peng**  
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