

## **Practical guidelines for managing CLL in COVID pandemic post lockdown**

1. Consider telephone or video conference appointments if feasible.
2. Watch and Wait and query progressing- at the next scheduled appointment perform local blood test with “bleed and go” with f/u telephone consult.
3. Consider anti-microbial prophylaxis (e.g. PJP) for all treatment regimens in CLL.
4. Stage B/C needing treatment, consider clinical trial, AstraZeneca have launched an acalabrutinib CLL program for treatment naïve patients (fulfilling eligibility criteria for ELEVATE-TN population), contact [antara.ghosh1@astrazeneca.com](mailto:antara.ghosh1@astrazeneca.com) for more details. We recommend Acalabrutinib monotherapy.
5. If on oral BTKi or Venetoclax- consider initial telephone consult , prescribe medication in advance, “bleed, sign consent and go” on day with immediate prescription pick up or preferably home delivery and locally performed blood tests, to ensure home delivery for vulnerable and elderly patients register on <https://www.gov.uk/coronavirus-extremely-vulnerable>; increase intervals for patients being seen, check shielding advice on government website.
6. Consider restarting Rituximab component of Venetoclax Rituximab (<https://www.nice.org.uk/guidance/ng161/chapter/7-Modifications-to-usual-service>)
7. If initiating relapse therapy, oral BTKi would result in less hospital attendance, VR initiation can be considered. The BlueTeq form for VR in relapsed setting had been updated and patients relapsing on BTKi are eligible.
8. Please help us with the CLL patients’ survey filled out by patients <https://forms.gle/3KcPk956GbuXKoTK9> , for the clinical survey of CLL patients who had Covid test positive or negative please fill this form <https://redcap.swan.ac.uk/surveys/?s=NL3LMLAWXJ> or please contact [Fegand1@cardiff.ac.uk](mailto:Fegand1@cardiff.ac.uk).

**If there are any queries regarding management and not covered by this guideline, please send the query through the website and we will try to respond in a timely manner.**

*The points below are for consideration and do not constitute a guideline or firm recommendations for practice. There will understandably be considerable local geographical and patient-specific factors that will influence how individual patients are managed during the COVID pandemic*