Preventing COVID-19 and Other Respiratory Infections in Those with CLL / SLL During Peak Winter Months

December 5, 2023

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Speakers

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Co-Founder, Executive Vice President, and Chief Medical Officer
CLL Society

Speaker
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Johns Hopkins University

Speaker
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Director of Scientific Affairs and Research
CLL Society
Preventing COVID-19 and Other Respiratory Infections in Those with CLL/SLL During Peak Winter Months

M. Veronica Dioverti, MD
Oncology Infectious Diseases
Johns Hopkins University

12/5/2023
Learning Objectives:

1. Reinforce the need for continued infection control precautions, early testing and treatment for COVID-19
2. Review the latest recommendations on vaccinations for COVID-19 and other respiratory infections, and their limitations in those who are immunocompromised
3. Review relevant clinical trials related to COVID-19 for immunocompromised individuals and new treatments down the pipeline
COVID-19 virus (SARS-CoV-2) is constantly changing and new variants emerge:
- Old variants may disappear or persist
- Symptoms are the same:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea
COVID-19: Immunocompromised

- Among unvaccinated patients, those immunocompromised had higher odds of ICU admission (X1.26) and in-hospital death (X1.34) than did non-immunocompromised.

- Among vaccinated patients, those immunocompromised had higher odds of ICU admission (X1.40) and in-hospital death (X1.87) than did non-immunocompromised.

- Among immunocompromised patients, odds of death between vaccinated and unvaccinated patients did not differ:
  - Need additional protection from COVID-19
    - Monoclonal antibodies for prevention
    - Up-to-date vaccination of immunocompromised persons and their close contacts
    - Early testing
    - Early treatment

- All CLL patients are immunocompromised regardless of their treatment status, even those who have never been treated.
COVID-19: Prevention + Early Treatment!

Order free home testing kits through CDC website: https://www.covid.gov/tests
Need help placing an order for your at-home tests? Call 1-800-232-0233 (TTY 1-888-720-7489)
COVID-19 Vaccination

• Vaccines: Original (withdrawn 4/2023) / Bivalent (withdrawn 9/2023) / Updated

- Everyone aged 6 months and older who is moderately or severely immunocompromised needs at least 1 dose of a **2023-2024 updated COVID-19 vaccine**. Depending on the number of doses you've previously received, you may need more than 1 dose of updated vaccine:
  - **If you have not gotten any COVID-19 vaccines (not vaccinated)**, you should get 2-3 doses of updated COVID-19 vaccine.
  - **If you got 1 previous Pfizer-BioNTech or Moderna COVID-19 vaccine** you should get 1-2 doses of updated COVID-19 vaccine.
  - **If you got 2 or more previous COVID-19 vaccines**, you should get 1 updated COVID-19 vaccine.

- Talk to your healthcare provider about getting additional doses of updated COVID-19 vaccine.
COVID-19: No Previous Vaccine

1st Dose
Pfizer-BioNTech
UPDATED VACCINE

2nd Dose
Pfizer-BioNTech
3 weeks after 1st dose

3rd Dose
Pfizer-BioNTech
At least 8 weeks after 2nd dose
for children aged 6 months to 4 years. At least 4 weeks for people of all other ages.

1st Dose
Moderna
UPDATED VACCINE

2nd Dose
Moderna
4 weeks after 1st dose

3rd Dose
Moderna
At least 4 weeks after 2nd dose

1st Dose
Novavax
UPDATED VACCINE

2nd Dose
Novavax
3 weeks after 1st dose
COVID-19: Previous Vaccine

One previous vaccine

- **2nd Dose**
  - Pfizer-BioNTech
  - UPDATED VACCINE
  - 3 weeks after last dose

Two previous vaccines

- **3rd Dose**
  - Pfizer-BioNTech
  - UPDATED VACCINE
  - At least 4 weeks after last dose

Three or more previous vaccines

- **1 Dose**
  - Pfizer-BioNTech
  - Moderna or Novavax
  - UPDATED VACCINE
  - At least 8 weeks after last dose
COVID-19: Previous Vaccine

One previous vaccine

<table>
<thead>
<tr>
<th>2nd Dose</th>
<th>Moderna</th>
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<tbody>
<tr>
<td>UPDATED VACCINE</td>
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<tr>
<td>4 weeks after last dose</td>
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</table>

<table>
<thead>
<tr>
<th>3rd Dose</th>
<th>Moderna</th>
</tr>
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<tbody>
<tr>
<td>UPDATED VACCINE</td>
<td></td>
</tr>
<tr>
<td>At least 4 weeks after last dose</td>
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</table>

Two previous vaccines

<table>
<thead>
<tr>
<th>3rd Dose</th>
<th>Moderna</th>
</tr>
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<tbody>
<tr>
<td>UPDATED VACCINE</td>
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<td>At least 4 weeks after last dose</td>
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Three or more previous vaccines

<table>
<thead>
<tr>
<th>1 Dose</th>
<th>Pfizer-BioNTech</th>
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<tbody>
<tr>
<td>Moderna or Novavax</td>
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</tr>
<tr>
<td>UPDATED VACCINE</td>
<td></td>
</tr>
<tr>
<td>At least 8 weeks after last dose</td>
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</tbody>
</table>
COVID-19: Previous Vaccine

Novavax

People Aged 12 Years and Older

One or More Previous Doses

<table>
<thead>
<tr>
<th>1 Dose</th>
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<tbody>
<tr>
<td>Pfizer-BioNTech</td>
</tr>
<tr>
<td>Moderna</td>
</tr>
<tr>
<td>or Novavax</td>
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</table>

UPDATED VACCINE
At least 8 weeks after last dose
COVID-19: Treatment

• Antivirals:
  • Remdesivir: approved in 10/2020
    • Intravenous only
  • Paxlovid (nirmatrelvir/ritonavir): approved in 5/2023
    • Oral only
    • Significant interactions with other medications!
  • Molnupiravir:
    • Oral only
    • Lower efficacy, last option

• “Passive immunotherapy”:
  • Convalescent plasma
  • Intravenous immunoglobulin (or “IVIg”)
COVID-19: Other

• Immunocompromised patients have prolonged intermittent symptoms: “Protracted COVID-19” – please reach out to a provider as you may need further testing and treatment

• Clinical trials:
  • Monoclonal Antibodies for prevention:
    • AstraZeneca, Invivyd and Regeneron

• May not be recruiting. Check cllsociety.org
Other Viruses: Influenza

**Influenza**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Approved Ages</th>
<th>Dose volume</th>
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</thead>
<tbody>
<tr>
<td>Flublok Quadrivalent</td>
<td>≥18 years</td>
<td>0.5 mL</td>
</tr>
<tr>
<td>Fluzone High-Dose Quadrivalent</td>
<td>≥65 years</td>
<td>0.7 mL</td>
</tr>
<tr>
<td>Fluad Quadrivalent</td>
<td>≥65 years</td>
<td>0.5 mL</td>
</tr>
</tbody>
</table>

- Testing: with any new respiratory symptoms
- Treatment: oseltamivir (Tamiflu, as soon as possible!)
Other Viruses: RSV

Respiratory Syncytial Virus (RSV)

- Two vaccines available:
  - RSVPreF3 (Arexvy, GSK)
  - RSVpreF (Abrysvo, Pfizer)
- Single dose for adults aged 60 years and older
- Testing: along with COVID-19 and Influenza
- Treatment: oral ribavirin
Respiratory Viruses

• If any respiratory symptoms:
  • **Test immediately!**
    • Start with COVID-19 home Ag test
    • If negative, rapid COVID-19/Flu/RSV at urgent care or at your provider’s office
  • **Immediate treatment!**
    • COVID-19: Paxlovid, remdesivir, monupiravir
    • Influenza: Tamiflu
    • RSV: ribavirin
# Pneumococcal Vaccine

<table>
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<tr>
<th>Conjugate vaccine history</th>
<th>No prior PCV or PCV7</th>
<th>Received PCV10 or PCV13</th>
<th>Received PCV15</th>
<th>PCV20</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPSV23 vaccine history</td>
<td>No PPSV23</td>
<td>Received PPSV23</td>
<td>No PPSV23</td>
<td>Received PPSV23</td>
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<tr>
<td></td>
<td>Give PCV20&lt;sup&gt;†&lt;/sup&gt;</td>
<td>Give PCV20&lt;sup&gt;†&lt;/sup&gt; ≥1 year after PPSV23 dose&lt;sup&gt;§&lt;/sup&gt;</td>
<td>Give PCV20&lt;sup&gt;**&lt;/sup&gt; ≥1 year after PCV10/13 dose</td>
<td>Give PCV20&lt;sup&gt;**&lt;/sup&gt; ≥5 years after last pneumococcal vaccine dose&lt;sup&gt;§&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td>Our authors also prefer to give PPSV23 ≥8 weeks following PCV20 to provide immunity against more serotypes&lt;sup&gt;§&lt;/sup&gt;</td>
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</tbody>
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All immunocompromised patients should receive pneumococcal (or “pneumonia”) vaccine
Thank you!
CLL Society’s COVID-19 Action Plan

Robyn Brumble, RN, MSN
Director of Scientific Affairs
CLL Society
Complete Prior to COVID-19 Exposure
Known Exposure, Positive Result, and How to Quarantine

CHECKLIST FOR KNOWN EXPOSURE TO COVID-19 WITHOUT A POSITIVE TEST RESULT

- Closely monitor for symptoms of COVID-19. Symptoms can appear anywhere from 2-14 days after exposure and may or may not include headache, fever or chills, cough, shortness of breath or difficulty breathing, increased fatigue, worsening muscle or body aches, headache, loss of taste or smell, sore throat, congestion, runny nose, nausea, vomiting, and diarrhea.
- Contact your healthcare provider(s) right away to arrange for possible urgent treatment with the anti-COVID-19 monoclonal antibodies, regardless of whether or not you have had a positive test or symptoms.
- Immediately schedule appointments for testing 3-5 days following the date of known exposure. Availability for testing can be limited during times of surging cases.

TESTING RECOMMENDATIONS FOR COVID-19

- The CDC recommends testing 3-5 days following the date of the known exposure, even without symptoms. But if you begin to have symptoms, arrange to get tested right away. If possible, have both the rapid and PCR tests performed. If both are not available, the PCR test is much preferred due to increased accuracy. Know that if you test negative, you were not infected at the time your sample was collected. The test result only means that you did not have COVID-19 at the time of testing. Continue to take steps to protect yourself and others by wearing a mask and distancing.
- If symptoms develop, or you have a negative test, you should immediately get retested.
- If you test positive, refer to the COVID-19 Action Plan for the next steps.

QUARANTINE RECOMMENDATIONS FOR CLL

- If you received a negative PCR test result AND no symptoms have been detected during daily monitoring, quarantine can end after Day 10.
- For those that did not get tested and never experienced any symptoms of COVID-19, quarantine must last for the full 14 days following exposure.

HOUSEHOLD QUARANTINE PLAN

Why is it Important To Have a Quarantine Plan in Place Before You Become Infected with COVID-19?

Receiving a COVID-19 diagnosis can be stressful and confusing, especially if you are not prepared. Having a self-quarantine plan will help everyone in the household know exactly what to do should the virus infect someone within the home. In addition to this checklist, learn as much as you can in advance about standard infection control precautions that may help decrease the possibility of spread. Place this document within your COVID-19 planning folder to refer to if needed.

- Have plenty of masks available. Everyone in the household should plan on wearing a tightly-fitting mask (preferably an N95) over their nose and mouth as much as possible, especially when in direct contact with anyone else in the home.
- Keep your distance from others. Stay in a designated room by yourself and use a bathroom separate from the one used by others in the household. Keep your bedroom and bathroom door closed when possible. Have someone else prepare meals and leave them outside your bedroom door.
- Do not leave your home (unless necessary for medical care). Identify family, friends, or community groups to help deliver groceries, medications, and other supplies to your front door. Have their contact information readily available as part of your quarantine plan.
- If living with others, increase ventilation within your home. Open windows and outside doors when the weather permits, operate all ceiling fan or run a window air conditioner with the vent control open to increase the indoor/outdoor airflow.
- Have necessary supplies on hand. Consider creating a list that includes items such as thermometers for each person in the home, electrolytes, lasers, over-the-counter medications, cleaning supplies, hand sanitizer, disposable gloves, Kleenex, etc. Speak with your healthcare provider about what vitamins or over-the-counter medications might be helpful to have readily available as well.
- Wash down high-touch areas every day with a disinfectant. This includes doorknobs, light switches, phones, remote controls, appliances, sink, toilet, countertops, etc. Let someone else disinfect high-touch surfaces in the common areas of the home. But you should also clean and disinfect your designated sick room and bathrooms if possible.
- Do not share any items with others in your home. This includes clothes, drinking glasses, eating utensils, towels, or bedding. It is important to wash all items used by the infected person thoroughly with soap and water after using them.
What Do I Do If I Do Get COVID-19?

COVID-19 ACTION PLAN
Do These Things After Testing Positive for COVID-19

ACTIVATE YOUR PLAN! ACT EARLY-EVEN IF YOU FEEL FINE. REMEMBER, TIME IS OF THE ESSENCE.

☐ Access your COVID-19 Planning Folder.
☐ Read through your COVID-19 Planning Checklist and instructions again.
☐ Contact your healthcare provider(s) immediately to discuss arranging urgent treatment with the anti-COVID-19 monoclonal antibodies and any other possible early therapies as soon as possible.
☐ Activate your Household Quarantine Plan.

IMPORTANT PEOPLE TO CONTACT

☐ Contact anyone you have been around in the previous 48 hours and inform them of your positive test result. By notifying close contacts of possible exposure, you may be helping them prevent the spread of COVID-19 to their friends and family.
☐ Someone from the health department may call you. This is completely normal, and it is important to answer the call to assist with contact tracing, which may also help slow the spread.
☐ Call your healthcare provider(s) to notify them of your positive test result.
☐ Stay in touch with them periodically to ask questions and/or inform them of your status. And do not hesitate to call your healthcare provider(s) to report any symptoms that are severe or concerning to you.

SCHEDULED APPOINTMENTS

☐ If you have an in-person medical appointment that cannot be avoided, call the office ahead of time to remind them you have been diagnosed with COVID-19. This will help the office put measures in place to protect the staff and other patients when you arrive.

KEEP A LOG OF YOUR VITAL SIGNS AND SYMPTOMS

☐ Begin recording a list of all measured vital signs, especially oxygen saturation levels and temperatures.
☐ Keep track of when you experience any new symptoms such as cough, chills, shortness of breath, fatigue, muscle/body aches, vomiting, diarrhea, or loss of taste/smell.
☐ Include the time and date when you are logging them.
☐ Call your healthcare provider(s) to inform them if your oxygen saturation is consistently reading below 95%, fever >100.4, or with worsening symptoms.

SEEKING EMERGENCY CARE

☐ Call 911 immediately if emergency warning signs for COVID-19 develop such as difficulty breathing, rapid breathing, oxygen saturation consistently reading <92%, persistent pain or pressure in the chest, difficulty staying awake, confusion, or discolored lips/nail beds.
☐ Should you need to seek emergency care via ambulance, you must request to be taken to the hospital that you have already determined ahead of time can provide you with rapid access to critical COVID-19 therapies. If they are not informed, they are required to transfer you to the nearest local hospital.
☐ Take your COVID-19 Planning Folder along with you to the hospital so you have quick access to the important documents (the "Official Statement for Prioritizing CLL Patient’s Emergency Room Care").
☐ Most importantly, ADVOCATE for your best care! Remember, EARLY administration of critical COVID-19 therapies, such as convalescent plasma and SARS-CoV-2 monoclonal antibodies, is extremely important for those who are immunocompromised (as recommended by Emergency Use Authorization and other clinical guidelines). Data shows both reduced morbidity and mortality in CLL patients with both of these treatments.

AFTER YOUR DISEASE HAS RUN ITS COURSE

☐ Please consult with your healthcare provider(s) to find out when you can safely be around others. If you have any symptoms, it is important to get tested again. Routine testing after COVID-19 is not advised in the general population. However, your healthcare provider may recommend repeated testing, as some CLL patients have difficulty clearing the virus that causes COVID-19 and may remain contagious after symptoms resolve.
Where to Find the COVID-19 Action Plan On CLL Society’s Website
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On CLL Society’s Website
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On CLL Society’s Website

Checklists for Chronic Lymphocytic Leukemia (CLL)
Preparing for Pre- and Post-COVID-19 Exposure

Downloading and completing the CLL Society's COVID-19 Action Plan could save your life.

Complete and print this action plan, which will help you prepare in advance for possible exposure, testing positive, time sensitive therapies, and home management, including what you need for safe isolation, and much more. Preparing in advance can minimize the panic that many experience when exposed or diagnosed because you will have a written plan to guide you. If you do only one thing to protect yourself and your loved ones during the pandemic, please complete your family’s COVID-19 Action Plan. The life you save might be your own.
Important Takeaways

• Complete the checklists ahead of time-BE PREPARED!

• Keep them in an easily accessible place, such as a folder

• Discuss your plan with others within the household

• If you have known exposure, symptoms, or a positive test result-pull out the plan and act fast! Time is of the essence.
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Thank You for Attending!

Please take a moment to complete our post-event survey, your feedback is important to us.

If you’re question was not answered, please feel free to email asktheexpert@cllsociety.org.

Join us for our next webinar “ASH 2023 Comes To You!” early next year.

CLL Society is invested in your long life. Please invest in the long life of the CLL Society by supporting our work.

cllsociety.org/donate-to-cll-society/