From EULAR 9 June 2020

Dear Members of the EULAR Network,

EULAR has published the press release, NEW: RHEUMATIC DISEASE IN THE CONTEXT OF COVID-19, following the publication of the recommendations in the Annals of Rheumatic Diseases on 5 June: <https://ard.bmj.com/content/early/2020/06/05/annrheumdis-2020-217877>

This press release follows a presentation to German media audiences by Professor Hendrik Schulze-Koops, EULAR Scientific Committee member, at the EULAR Press conference held on 27 May, 2020.

Watch the press conference here: <https://youtu.be/HOC_wXq1KyE>

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NEW: RHEUMATIC DISEASE in the context of COVID-19

**The European League Against Rheumatism (EULAR) has published new provisional recommendations in response to the SARS-CoV-2 (COVID-19) pandemic**

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SARS-CoV-2 is a new virus and COVID-19 a new disease. People with rheumatic musculoskeletal diseases (RMD) may have specific concerns at this time due to their disease or its treatment. Since generic COVID-19 guidance does not focus on RMD, EULAR considered it essential to fill this gap. The new provisional recommendations are designed to supplement country-level government guidelines, and support rheumatologists and healthcare professionals who care for people with RMD, physicians involved in treating COVID-19, as well as RMD patients and their families.

Based on existing guidance documents and expert opinion, a EULAR multidisciplinary task force formulated five overarching principles and 13 recommendations covering four generic themes: (1) General measures and prevention of SARS-CoV-2 infection. (2) The management of RMD when local measures of social distancing are in effect. (3) The management of COVID-19 in the context of RMD. (4) The prevention of infections other than SARS-CoV-2.

The five overarching principles are:

* To date, there is no evidence that patients with RMD face more risk of contracting SARS-CoV-2 than individuals without RMD, nor that they have a worse prognosis when they contract it.
* The diagnosis and treatment of COVID-19 in patients with RMD is the primary responsibility of an expert in treating COVID-19, such as a pulmonologist, an internist or a specialist in infectious diseases, dependent on local circumstances.
* Rheumatologists are the leading experts for the immunosuppressive treatments of their patients and should be involved in the decision to maintain or discontinue them.
* The knowledge about immunosuppressive treatments, including sDMARDs and bDMARDs, for the treatment of severe COVID-19 is rapidly evolving. In view of their expertise, rheumatologists should make themselves available for local-hospital, regional or national guideline committees for COVID-19. The use of immunosuppressive drugs for the treatment of COVID-19 should be a multidisciplinary decision.
* Availability and distribution of, and access to, sDMARDs and bDMARDs for the treatment of patients with RMD as well as for patients with COVID-19 (but without RMD) is a delicate societal responsibility. Therefore, the off-label use of DMARDs in COVID-19 outside the context of clinical trials should be discouraged.

COVID-19 is an unprecedented situation for all professional medical organisations. The recommendations give detailed, practical guidance for rheumatologists and their patients about how to follow preventive and control measures in their country, and how to best manage their RMD during this time. EULAR considers this set of recommendations as a ’living document’ and a starting point, which will be updated as soon as new developments with potential impact on patients with RMD become available.

**Source**

Landewé RB, Machado PM, Kroon F*, et al;* EULAR provisional recommendations for the management of rheumatic and musculoskeletal diseases in the context of SARS-CoV-2, *Annals of the Rheumatic Diseases*Published Online First: 05 June 2020. doi: 10.1136/annrheumdis-2020-217877

**About EULAR**

The European League against Rheumatism (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.

**EULAR Public Affairs**



==================================================================================8 June 2020

Dear Members of the EULAR Network,

EULAR released the press release, **The European League Against Rheumatism, EULAR, launches Virtual Research Centre**, to international media audiences today, Monday, 8 June.

This follows the presentation by EULAR President, Professor Iain B. McInnes, CBE, to international media audiences via press conference around the EULAR eCongress on Wednesday, 3 June, 2020.

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The european league against rheumatism, eular, launches Virtual Research Centre

Improving the lives of people with rheumatic and musculoskeletal diseases through research

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**Kilchberg/Switzerland: Chronic and often painful rheumatic and musculoskeletal diseases disable millions of people in the EU and worldwide [1]. The causes of more than 200 of these conditions are still unknown, and there are no cures. Research and innovation are crucial to improve the understanding of the causes and characteristics of this disease group so that we can develop better prevention strategies and treatments. With this new Virtual Research Centre, the European League Against Rheumatism (EULAR) aims to provide a virtual hub to help accelerate research into rheumatic and musculoskeletal diseases across Europe and worldwide by bringing together and mobilizing a multidisciplinary research community interested in pursuing research into rheumatic and musculoskeletal diseases.**

Much research is needed, including better ways to prevent these conditions, identify risk factors, and diagnose these diseases earlier. Such improvements will also help to alleviate the effects of other chronic diseases that often concur with rheumatic and musculoskeletal diseases, such as heart disease, diabetes, cancer, Alzheimer’s disease, and depression.

“There are many barriers that make research into rheumatic and musculoskeletal diseases across Europe difficult,” says EULAR President Professor Dr. Iain B. McInnes from Glasgow, Scotland, UK. “Reducing the burden of rheumatic and musculoskeletal diseases on individuals and societies requires comprehensive and coordinated actions at EU, national and regional level, as well as in different policy areas such as public health, health care and employment and social affairs. Under the EULAR Virtual Research Centre, we will develop initiatives that aim to bring researchers, institutions, and organizations together to start a more coordinated dialogue,” explains McInnes.

Other research challenges include the limited funding that minimises what researchers can accomplish. Scientific institutions that are willing to collaborate often depend on short-term project funding which narrows the research projects and questions scientists can take on.

To help address these barriers, the new EULAR Virtual Research Centre facilitates collaborative basic, clinical, and translational research to improve the lives of people with rheumatic and musculoskeletal diseases. The centre does this by providing a research roadmap that highlights unmet needs as well as research resources, infrastructure, services, and training to enable high-quality, interdisciplinary rheumatic and musculoskeletal disease research. Service examples include:

* The **EULAR Consultation Service** will provide expert advice to investigators with the goal of improving the quality of their research protocols. Researchers and health professionals can receive help with formulating research questions, methodology, and data analysis.
* The **EULAR Shared Technology Service** will help researchers to get access to the latest technology to perform innovative and high-quality research on rheumatic and musculoskeletal diseases. The idea is to improve the quality of research and remove access barriers to innovative technology-driven research methods and equipment that researchers in low-resource settings may face.
* The centre will also offer **team science support** efforts by bringing together scientists, clinicians, health professionals, patient advocacy organisations, and other community members to solve interdisciplinary, system-wide scientific and operational problems in rheumatic and musculoskeletal disease research that no one team can overcome alone.
* Through the **EULAR School,** the Virtual Research Centre will further provide training opportunities for a highly qualified, diverse rheumatic and musculoskeletal disease workforce from researchers, clinicians and other health professionals to patient researchers. Topics will include research methods, digital health, and data science with a focus on research into rheumatic and musculoskeletal diseases.

To advance its mission, the centre also develops broad coalitions and partnerships at the local, national, and international level to integrate existing resources, support research that addresses the needs of people with rheumatic and musculoskeletal diseases, and foster innovation in the field. “Europe already has a number of excellent research networks and virtual research initiatives focused on other diseases or health topics. We look forward to forging partnerships with societies or organisations to integrate research efforts where possible across Europe and to leverage existing resources,” says McInnes.

Visit the centre’s webpage at <www.eular.org>.

**Additional Resources**

* Factsheet on rheumatic and musculoskeletal diseases in Europe   
  EULAR RheumaMap

**References**

[1] van der Heijde D, Daikh DI, Betteridge N, et al. Common language description of the term rheumatic and musculoskeletal diseases (RMDs) for use in communication with the lay public, healthcare providers and other stakeholders endorsed by the European League Against Rheumatism (EULAR) and the American College of Rheumatology (ACR) Ann Rheum Dis 2018;77:829–832.

**EULAR Public Affairs**



8 June 2020

Dear EULAR Network,

Please see below the *latest weekly report*, and accompanying *infographic*, of the **EULAR COVID-19 Database**, a European paediatric and adult database – in collaboration with the Paediatric Rheumatology European Society (PReS) – monitoring and reporting on outcomes of COVID-19 occurring in patients with rheumatic and musculoskeletal diseases.

* [EULAR COVID-19 Database Infographic as of June 8](https://www.eular.org/myUploadData/files/eular_covid19_database_infographic_as_of_8_june.pdf)
* [EULAR COVID-19 Database Report as of June 8](https://www.eular.org/myUploadData/files/eular_covid_19_registry_report_as_of_8_june.pdf)

Additionally, please see below a **study on the first 600 cases reported to the EULAR Database and the Global Rheumatology Alliance Registry** that has recently been published in *Annals of the Rheumatic Diseases*.

[Characteristics associated with hospitalisation for COVID-19 in people with rheumatic disease: data from the COVID-19 Global Rheumatology Alliance physician-reported registry](https://ard.bmj.com/content/early/2020/05/29/annrheumdis-2020-217871)

As of this week, the database has now **over 2000 cases reported**, which is the result of an amazing collective effort, but more cases are still needed!

We encourage rheumatology clinicians from across Europe and other EULAR countries to report all cases of COVID-19 in their rheumatology patients, regardless of severity.

We hope you will actively contribute to this voluntary reporting system and we would like to thank all who have contributed already.

Read more about the database at [www.eular.org/eular\_covid19\_database.cfm](http://www.eular.org/eular_covid19_database.cfm)

Kind regards,

Diana

**Diana Rodrigues**  
Scientific Project Coordinator