

Coronavirus: advice for paediatric patients with Sickle Cell

Please be advised that this patient information may become rapidly out of date, so please check the NHS website for up to date information.

- Supervise your child so they wash their hands often - with soap and water for at least 20 seconds.
- Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available. This is particularly important after taking public transport
- Avoid touching your eyes, nose, and mouth
- Avoid close contact with people who are sick
- If your child feels unwell, keep them at home, and do not attend school
- Cover your cough or sneeze with a tissue, then throw the tissue in a bin. See [Catch it, Bin it, Kill it](#)
- Clean and disinfect frequently touched objects and surfaces in the home and work environment
- If you are worried about your symptoms, please call NHS 111. Do not go directly to your GP or other healthcare environment
- See [further information](#) and the [Public Health England Blog](#)
- See advice on the Sickle Cell Society website

There is currently no vaccine to prevent COVID-19 acute respiratory disease. The best way to prevent infection is to avoid being exposed to the virus.

- Avoid large gatherings. Your child can continue to go to school unless there is national guidance to stop attending.
- Avoid handshakes and hugs.
- Avoid contact with people who have travelled from areas of the world where coronavirus rates are high (this list will be updated on a regular basis).
- Keep your child warm.
- Make sure your child has had the flu vaccine.
- Ensure your child has good compliance with their Penicillin Prophylaxis.
- Drink plenty of fluids.
- In case of raised temperature (38C and above), cough or shortness of breath please contact the GP Or 111 for advice. Explain that your child has sickle cell disease and if they have had a splenectomy, please let them know. In the interim, double your child's dose of penicillin V and give it to them 4 times a day. If your child has an incentive spirometer at home then please use this. If in addition to breathlessness your child has severe chest pain that stops them from taking a deep breath then you should attend for assessment (go to the emergency department). If your child has any severe symptoms we recommend you attend the emergency department for review. **All children less than 10 years old and those children who have had a splenectomy** should be assessed in the emergency

department if they have a high temperature. Stop chelation medication if your child has a high temperature.

- Please also contact our sickle cell service by email: bhnt.scatservice-rlh@nhs.net to inform the team of advice given. If you choose to contact us by telephone out of hours, please leave a message and we will endeavour to contact you within 24 hours (0203 246 0352).
- The team will endeavour to contact you within 24 hours to advise further management.
- You may be asked to keep your child at home and self-isolate.
- We may advise you to double up on your child's dose of penicillin V.
- Make sure you have enough stock of medication at home like analgesics, antibiotics and antipyretics.
- Follow all the general advice from the government and check for regular updates on the PHE (Public Health England).
- We may need to make changes to the scheduling of regular transfusions depending on the evolving national guidance.
- We may need to make changes to your child's out-patient appointments including the option of considering telephone consultations.
- We may delay non-essential or routine investigations.

Frequently asked questions:

Is my child at increased risk of catching Covid-19?

No, your child's risk of catching Covid-19 is the same as everyone else in the population.

Would my child get a more severe version because of the "underlying health condition"?

Looking at what is happening in other countries and having spoken to doctors in Italy where they also have sickle cell disease and Covid-19, there does not appear to be a higher risk of severe disease but we don't really know. However, the worry with sickle cell disease is that we miss other respiratory complications including acute chest syndrome or severe bacterial pneumonia (lung infection).

Are there risks from the blood transfusion itself?

Due to precautions being taken, we anticipate no additional risk of either being unable to find safely matched blood for blood transfusions, nor any additional risk of contracting Covid-19 from the blood itself.

Should my child stop their hydroxycarbamide because of the increased risk of infection?

Do not stop your child's hydroxycarbamide, as it is protecting them from crises and having to come in to hospital. We anticipate that many hospital patients will have Covid-19 infection, and therefore we would want to avoid patients with sickle cell disease coming in to hospital with a crisis and contracting Covid-19 as an inpatient. Hydroxycarbamide does not increase the risk of viral infections. We will continue monitoring blood tests at 3 monthly intervals.

We may make changes to where your child has their blood test and will let you know if this is the case. At present please continue to collect your child's prescription as normal.