COVID-19 UPDATE
Advice for children & young people with kidney disease
20 November 2020

What is happening in the UK?

- The UK Renal Registry continues to collect information every week from our paediatric kidney centres on children and young people who test positive for COVID-19.
- To date, 28 children with chronic kidney disease have been reported to have COVID-19.
- One child has died following a positive COVID-19 test. This was almost 4 months after the confirmed test. The child had another very serious underlying health condition.

We have updated our high-risk category

Based on current evidence, we have updated our recommendations.
You are at high risk of serious illness from all infections, including COVID-19:

- If you have received a kidney transplant in the last 3 months
- For 4 weeks after starting high dose steroids (20mg+/day) together with another strong immune medicine
- If your kidney team says you are high risk

Guidance

- We recommend you take strict infection precautions including social distancing and avoiding people with symptoms of infection.
- Please seek urgent medical review if you are unwell. It is important to get your annual flu jab.
- Family members do not need to shield but should follow government guidance - parents and carers should talk to their employers about minimising risk.
- Your kidney team will advise when to return to school.

Waiting for a kidney transplant

- You will need to self-isolate before a planned living donor transplant. Your kidney team will provide more information including how many days of self-isolation are needed.
- You are unlikely to need to self-isolate if waiting for a deceased donor kidney - this will be decided on a case-by-case basis by your kidney team.

We encourage children and young people who are not in the high risk category to attend school or nursery

If you have any concerns or queries about your or your child’s care, please speak to your kidney team. We will continue to monitor the situation closely. This advice may change as we gather evidence.