

Information for my patients regarding COVID-19 – as per 19/3/2020

I have been asked multiple times about the implications of the coronavirus (COVID-19) for patients with gastrointestinal (gut and liver) disorders, especially those on immunosuppressants (like Azathioprine, Infliximab etc). Below you find facts and recommendations, largely based on available information, literature and guidance (eg societies and WHO), but also my personal view.

1. COVID-19 is a viral disease. The **incubation period (from contact to sickness)** is estimated at 4 days (range from 2 to 7 days, other studies suggest from 2-14 days). **Infected individuals produce a large quantity of virus during this prodrome period**, even in absence of symptoms, contributing to the spread of the infection! Frequently reported **signs and symptoms of patients admitted to the hospital** include fever (77–98%), cough (46%–82%), myalgia (muscle pain) or fatigue (11–52%), and shortness of breath (3–31%) at illness onset. Less commonly reported symptoms include sore throat, headache, sputum production, GI symptoms such as diarrhea and nausea prior to developing fever and lower respiratory tract signs and symptoms.
2. **The majority of people with COVID-19 have uncomplicated or mild illness (81%)**, some will develop severe illness requiring oxygen therapy (14%) and approximately 5% will require intensive care unit treatment.
3. Possible risk factors for progressing to severe illness may include: **older age, and underlying chronic medical conditions** such as lung disease, cancer, heart failure, cerebrovascular disease, renal disease, **liver disease**, diabetes, **immunocompromising conditions (like taking Immunosuppressants)**, and pregnancy.
4. **Patients on immunosuppressive drugs for IBD and autoimmune hepatitis should continue taking their medications.** The risk of disease flare outweighs the chance of contracting COVID-19. CDC guidelines for at-risk groups suggest avoiding crowds and limiting travel. People taking immunosuppressants for eg their Crohn's Disease or Ulcerative Colitis may not be at increased risk of catching COVID-19, however they may be at extra risk of complications from the virus if they are infected.
5. Current evidence does not support COVID-19 infection as a cause of IBD (Crohns/Colitis) flares.
6.

Best protection against COVID-19 virus transmission:

 - **Wash those hands! Several times per day, for at least 20 seconds, and then (if possible) use an alcohol-based hand sanitizer that contains 60%–95% alcohol. This procedure is particularly important after going to the bathroom, before eating, and after coughing, sneezing or blowing your nose.**
 - **Don't touch your face. Cough etiquette**
 - **Social distancing – NOW. Do not wait for the government to advise. Avoid all crowds. DO NOT attend meetings/events that are not absolutely necessary**
 - **Do not travel, especially not in confined spaces (bus, plane)**
 - **Stay away from unwell people/patients. Don't visit sick people, eg in hospitals**
7. Consider rescheduling elective non-urgent endoscopic procedures. Non-urgent/elective endoscopy should be decided case by case.
8. Do not forget about other diseases and general health. Eat healthy. Stay active (but not in groups). Stop smoking! Smokers seem to have a higher susceptibility to COVID-19!
9. Follow the Ministry of Health website/information **www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus**
10. If you should develop symptoms: CALL your GP or Healthline first. DO NOT just walk into the practice/the next hospital. Remember: **Most people will have uncomplicated or mild illness.**

Stay healthy! Yours Dr Thomas Caspritz

Sources/Reference:

- [1] WHO: Clinical management of severe acute respiratory infection (SARI) when COVID-19 disease is suspected – Interim guidance 13 March 2020, second edition (version 1.2)
- [2] AGA, ACG, ASGE: <https://gi.org/2020/03/15/joint-gi-society-message-on-covid-19/>
- [3] British Soc Gastroenterology: <https://www.bsg.org.uk/covid-19-advice/bsg-and-basl-covid-19-advice-for-healthcare-professionals-in-gastroenterology-and-hepatology/>
- [4] ECCO: 1st Interview COVID-19 ECCO Taskforce, published March 13, 2020