

Coronavirus disease (COVID-19) and CLL patients

Statement of the CLL Advocates Network

Date: 25 January 2022 (Version 7 – updated based on current guidelines)

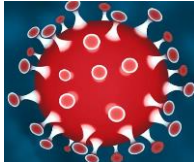
The CLL Advocates Network (CLLAN) makes every effort to ensure the information provided herein is accurate as of the date it is posted. This information is not intended to be a substitute for professional medical advice. Always seek the advice of your qualified health care provider with any questions you may have regarding a medical condition.

[The CLL Advocates Network](#) (CLLAN) with CLL Society (USA) is leading the International COVID-19 Blood Cancer Coalition (ICBCC) of patient organisations working together to raise awareness of the unique problems blood cancer patients face when it comes to COVID-19, and collectively discuss possible solutions to some of the more common challenges. The coalition is currently preparing a joint Patient Impact Statement for global release and use in different countries and local authorities to aid when lobbying for priority access to vaccinations, boosters, testing, antibodies, antivirals, and other measures. We will update this page as soon as this statement is available.

The CLL Advocates Network wishes to provide advice relevant for CLL patients. This statement will serve to signpost readers to reliable linked sources that are frequently updated.

TAKE AWAYS

- All **CLL patients** are **immune compromised** whether they are on treatment or Active Surveillance (Watch and Wait).
- CLL patients who have severe COVID-19 requiring hospitalization are at higher risk for serious complications including death. It is likely that age and general fitness also impact on COVID-19 related death.
- SARS-CoV2 is primarily spread when people breathe in air contaminated by COVID-19 in droplets and small airborne particles. The risk of breathing these in is highest when people are in close proximity or in crowded settings, especially indoors with limited ventilation. They can be inhaled over longer distances by talking, singing, coughing, shouting, and sneezing.
- Transmission may also occur indirectly through touching surfaces or objects contaminated with the virus from an infected person, followed by touching the



mouth, nose, or eyes ([see WHO Reference for details](#)) though this is likely less important than airborne transmission.

- People who have no or mild symptoms can and often do spread the infection.
- New variants of COVID-19 have increased the challenge for CLL patients and their health care providers. These will continue to emerge so this will remain a rapidly changing scene.

TO PROTECT YOURSELF AND PREVENT THE SPREAD OF COVID-19

- Get vaccinated but act unvaccinated. CLL patients have a poor overall antibody response against spike protein. Access booster vaccines as available in your area.
- Treatment with anti-SARS-CoV-2 monoclonal antibodies and antivirals is available in some countries, but access is often limited. Some are used as a prevention of COVID-19 and others are given if a diagnosis of COVID-19 is made. Contact your health care team to find out what is available for you.
- Wear a well-fitting mask that covers your nose and mouth. N95, KN95, KF94, FFP2 masks or double masks per [CDC Guidelines on masking](#) are recommended
- Stay 6 feet (at least 1 metre) away from people who don't live with you.
- Avoid crowds and poorly ventilated indoor spaces.
- Wash your hands often with soap and water for at least 20 seconds. Use hand sanitizer if soap and water isn't available.
- Cover coughs and sneezes.
- Clean and disinfect frequently touched surfaces daily.
- Be alert for symptoms of COVID-19.

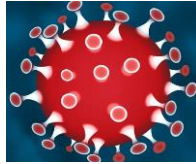
SELECTED RELIABLE SOURCES OF INFORMATION

COVID-19 and CLL specific information

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

COVID-19 and cancer information

- [Blood cancer UK](#)
- [Cancer research UK](#)
- [Leukaemia Care UK](#)
- [NIH \(National Institutes of Health\) USA](#)
- [ASCO \(American Society of Clinical Oncology\)](#)



General COVID-19 information

- [CDC \(Centers for Disease Control and Prevention, USA\)](#)
- [WHO \(World Health Organization\)](#)
- [Johns Hopkins COVID-19 Dashboard mapping global cases](#)
- [Government of Canada](#)
- [Australian Government Department of Health](#)
- [New Zealand Ministry of Health](#)

Also please check with your regional and national government health authorities for their regulations and guidelines.

COPING STRATEGIES/MENTAL HEALTH

These websites offer tips and advice on how to look after mental health:

- [CDC \(Centers for Disease Control and Prevention, USA\)](#)
- [WHO \(#Healthy at Home - Looking after our mental health\)](#)
(Information available in various languages)
- [Psychology Today \(7 Ways to Cope With COVID-19\)](#)

BE RESPONSIBLE FOR YOURSELF AND OTHERS

It is an individual's personal responsibility to assess their risk of contracting and spreading COVID-19. A realistic risk assessment is especially important for the immune compromised.

PLEASE HELP US

- Advocate and raise awareness with your local government and healthcare providers.
- Educate your local Health Policy decision makers and other stakeholders of the high risk for patients with haematological malignancies
- Push for priority access for early access to appropriate COVID-19 treatments for immune compromised blood cancer patients, which includes all CLL patients.
- Share best practices.

Stay safe!

Your *CLL Advocates Network Team*
Contact us at info@clladvocates.net
Tag us on [Twitter](#) or [Facebook](#)!