

UCSF Multiple Sclerosis and Neuroinflammation Center COVID-19 Townhall #2 Q&A | June 10, 2020, 5:30 PM (PST)

COVID-19-SPECIFIC QUESTIONS

Can individuals that already contracted COVID-19 and recovered still be contagious?

According to the CDC, there is no evidence that individuals who have clinically recovered from COVID-19 with persistent or recurrent SARS-CoV2 RNA detection have transmitted the infection to others. This is an encouraging observation, but unfortunately not yet conclusive without further study.

Does an individual's Blood Type affect their susceptibility to COVID-19?

Researchers in Europe have conducted a genome-wide association study to identify genetic factors that may be associated more severe disease. One of the associated gene locations coincided with ABO blood group with a higher risk of severe infection in blood group A and protective effect in blood group O. This study, however, was limited because this study did not include individuals who were exposed but not infected or asymptomatic.

COVID-19 AND MS

Due to MS I am concerned about an overreactive immune response to COVID-19. Is this true?

Multiple Sclerosis is an autoimmune condition that is specific to the central nervous system (brain and spinal cord) without other body organ involvement. There is currently no data to suggest that people with multiple sclerosis are more likely to have an increased immune response to COVID-19.

I have MS, but I am not on a DMT. Am I at higher risk than a normal individual?

There is no reason to believe that MS patients in general are at any higher risk for developing COVID19 or complications of COVID19. So far MS patients have not been identified as an at risk group by any of the large studies of COVID19 patients.

Many of us MS patients take Vitamin D, as recommended by our clinicians. What are your comments on the idea that "Vitamin D levels appear to play a role in COVID-19 mortality rates"?

This research is still in very early stages and doesn't yet show a direct link between low vitamin D levels and COVID19 mortality rates. In this study, they used the average mortality rates from a given country and compared them to the average vitamin D level within that same country. Unfortunately, they don't have data from individual patients with COVID19 showing that those with low vitamin D levels

were at increased risk. It's an interesting hypothesis, but has a long way to go before I would recommend Vitamin D for COVID19. For those patients already on Vitamin D, I would continue to take it as directed by your provider and consider having your Vitamin D level checked to make sure you are within the normal range.

Science Daily article:

<https://www.sciencedaily.com/releases/2020/05/200507121353.htm>

What data is being collected on MS patients who have contracted COVID-19?

UCSF Multiple Sclerosis and Neuroinflammation Center is currently gathering information regarding patients who have had confirmed or suspected COVID-19. If this applies to you and you did not receive a survey please let our clinic know. Additionally there are other institution-specific, national, and international patient registries that are continuing to gather information on presenting symptoms and clinical outcomes for people with living with multiple sclerosis who develop COVID-19 symptoms.

TRANSITION BACK TO "NORMAL LIFE"

Are there any guidelines regarding transitioning out of quarantine, continuing "non-essential" doctors' appointments, or social gatherings?

The COVID-19 pandemic is unfortunately ongoing, and for many of us, we are determining the extent of risk mitigation we feel comfortable with to allow for some level of normalcy in our lives. Fortunately, there has not been clear evidence that people living with MS or on MS therapies are at significantly increased risk for developing COVID-19 or having worse outcomes relative to the general population. However, it is still a highly contagious infection and can potentially result in serious complications. In general, we recommend that if you will be outside the home you should wear a mask, stay 6 feet away from others, and continue washing your hands frequently. Social gatherings that are outside and allow for proper social distancing will be lower risk than crowded gatherings that are indoors. Your decision regarding returning to work, going to appointments, summer travel, etc. must be an individualized decision that accounts for risks and benefits specific to you. It would be best to discuss this with your physician.

DISEASE-MODIFYING THERAPIES AND COVID-19

Is there any new evidence to tell us which DMTs, if any, worsen outcomes for MS patients that contract COVID-19?

Fortunately, information from international registries has not suggested an increased risk of contracting COVID-19 or worse outcomes after contracting COVID-19 in individuals with multiple sclerosis or on MS disease modifying therapy relative to the general population. If you have concerns about your specific therapy, please discuss this with your MS physician.

PATIENT SAFETY

What diagnostic studies can be performed at the UCSF campus and what changes should I expect to ensure patient safety when I come for my visit?

All diagnostic studies felt to be necessary and appropriate can be done at UCSF (guidance of timing to be determined by prescribing physician). These studies include MRI, lumbar puncture, EMG/Nerve conduction studies, and visual diagnostics. To ensure patient and staff safety, visitors will be limited to essential caretakers, and there will be more frequent cleaning of rooms/equipment. All visitors must wear a mask and the number of individuals in an enclosed room or elevator should be limited to minimum number of people. Please feel free to call our clinic before your studies to review safety precautions if you have any concerns.