



Mater Misericordiae
University Hospital
Sisters of Mercy

Eccles Street, Dublin D07 R2WY, Ireland

Tel: +353 1 8032000 Fax: +353 1 8032404 Web: www.mater.ie



Ospidéal Ollscoile

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Siúrachá na Trícaire

Sráid Eccles, Baile Átha Cliath D07 R2WY, Éire

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Advice for IBD patients during COVID-19 outbreak

You are not at increased risk of developing COVID-19 because you have IBD (Crohn's disease or ulcerative colitis).

You should follow all the HSE advice on cough etiquette, social distancing, and hand hygiene.

You should continue to take all your regular medicines for IBD unless your doctor advises otherwise.

If you take any of the following medicines, you should cocoon yourself (stay at home) because these medicines lower your immune system and may make it harder to fight COVID-19.

List of medicines:

- Ustekinumab (Stelara)
- Vedolizumab (Entyvio)
- Methotrexate
- Infliximab (Remicade, Inflectra, Remsima)
- Adalimumab (Humira, Amgevita, Hulio, Imraldi)
- Golimumab (Simponi)
- Azathioprine (Imuran)

- Mercaptopurine (Purinethol)
- Tacrolimus (Prograf)
- Ciclosporin (Sandimmune, Neoral)
- Tofacitinib (Xeljanz)
- Clinical trial medications
- Prednisolone (Deltacortril) at a daily dose of 20mgs or greater

If you are an essential worker and are taking one of these medicines, you should discuss with your occupational health department before working.

For the most up to date national advice about cocooning please go to the HSE's dedicated COVID-19 advice page which is online at www2.hse.ie/conditions/coronavirus/at-risk-groups.html

If you develop symptoms of COVID-19 such as fever, cough or shortness of breath you should immediately contact your GP and follow HSE advice regarding self-isolation and testing. You should also contact your IBD specialist (IBD@Mater.ie or telephone 01-8607019) who will advise you how to manage your medications in this scenario.

If you notice your IBD symptoms are getting worse (flaring), contact our IBD Advice Line (IBD@Mater.ie or telephone 01-8607019).

***This advice has been provided by the National Programme for Inflammatory Bowel Disease and is endorsed by the Mater Hospital GI Department, Irish Society of Gastroenterology and the Health Service Executive (HSE).**

'Commitment to Excellence'

Directors: Mr Thomas Lynch (Chairman), Dr Mary Carmel Burke, Ms Mary Day, Mr Rod Ensor, Mr Tony Garry, Ms Michelle Gibbons, Prof Cecily Kelleher, Prof Brendan Kinsley, Dr Mary McMenamin, Prof Pádraic MacMathúna, Sr Eugene Nolan, Ms Eilís O'Brien, Mr Kevin O'Malley, Sr Margherita Rock, Mr David O'Kelly

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