

4) COVID-19 AT RISK POPULATIONS

People at moderate risk (clinically vulnerable)

(NB - the list below may not include everyone at higher risk of developing complication from coronavirus and may change as more is known about the virus).

Patients are at moderate risk of developing complications from coronavirus (COVID-19) where:

- They meet the criteria that make them eligible for the annual flu vaccination (except those aged 65 to 69 years old inclusive who have no other qualifying conditions).
- They do not meet the CMO criteria for the high-risk group for COVID-19, including those identified by the COVID-19 Population Risk Assessment.
- This includes patients aged 70 or older (regardless of medical conditions), or patients under 70 years old who:
 - have chronic (long-term) respiratory disease, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
 - have chronic heart disease, such as heart failure
 - have chronic kidney disease (Stage 1 to 4)
 - have chronic liver disease, such as hepatitis
 - have a chronic neurological condition, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
 - have diabetes
 - have a weakened immune system caused by a medical condition or medications such as steroid tablets or chemotherapy
 - are seriously overweight (a BMI of 40 or above)
 - are pregnant.
- For adults, this is usually anyone instructed to get a flu jab as an adult each year on medical grounds.

People deemed at high risk (clinically extremely vulnerable)

(NB: the list below may not include everyone at higher risk of developing complications from coronavirus and may change as we learn more about the virus).

Those at high risk of developing complications from Covid-19 include:

- solid organ transplant recipients
- people with specific cancers:
- people with cancer who are undergoing active chemotherapy
- people with lung cancer who are undergoing radical radiotherapy
- people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
- people having immunotherapy or other continuing antibody treatments for cancer
- people having other targeted cancer treatments that can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
- people who have had bone marrow or stem cell transplants in the last 6 months or who are still taking immunosuppression drugs

- people with severe respiratory conditions including all cystic fibrosis, severe asthma and severe chronic obstructive pulmonary disease (COPD)
- people with rare diseases that significantly increase the risk of infections (such as severe combined immunodeficiency (SCID), homozygous sickle cell disease)
- people on immunosuppression therapies sufficient to significantly increase risk of infection
- problems with your spleen, for example splenectomy (having your spleen removed)
- adults with Down's syndrome
- adults on dialysis or with chronic kidney disease (stage 5)
- other people who have also been classed as clinically extremely vulnerable, based on clinical judgement and an assessment of their needs. GPs and hospital clinicians have been provided with guidance to support these decisions
- women who are pregnant with significant heart disease, congenital or acquired