

05/01/2021

Dear Minister Donnelly,

We are writing to you asking that you please consider the following concerns on behalf of our CLL Blood Cancer Community. All blood cancer patients are immunocompromised to some greater or lesser extent, making them vulnerable to poor outcomes with COVID-19.

Chronic Lymphocytic Leukaemia is a cancer of the immune system and our Community has many issues compounded by the COVID pandemic.

CLL patient's antibody responses to COVID-19 vaccines and even boosters have been repeatedly proven to be less predictable and robust when compared to the general population and to other immunocompromised communities.

Blood Cancer patients in general have:

1. Much greater risk from COVID-19 including higher rates of hospitalisation, ICU admissions and deaths.
2. Higher rates of breakthrough infections after being fully vaccinated.
3. Higher rates of their infection spreading to household contacts.
4. No simple lab test to reliably predict protection post vaccination.
5. Shown in some cases to carry and shed severe acute respiratory syndrome coronavirus 2 (or SARS-CoV-2) for months leading to the risk of introducing potentially dangerous new mutations into the greater population.

Chronic Lymphocytic Leukaemia (CLL) and other Blood Cancers have long been recognised as being significantly immunocompromised at all stages of disease, regardless of their treatment status.

Quoting from a recent study of COVID-19 vaccine response in blood cancer patients: "More than one-third (36%) of patients with CLL, the most common adult leukaemia, were seronegative after vaccination. Nearly three in ten of them had no cancer therapy in the past two years, showing that disease itself may impair the B cell function needed to make antibodies to vaccines."

Currently in Ireland, there are no antivirals available to our Community. Medical advice for CLL patients currently, is that they should get vaccinated, but they should behave as though they have not been vaccinated.

This has created much anxiety and distress amongst our community. Many have been cocooning/shielding since the beginning of the pandemic.

The most pertinent issues that must be addressed immediately are as follows:

1. The fourth vaccination (booster). When will this be available to our community and how do they access this?
2. Medically high-risk families need access to a remote education plan for their children to protect their families.
3. The 12 to 15 age cohort have yet to be boosted. We ask that those in this cohort who live with Blood Cancer patients be prioritised for the booster.
4. The UK has issued guidelines and a plan for their blood cancer patients. Patients in the UK have received letters outlining how they can register for this treatment on getting a positive PCR. These medicines aim to stop Covid becoming severe and to prevent hospitalisation or serious illness in those most at risk. Can a similar system be implemented for Blood Cancer patients in Ireland.
5. CLL patients are extremely concerned about continuity of healthcare. Some who are in active treatment have experienced delays and cancellations due to the pandemic. They also have no frontline access to novel therapies to treat their disease. One of these treatments is Venetoclax in combination with Obinutuzumab. The NCPE recommends that Venetoclax in combination with Obinutuzumab be considered for reimbursement, but the final decision is with the CPU within the HSE. <https://www.ncpe.ie/wp-content/uploads/2020/10/Web-summary-Venetoclax-20046.pdf> This needs to be made available immediately as chemo-immunotherapy remains the only front-line option.
6. There is an urgent need for rapid access to PCR tests for CLL patients as treatment with antivirals is time sensitive.

We would be very grateful if the above could be considered urgently. The rising positivity rate in addition to increasing community transmission has led to many of our Community resorting to isolation as their only protection against Covid19. We need a better plan. We implore this government to work with us to find a way forward for our community.

Yours Sincerely

Michael Rynne

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