**Changes to Disease Modifying Anti-Rheumatic Drug (DMARD) monitoring and prescribing in Rheumatology 24/3/20**

We have reviewed practice for monitoring and prescribing DMARDs to patients with rheumatological disease in light of the COVID-19 pandemic and PHE guidance applied to at risk groups.

At this stage we are advising patients who have no symptoms of infection to continue their DMARDs.

They are ‘vulnerable people’ according to PHE guidance[[1]](#footnote-1). In this group there is a need to reduce unnecessary appointments and interactions with healthcare. Some patients may also be self-isolating.

We need to weigh up the risks and benefits of regular blood monitoring and ensure systems remain safe for patients. At this stage we advise that the requirement for DMARD monitoring is assessed on a case by case basis. It may be safe to continue medications despite not adhering fully to monitoring guidance[[2]](#footnote-2). It is likely that the vast majority of patients who have DMARDs monitored and prescribed in the community will have stable monitoring blood tests; hence we feel it is appropriate to relax the requirement for DMARD monitoring for 6 months.

**However, PLEASE NOTE, as prescribers, we need to be more vigilant for patterns in abnormal bloods from previous tests. Under current circumstances patients may need to be recalled for bloods SOONER despite the general relaxing of monitoring protocols.**

Prescribing health care providers should judge the safety of continuing to prescribe at the time of writing the prescription having reviewed previous results. We would accept blood tests from up to 6 months ago. In patients with normal DMARD monitoring blood tests it may be reasonable to book the next blood test for 3-6 months.

For example:

A patient who is taking Methotrexate 20mg per week PO for rheumatoid arthritis has requested a prescription. They are on a stable dose and have had normal bloods over the last year. The last bloods however are from 16 weeks ago. The patient has been advised to minimise contact. We would be happy to prescribe, and pharmacy should dispense. The next blood tests are booked for 16 weeks’ time. If subsequent abnormal blood tests become apparent then the patient will be contacted directly to stop the medication.

If a patient on DMARD medication is concerned they may have COVID-19 infection they should follow NHS 111 guidance. If they are advised to self-isolate they should contact the Rheumatology telephone help line (0191 569 9600) for advice on how to manage DMARD medication. It is imperative that patients with acute viral symptoms (fever, cough, myalgia, diarrhoea) DO NOT come to the Rheumatology OPD.

**Monitoring intervals can be extended in patients with previously stable blood testing at the prescribers’ discretion.**

Combined Heads of Service for Rheumatology Northern Region

Dr Ben Thompson

Dr Iain Goff

Dr Jennifer Hamilton

Dr Mike Plant

Dr Vipul Vagadia

Dr Matt Bridges

Dr Graham Raftery

1. <https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people> Accessed 20/3/20 [↑](#footnote-ref-1)
2. <https://academic.oup.com/rheumatology/article/56/6/865/3053478>. BSR guidance on DMARD monitoring. Accessed 20/3/20 [↑](#footnote-ref-2)