

19 March 2020

## IMPACT OF COVID-19 ON PATIENTS WITH GASTROINTESTINAL AND LIVER DISORDERS

Cases of novel Coronavirus infection (COVID-19) are rapidly increasing in the Australian community as they are in most countries around the world. Information about this new viral infection is rapidly changing and it is important to stay up to date with advice from federal and state-based departments of health.

Many patients with gastrointestinal (GI) and liver disorders require long-term immunosuppressive medication to control their disease activity. This includes patients with inflammatory bowel disease or auto-immune hepatitis or who have recently received a liver transplant. Other patients have chronic diseases that may increase the risk for serious manifestations if they contract COVID-19 infection. This includes people with cirrhosis, liver cancer, other gastrointestinal cancers, diabetes or nutritional disorders.

The Gastroenterological Society of Australia provides here some guidance in response to questions being asked by GI and Liver patients and their treating clinicians with regard to the impact of COVID-19. It should be noted that this advice is general in nature and thought to be correct at the time of posting. The user should have regard to any information, research or other material which may have been published or become available subsequently. All discussions about specific management issues should be between individual patients and their clinicians.

### Am I at increased risk of COVID-19 infection?

The virus causing COVID-19 infection (called SARS-CoV-2) is a new infection that has not previously affected humans. Therefore there is no immunity to this infection in the community. The infection appears to be spread by droplets in the air when you are in close social contact with someone who is coughing or sneezing. It may also be spread by touching contaminated hands, surfaces or objects and then touching the eyes, nose or mouth. The virus appears to be quite contagious and everyone is at equal risk of acquiring it.

The majority of patients with COVID-19 exhibit mild symptoms including a runny nose, sore throat, cough or shortness of breath. Most people with infection do not require significant medical care. More serious infection can result in pneumonia or marked difficulty in breathing. It is believed that people with reduced immunity because of their medication, advanced age or an underlying illness are at risk of more serious infection.

### How can I reduce the risk of getting infection?

As with other infectious disease that are spread person-to-person good basic hygiene is important. This includes washing hands regularly with soap and water or using alcohol-

based hand sanitiser products. You may choose to avoid crowded areas like shopping malls or sporting events or limit your travel, particularly overseas travel. Face masks are not routinely recommended. You may decide to avoid coming to hospital clinics for review of your medical condition (see below).

### How can I reduce the risk of severe infection?

It is important to protect yourself against other respiratory infections that are common at this time of year. Therefore it is recommended that all patients with reduced immunity have the Influenza Vaccine (flu-shot) as soon as it is available. The vaccine provides optimal protection for the first three to four months after vaccination. It is recommended that people who have received a liver transplant within the last year have a second flu-shot at least four weeks after the initial vaccination. Pneumococcal vaccination every five to ten years is also recommended for people with reduced immunity. Specific recommendations vary according to age and previous vaccination history.

### What should I do if I develop symptoms?

The symptoms of early COVID-19 infection are similar to cold and flu symptoms and include fever, runny nose, sore throat and cough. If you are concerned you might have infection you should call your GP or local health service and tell them of your concern. They will tell you how you should arrange to be tested. Or you can call the national Coronavirus Health Information Hotline on 1800 020 080. Clinic staff can also contact the Hotline for advice. Many hospitals are establishing testing clinics and community testing centres are being established. You should not just attend your GP or the hospital emergency department without calling ahead. If you are really unwell with shortness of breath you may need to call an ambulance – make sure you advise them that you are concerned you might have COVID-19 infection so they can manage you appropriately.

### Should I attend my routine clinic visits?

It is important that people with GI and liver conditions remain under care through the COVID-19 outbreak. Hospital clinics and specialists are reducing the numbers of people attending for routine review. Some people with active issues of concern may still need to be seen for a face-to-face consultation. However from 13 March 2020 new Medicare item numbers are available for attending a specialist tele-health consultation by video-conference or by telephone consultation. Older people and those with chronic illnesses or who are immune-suppressed may be at increased risk if they develop COVID-19 infection. Please consider if a telephone call or a video-conference may provide a better way of receiving specialist review of your condition without the infection risk associated with visiting the clinic.

You should contact your specialist to discuss whether a telehealth consultation is appropriate for you.

## Should I adjust my medication to reduce my risk of infection?

Your medication was prescribed to manage your medical condition and to keep your condition well controlled. Stopping medication poses a risk of poor disease control. Any adjustments to your medication should only occur in discussion with your treating clinician. If you are unwell with COVID-19 then the doctors treating you may temporarily stop some of your medication. Your specialist should be notified if this happens as alternative medication may be required.

## I have an overseas trip booked. What should I do?

The Australian Government is updating travel advice on the Smart Traveller website on a daily basis. The situation around the world is changing rapidly and it is important to be prepared and informed about your planned destination as well as about countries through which you might transit. Many people feel that this is not a good time to travel unless it is essential. You need to check out all the fine print in your travel insurance if you are intending to travel to make sure you are covered for illness and also for change of flights or accommodation if new rules about travel are brought in by the government. Cancellations for known events, including COVID-19, are usually not covered by travel insurance.

## Related Links for Patients and Healthcare Providers:

<https://www.smartraveller.gov.au/>

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>

<https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources>

<https://www.healthdirect.gov.au/coronavirus>

<https://www.dhhs.vic.gov.au/coronavirus> (Victoria)

<https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus.aspx> (NSW)

<https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/diseases/coronavirus> (Queensland)

<https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+topics/health+topics+a+-+z/novel+coronavirus> (South Australia)

[https://ww2.health.wa.gov.au/Articles/A\\_E/Coronavirus](https://ww2.health.wa.gov.au/Articles/A_E/Coronavirus) (Western Australia)

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019> (WHO)

<https://www.bmj.com/content/bmj/368/bmj.m800.full.pdf>

<https://www.asid.net.au/resources/coronavirus-2019>

<http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/news-2020-03-01-latest-news-March>

<https://www.gesa.org.au/resources/information-disclaimer/>

## Gastroenterological Society of Australia

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