

# Coronavirus disease (COVID-19) and CLL patients

## Statement of the CLL Advocates Network

Date: January 6, 2021 (Version 6 – updated based on current guidelines)

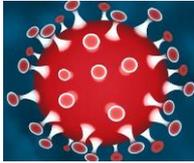
At the time of this writing, the world has been dealing with the novel coronavirus SARS-CoV2 that causes the infectious disease known as COVID-19 for close to a year. Most research reported so far has been on non-cancer patients, but that is changing fast and there is now some early data in CLL. Information and guidelines are also changing fast.

[CLL Advocates Network](#) wishes to provide extra advice specifically for CLL patients. This statement will mostly serve to signpost readers to reliable linked sources that can be counted on to be frequently updated.

There are however a few COVID-19 facts that do seem increasingly certain at this time and that we wish to share with you. Besides the above, this statement also includes a section on the new COVID-19 vaccines and what CLL patients should know, while signposting to links looking at safety issues in the immune compromised as well as at priority groups for vaccinations.

### TAKE AWAYS

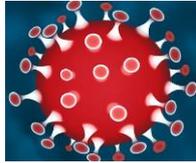
- Cancer patients in general and CLL patients in particular are at significantly higher risk for a more serious and complicated course with COVID-19.
- While many CLL patients may have a mild or moderate infection and most will survive the infection, the outcome is not fully known yet since data is not yet mature. Early data suggest that CLL patients who have symptomatic COVID-19 are at very high risk for serious complications including hospitalization and death.
- SARS-CoV2 is primarily spread through the air (carriers coughing, shouting, sneezing, etc.). Transmission may also occur indirectly through touching surfaces in the immediate environment or objects contaminated with virus from an infected person, followed by touching the mouth, nose, or eyes ([see WHO Reference for details](#)).
- The virus may also be spread through aerosols that can linger in the air, especially indoors.
- People who have no or few mild symptoms can spread the infection.



- Adopting good personal hygiene practices and following general public health recommendations has proven most effective against COVID-19. These include:
  - Wearing a well fitted mask and other personal protective equipment (PPE). Proper donning and doffing of the mask is critical to its efficacy.
  - Frequent and proper hand washing or hand sanitizing with approved sanitizer (>60% alcohol).
  - Sneezing and coughing into your arm/elbow.
  - Keeping surfaces clean and disinfected.
  - Not touching your face when your hands are not thoroughly washed.
  - No personal contact including hugs, kisses and hand shaking.
  - Avoiding large crowds.
  - Maintaining physical distance of at least 1 metre (3 feet) or better 2 metres (6 feet) lower the risk of transmission for all.
  - Choose outdoor spaces over indoor spaces since the latter are riskier (less ventilation, harder to keep people apart).
  - Have others shop for you and work from home when possible. However, this is subject to levels of infection in your community.
  - Avoid public transit and any non-essential travel.
- We are learning more, and treatments are improving, but SARS-CoV2 remains a contagious and deadly virus, and evidence is showing that it remains at large in the community. Therefore, CLL patients should be especially vigilant.

### COVID-19 VACCINATION

The development of effective vaccines is one of the most important measures to protect the population against potentially life-threatening infections. A safe and effective vaccine against COVID-19 is considered crucial in the fight against this pandemic. The race to develop COVID-19 vaccines is moving swiftly. Over 200 vaccine projects against SARS-CoV-2 with over 50 vaccine candidates have been started within a short period of time (see [WHO's landscape of COVID-19 candidate vaccines](#)). Given the urgent need for COVID-19 vaccines, unprecedented financial investments and scientific collaborations have lately changed the way vaccines are developed. Some of the steps in the research and development process that usually are done consecutively have been or are happening in parallel. WHO – however – assures that the research and development process is being accelerated without compromising safety and that strict clinical and safety standards are maintained, making sure that the new approach does not make the studies any less rigorous.



With the first vaccines authorized since early December 2020 and vaccination programmes started in some countries, the discussions on safety & efficacy and the questions of who should be prioritized in the vaccination programmes are in full swing.

There are still many uncertainties. However, overall opinion among medical experts at this moment is that the COVID-19 vaccinations currently approved are considered safe for the immune compromised. These have been tested in older people who have weaker immune systems, and in people with high-risk health conditions. The number of people who have participated in clinical trials are large to ensure that any serious side effects might be discovered in the vulnerable community. The approved vaccines work in similar ways to those already in use and are considered safe for people with blood cancer. There are, however, several uncertainties such as:

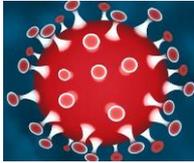
- How long will immunity last?
- Does the vaccine prevent transmission of the virus from an infected person to a healthy one? Further analysis is needed to know how much of a reduction in person-to-person transmission could be attributed to the vaccine.
- How often vaccines should be given?
- How will the vaccines respond in different groups?
- Etc.

What exactly does this mean for CLL patients?

1. The broader consensus among CLL experts is that – as vaccines are rolled out in different countries – CLL patients should be receiving the vaccines, as should those living under the same roof of a CLL patient with the approval of their healthcare team.

Special Cases: Those with a significant history of allergic reactions to a vaccine component, medicine or food, and those undergoing chemotherapy should seek specific medical advice prior to receiving the vaccination.

2. People who are on immunosuppressant medication tend to generally mount a less strong response to vaccines which may suggest that the coronavirus vaccines may be less effective in CLL and other immunosuppressed patients. Nonetheless, experts agree that some protection is better than none. It is also important to mention that patients need to receive both doses of the vaccines to acquire the maximum possible protection and long term immunity.



3. In its [practical guidelines for managing CLL in COVID-19 pandemic, the UK CLL Forum](#) advises CLL patients to have inactive flu vaccines at least two weeks before receiving a COVID-19 vaccine and should isolate from children having the nasal flu vaccination for 7 days.
4. Vaccination does not change required precautionary behaviours such as masking, social distancing, and frequent hand hygiene. CLL patients will therefore need to continue shielding and following the above hygiene rules while the disease is prevalent in their local community.

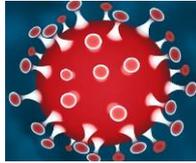
PLEASE CHECK THE FOLLOWING SOURCES IF YOU ARE SEEKING GENERAL UP TO DATE INFORMATION ON VACCINES AND COVID-19 VACCINATION IN BLOOD CANCER PATIENTS AND IN THE IMMUNE COMPROMISED:

General information on COVID-19 vaccination, access to vaccination and priority groups

- [WHO's \(World Health Organization\) COVID-19 vaccines page](#)
- [WHO's information on vaccine access and allocation](#)
- [WHO's draft landscape of COVID-19 vaccine candidates](#)
- [Advice from the British Joint Committee on Vaccination and Immunisation \(JCVI\) on the groups that should be prioritised for vaccination](#)
- [The CDC's \(USA\) info section on COVID-19 vaccines](#)
- [The Canadian Governments' Recommendations on the use of COVID-19 vaccines\(s\)](#)
- [Article published in The Lancet Microbe: "COVID-19 vaccines: the pandemic will not end overnight"](#)

Information on COVID-19 vaccination in the immune compromised, in patients suffering from haemato-oncological diseases in general and CLL in particular

- [Leukaemia Care's COVID-19 vaccination FAQs](#)
- [The CLL Support's statement](#)
- [The UK CLL Forum's practical guidelines for managing CLL in COVID-19 pandemic, the UK CLL Forum](#)
- [Blood Cancer UK's COVID-19 vaccine and blood cancer statement](#)
- [ASH's \(American Society of Hematology\) COVID-19 and Vaccines FAQ](#)



- [The German DGHO's advice on vaccination for patient suffering from haemato-oncological diseases](#) (German Society of Haematology and Oncology)
- [Dr. Koffman from CLLAN's member, the CLL Society \(USA\), on COVID-19 Vaccines - 12/2020](#)
- [Interview with CLL-expert Dr. Anthony Mato, regarding the question whether CLL Patients should get the COVID-19 vaccine when it's available?](#)
- [Webinar: CLL Support and UK CLL Forum's Update on the COVID Vaccine Rollout \(date: 16 Dec 2020\)](#)

IMPORTANT NOTE: The CLL Advocates Network plans to hold a webinar on "COVID-19 vaccination in CLL and other blood cancers and other immunocompromised patients - Immunizing the immunocompromised?" Please watch out for news (date, speakers panel, etc.) on our [website](#)!

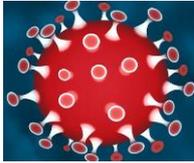
## COPING STRATEGIES

The coronavirus outbreak has caused major disruptions to daily life and we are all feeling these changes deeply. We all need to learn how to navigate successfully in this new environment. The [CDC](#) provides [practical guidance on how to cope with COVID-19 in our daily life and how to stay safe when going out](#), including running errands, visiting parks, using transportation, travelling, etc. If you decide to venture out into public setting, we recommend checking out these recommendations.

With COVID-19, many of us are struggling with disquieting thoughts and feeling concerned for vulnerable populations. COVID-19 is a fast-moving, ever-shifting precipitant of anxiety that can send us spiralling quickly. It is helpful to develop some strategies to cope with mental stress during this ongoing pandemic.

Below you will find websites with interesting tips and advice on how to look after our mental health:

- [WHO \(#Healthy at Home - Looking after our mental health\)](#)  
(Information available in various languages)
- [Psychology Today \(7 Ways to Cope With COVID-19\)](#)



## OTHER SELECTED & RELIABLE SOURCES OF INFORMATION

### COVID-19 and CLL specific information

- [ASH \(American Society of Hematology\) FAQs](#)
- [CLL Society COVID-19 updates](#)
- [UK CLL Forum website](#)

### COVID-19 and cancer information

- [Blood cancer UK](#)
- [Cancer research UK](#)
- [Leukaemia Care UK](#)
- [NIH \(National Institutes of Health\) USA](#)
- [ASCO \(American Society of Clinical Oncology\):](#)
- [German DGHO \(German Society of Haematology and Oncology\)](#)
- [Onkopedia \(a guideline portal for practising doctors in Germany, for CLL-specific information see chapter 6.2.13 Chronische Lymphatische Leukämie \(CLL\)\)](#)

### General COVID-19 information & information for vulnerable populations

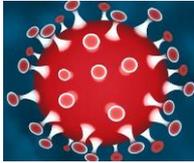
- [CDC \(Center for Disease Control USA\)](#)
- [WHO \(World Health Organization\)](#)
- [UW \(Univ. of Washington\) IDEA program- Treatment and Clinical Trials](#)
- [Johns Hopkins COVID-19 Dashboard mapping global cases](#)
- [Government of Canada](#)

Also please check with your appropriate local national and regional health and governmental authorities as to your particular circumstances, regulations and guidelines.

The [CLL Advocates Network](#) offers no medical advice. We ask you to check our recommendations with your local professionals and authorities.

## BE RESPONSIBLE FOR YOURSELF AND OTHERS

It has become a citizen's personal responsibility and duty to assess his or her individual risk of contracting (and spreading) COVID-19. A realistic risk assessment is especially important for the immune depressed.



PLEASE HELP US AND KEEP...

- Advocating and raising awareness with your local government and healthcare providers.
- Reminding your local Health Policy decision makers and other stakeholders of the high risk patients with haematological malignancies.
- Sharing best practices.

Stay safe!

Your *CLL Advocates Network Team*

Contact us at [info@ccladvocates.net](mailto:info@ccladvocates.net)

Tag us on [Twitter](#) or [Facebook](#)!