



## **Updated COVID-19 guidance for children with kidney disease on dialysis, and immunosuppression (including kidney transplants)**

**Updated 20<sup>th</sup> Nov 2020**

### **Why has the guidance been updated?**

UK COVID-19 infection levels have been rising and measures remain in place to reduce the spread of COVID-19.

We have been continuing to collect information on COVID-19 cases from kidney units across the UK. Reassuringly, very few UK children with kidney disease have been admitted to hospital with COVID-19. Most infected children have been mildly affected only. There is no evidence that medicines affecting the immune system increase the risk of catching COVID-19, and no proof they cause a more severe infection. There has been a small increase in the number of cases of COVID-19 in children with kidney disease as the cases nationally have been rising, but symptoms and outcomes are no different from those in children of a similar age without kidney disease.

There is evidence that the restrictions used to reduce the spread of COVID-19 have had an impact on the mental health of children and young people. One way of assisting children and young people at this time is through school communities and we are keen to support children attending school safely. We understand many families may feel anxious about this, particularly for children who were shielding.

We have used the latest statistics to update this information although the recent advice has not substantially changed. We will continue to follow the situation closely. Advice may change as doctors and scientists gather more evidence, and we will share all important new information with you.

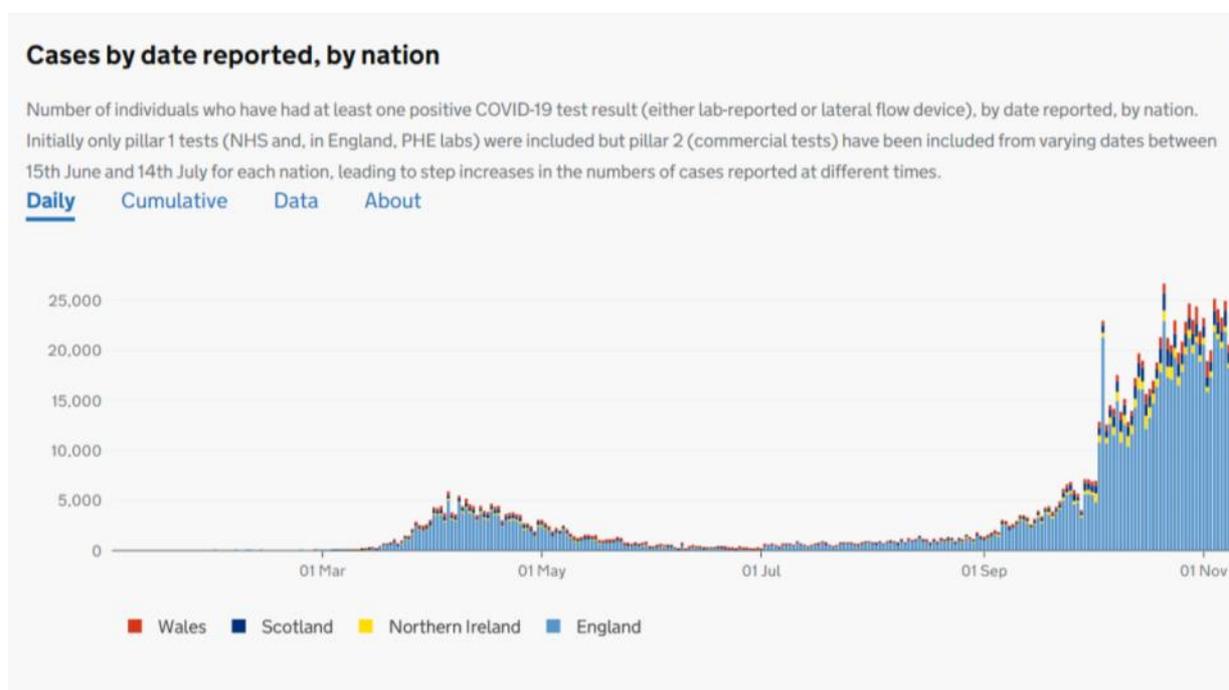
*Guidance produced after consultations with paediatric nephrology colleagues and kidney units.  
Thank you to all contributors*

*Yincent Tse, Lucy Plumb, Sally Hulton, Carol Inward, Dean Wallace, Jan Dudley, Martin Christian and Andrew Lunn*

# The risk of COVID-19 for children & young people (CYP; <18 years old), including those with kidney conditions

This is a combination of:

## A. Likelihood of coming in contact with someone infected with COVID-19<sup>1,2</sup>

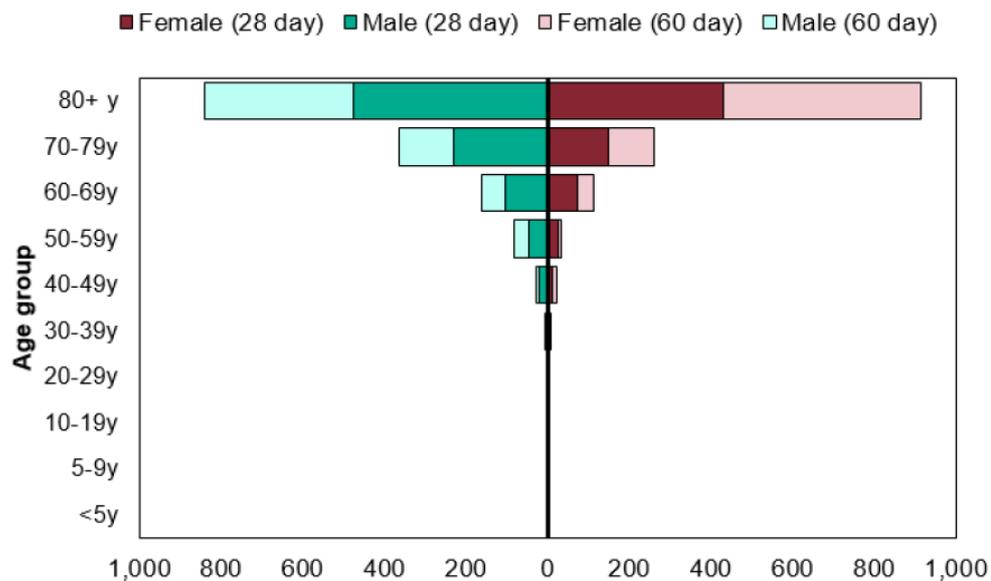


- Rates are rising but will differ in different parts of the UK
- Families should follow the advice applicable to the region of the UK that they live in.
- For regions that are not in lockdown, families can reduce their own risk by following this simple guide on [What are the risks of catching COVID-19 from various activities?](#)

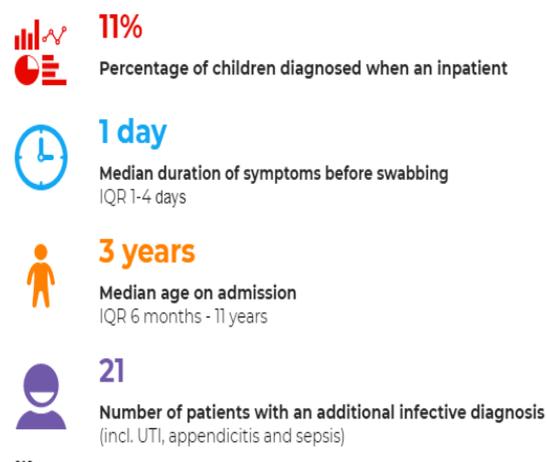
## B. Risk of getting ill if CYP get infected with COVID-19

1. Children are much less likely than elderly people to be severely affected by COVID-19. That is all children, not just those with kidney conditions.

Figure 40: Age/sex pyramid of laboratory confirmed COVID-19 deaths, since week 27



2. Very few children have been admitted to hospital with COVID-19<sup>3</sup> in the UK. The majority of cases were mild and were managed on a hospital ward. The average hospital stay was one day.



3. To date 28 children with severe chronic kidney disease, on dialysis or with a transplant out of over 1000 patients in the UK have tested positive for COVID-19<sup>5</sup>. The BAPN and UK Renal Registry will continue to collect up-to-date data.

4. In **people with kidney transplants**, the risk of death from COVID-19 is greatest in older adults compared with young adults or children. No one younger than 30 years old has died.
  
5. There have been **very few children with kidney conditions on medicines affecting their immune system who have had COVID-19**. Since the pandemic started children's kidney doctors across the world were asked for details of cases and only about 100 cases have been found<sup>7</sup>. The majority were mild. Other studies have not shown people on immunosuppression to be at higher risk than the general population. More recently steroid treatment has been advocated for some complications of COVID -19.

## In summary

Despite an increase in the number of cases nationally there is clear evidence that very few children are severely affected by COVID-19, even those with kidney conditions. Given the current status across the country of a high number of cases in adults we would remain cautious and recommend limited changes as below;

## Who should still be regarded as higher risk?

### Clinically extremely vulnerable (previously shielded group) children and young people include those:

- With recent kidney **transplants** – first three months immediately after transplant
  
- On high level of immunosuppressive medication for active disease undergoing induction treatment: ie** those who are currently receiving or within 4 weeks of starting treatment with high dose steroids together with other strong immunosuppressive medications
  
- Your kidney team determines with you that your child is at high risk**

## Guidance

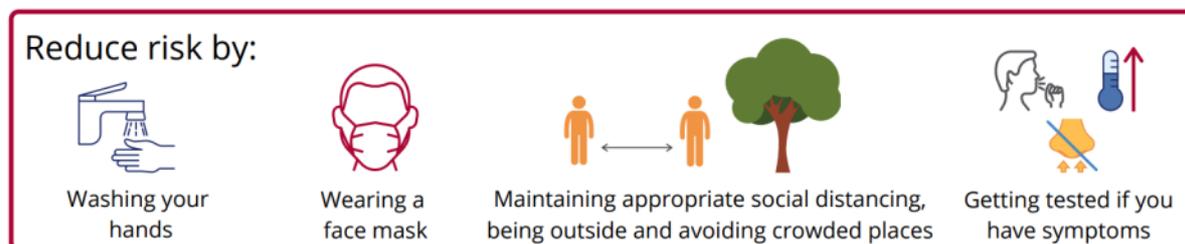
- Children in this group are **at risk of all types of infections** and complications, not only COVID-19. Families should be kept informed on how to seek urgent healthcare advice should they become unwell. It is important to be **up to date with immunisations including annual inactive influenza** when it is offered this year.
- Most children will need some time at home to get better after leaving hospital, during that time we recommend that you / your child self isolate, but take walks outside in quiet places staying 2m away from other people – **your unit will advise when best to return to school.**
- When returning to education, **discuss with nursery, school or college** about arrangements to keep children safe [Link to government advice on return to school is here.](#)
- **Families can reduce their own risk** of COVID-19 by following this simple guide and minimise risk during **travel** (such as avoiding public transport at peak times) [What are the risks of catching COVID-19 from various activities?](#)
- **Parents/carers and young people at work** should discuss with employers about putting suitable arrangements in place to minimise risk. The BRS/RA has produced letter templates to help this discussion. [Link to template letter for at risk patients and at risk family members](#)
- **Siblings should go to school or college** as long as the environment has been made COVID-19 secure in line with government guidance.
- If there is a **local lockdown**, government guidance will be made available to this vulnerable group. It is therefore helpful that your doctors keep your child on the government shielded patient list for automatic alerts. [Link to government advice is here](#)
- Steroids are one of the treatments that have been shown to be beneficial in treating complications of COVID-19. When they are used in a high dose with other strong immunosuppressive medicines this is an indicator that the overall treatment is powerfully reducing the immune system. This is why we have included children and young people treated with high doses of steroids together with other strong immunosuppressive medications as clinically extremely vulnerable.

## Children and young people waiting for a kidney transplant<sup>8</sup>

- Special protective measures and COVID-19 testing are required in the 2 weeks leading up to a planned **living donor transplant** to minimise the chance of infection. Your kidney unit will advise you of exact details.
- Unless they have other risk factors, CYP on the **waiting list for a deceased kidney transplant** are not at higher risk of catching COVID-19 or being more unwell with the infection. However, your kidney unit will decide with you, if additional measures are required before activation on the waiting list.

## Frequently asked questions (F.A.Q.s)

### What can we all do to minimise catching or spreading COVID-19?



### My child was previously in an intermediate risk (clinically vulnerable) group – what should they do now?

- Fortunately, the evidence now shows that this group of children is not at higher risk than other children without a kidney condition
- The government advice is that all children should attend nursery or school
- Families may still wish to be cautious and reduce their own risk of COVID-19 by following this simple guide [What are the risks of catching COVID-19 from various activities?](#)
- It is important to be up to date with immunisations including annual inactivated influenza vaccine.

### What will happen if there is a case of COVID-19 at school?

- Do not panic. Children sent home from school because of coughing or fever are just as likely to have other common respiratory viruses. A case needs to be confirmed as COVID-19 by testing, which may take a few days.
- Government advice for what schools, parents and students need to do is [here](#)
- Any student may be asked to self-isolate for 14 days by their school or college (based on advice from their local health protection teams) if they have been in close, face-to-face contact with someone who has tested positive for the virus. An outbreak is classified as 2 or more confirmed cases within 14 days, following which the local health protection team will be sent in to advise.

### Where can I get government advice?

The four different UK nations have slightly different COVID-19 healthcare and schooling advice. Advice for clinically extremely vulnerable patients (previously shielded group) is available here:

[England](#)

[Scotland](#)

[Wales](#)

[Northern Ireland](#)

## References

1. ONS (2020). [Latest numbers of people with COVID-19](#)
2. GOV.UK (2020). [Coronavirus \(COVID-19\) in the UK](#)
3. GOV.UK (2020). [National COVID-19 surveillance reports](#)
4. RCPCH (2020). [COVID-19 - service evaluation and audit on the care needs of children admitted to hospital \(England\)](#)
5. Plumb L, Benoy-Deeney F, Casula A, et al. [COVID-19 in children with chronic kidney disease: findings from the UK renal registry. Archives of Disease in Childhood](#) Published Online First: 24 July 2020. doi: [10.1136/archdischild-2020-319903](#)
6. UK Transplant Registry; [Weekly Report 6<sup>th</sup> Nov](#)
7. Marlais M, Wlodkowski T, Vivarelli M. [The severity of COVID-19 in children on immunosuppressive medication. Lancet Child Adolesc Health. 2020 doi: 10.1016/S2352-4642\(20\)30145-0.](#)
8. NICE (2020). [COVID 19 rapid guideline: renal transplantation \[NG178\]](#)