



Medication Guidance for Pediatric Rheumatology Patients During Covid-19 Outbreak

The American College of Rheumatology (ACR) has developed new clinical guidance for pediatric patients with rheumatic diseases. Maintaining treatment plays an important role in keeping your child's disease well-managed during the coronavirus outbreak. While each patient is unique, ACR's North American Task Force has developed new medication guidelines as a framework. The taskforce members noted that "this guidance is provided as part of a 'living document' recognizing rapidly evolving evidence." The recommendations are not intended to replace the shared decision-making process between doctors and patients.

For additional details, click [here](#).

 no known SARS-CoV-2 exposure or infection

 close/household exposure

 possible or documented SARS-CoV-2 exposure or infection

KEY TAKEAWAYS

Patients who are currently stable on NSAIDs, DMARDs or immunosuppressive medications should continue their medication unless their doctors advise otherwise.

Patients should continue routine childhood vaccinations (unless contraindicated due to DMARD therapy), including the annual influenza vaccine.

Patients may be started on NSAIDs, glucocorticoids or immunosuppressive medications as indicated.

High-dose or intravenous glucocorticoids should be delayed for 1-2 weeks for patients with non-life threatening and/or organ disease.

High dose or IV glucocorticoids should not be delayed in patients with life- and/or organ-threatening disease.

Certain medications may be continued or delayed during infection to control underlying disease, depending on doctor's recommendation.