

EULAR
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Kilchberg,
Switzerland

UPDATE: REPURPOSING RHEUMATOLOGY DRUGS FOR COVID-19

EULAR has updated its points to consider on the use of immunomodulatory drugs in the fight against severe COVID-19

COVID-19 is the disease caused by infection with the SARS-CoV-2 virus. Since it emerged at the end of 2019, the virus has caused a global pandemic. COVID-19 can be mild, or even without symptoms at all. But it can also cause severe disease, leading to respiratory problems, organ failure, and death. Research on the immune mechanisms involved in people with severe COVID-19 has shown that they have widespread inflammation. Early on in the pandemic, several immunomodulatory anti-inflammatory treatments commonly used in people with rheumatic and musculoskeletal diseases (RMDs) were proposed as possible options for people with severe COVID-19.

Rheumatologists are familiar with the everyday use of immunomodulatory drugs. These are designed to treat the inflammation caused by autoimmune diseases such as rheumatoid arthritis. In 2020, a EULAR taskforce was set up to develop a set of new points to consider to give guidance and advice on the best way to use these medicines to treat COVID-19. These have now been updated for 2021 to include the latest published evidence.

In total, there are two overarching principles and 12 points to consider. These overarching principles remain unchanged from the original publication, and stress that the picture of SARS-CoV-2 infection can be very different in different people. Infections range from asymptomatic or mild disease to severe or fatal. People with COVID-19 may need different treatment approaches, including antiviral medicines, oxygen therapy, anticoagulation and/or immunomodulatory treatment at different stages of the disease.

The 12 points to consider focus on immunomodulatory therapy, and how we might use existing medicines from the field of rheumatology to treat severe COVID-19. These give specific advice about which treatments to use at what stages of the disease. Overall, four of the points are unchanged from the 2020 version, four are modified, and four are new. Among immunomodulatory drugs useful for treating severe COVID-19, WHO has provided a strong recommendation for using dexamethasone and anti-IL-6 receptors antibodies.

The picture is changing very quickly, which means there are still some areas of uncertainty. EULAR will continue to update the advice in response to increasing knowledge and evidence about the disease, its treatment, and the impact of COVID-19 vaccines.

These findings do not apply to people living with RMDs who are taking immunomodulatory treatments for their rheumatic disease. Separate recommendations are available for the management of people with RMDs in the context of the pandemic.

Source

[Alunno A, Najm A, Machado PM, et al 2021 update of the EULAR points to consider on the use of immunomodulatory therapies in COVID-19 Annals of the Rheumatic Diseases Published Online First: 07 October 2021. doi: 10.1136/annrheumdis-2021-221366](#)

About EULAR

EULAR is the European umbrella organisation representing scientific societies, health professional associations and organisations for people with rheumatic and musculoskeletal diseases (RMDs). EULAR aims to reduce the burden of RMDs on individuals and society and to improve the treatment, prevention and rehabilitation of RMDs. To this end, EULAR fosters excellence in education and research in the field of rheumatology. It promotes the translation of research advances into daily care and fights for the recognition of the needs of people with RMDs by the EU institutions through advocacy action.

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