COVID-19 and Immunodeficiency

This information has been developed for people with primary and secondary immunodeficiencies, in response to the COVID-19 infectious respiratory disease outbreak caused by the most recently discovered coronavirus.

What is COVID-19 and how does it spread?

Coronaviruses are a large family of viruses that cause respiratory infections, including the common cold and more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS).

The most recently discovered coronavirus (formerly the Novel 2019-nCOV coronavirus), causes coronavirus disease (COVID-19), with symptoms that include cough, fever and shortness of breath. This virus and disease were unknown before the outbreak began in December 2019.

The World Health Organisation (WHO) is assessing ongoing research on how COVID-19 is spread. Studies to date suggest that the coronavirus that causes COVID-19 is mainly spread through contact with respiratory droplets containing the virus.

COVID-19 can spread when someone:

- Inhales droplets containing the virus when a person with COVID-19 coughs or sneezes.
- Touches a person or surface that is contaminated with droplets containing the virus, then touches their eyes, nose or mouth. From there, the virus can enter the body and cause illness.

What precautions should people with immunodeficiencies take?

Most people with immunodeficiencies and those on medications that suppress their immune system are immunocompromised and are therefore at greater risk of getting any respiratory infections.

However, we do not know whether people with immunodeficiencies are at risk of more severe symptoms if they get COVID-19.

Precautions they take to prevent infections are consistent with the actions listed on the following page, and they should follow the usual advice from their physician.

People with severe immunodeficiency or immunosuppression, including those undergoing bone marrow (stem cell) transplant are at high risk from all infections. They will already be aware of the need to avoid infections, (including actions listed below) and what to do if they are unwell or come in contact with any infectious disease.

People with immunodeficiencies who receive monthly immunoglobulin replacement therapy infusions in hospitals still need to receive their treatment. Hospital infection control policies are in place with extra precautions to isolate patients with, or at risk of getting COVID-19. If infection of COVID-19 is suspected at the time of infusion, promptly contact the treating team for advice.

Additional advice for people with immunodeficiencies

In addition to the actions listed on the following page:

- Request telehealth (video or phone) consultations if your immunologist agrees, and discuss having the influenza vaccine, and any additional vaccines you may benefit from.
- If you are on immunoglobulin replacement therapy, continue to have this, as previously prescribed.
- Do not stop or reduce medicines, including any antibiotics or other medicines used to prevent infections, or immune suppressing medicines, without discussing this with your immunologist.
What actions can reduce the spread of COVID-19 and other respiratory infections?

To reduce the spread of COVID-19 and other respiratory infections, the following actions should be taken:

- **Hand hygiene is the top priority.** Regular and thorough hand washing with soap and water throughout the day, particularly after using the bathroom and before eating is vital for preventing infections. Alcohol-based hand-gel can be used to sanitise hands when soap and water isn't available. Avoid touching your eyes, nose and mouth. Also avoid shaking hands or any other greeting that involves contact.

- **Respiratory hygiene is also a priority.** This involves covering the mouth and nose with a bent elbow or tissue when coughing or sneezing, then disposing of the used tissue immediately. It is also important to maintain at least 1.5 metres distance away from anyone, especially if they cough or sneeze.

- **Stay home if you are unwell or if you have recently travelled.** If anyone has a fever, cough or breathing difficulty, they should stay home, seek medical attention (call in advance), and follow the local health authority instructions. **Self-isolation** is required if contact has been made with someone with COVID-19 symptoms, or symptoms develop following contact with someone who has COVID-19 (see details below). **Quarantine** of 14 days is required for people who have travelled, even if they do not feel unwell.

- **Follow government advice and restrictions.** It is important that everyone complies with government advice restrictions, that include the actions listed above, in addition to **not travelling** (except for essential workers), and **physical/social distancing measures**. Examples of these measures are working from home where possible, avoiding any gatherings and partial or full closure of most hospitality businesses.

When is self-isolation required?


Further information

The situation regarding COVID-19 is rapidly changing, so it is important to monitor information from the Australian government, New Zealand government, international immunodeficiency organisations and ASCIA.


Call the Coronavirus Health Information Line 1800 020 080 (24 hours a day, 7 days a week).

Call Healthdirect Hotline 1800 022 222 (24 hours a day, 7 days a week) to speak to a registered nurse.


Call the Government Helpline on 0800 779 997 (9am to 5pm, 7 days a week) if you are not sure what support is available, don’t know who to contact for help or would like more information.


This webpage includes links to WHO and international immunodeficiency organisations.

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