

NHS England and NHS Improvement
Skipton House
80 London Road
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To:

- Regional medical directors
- Regional chief pharmacists
- Provider trust medical directors
- Hospital chief pharmacists

13 November 2020

Action by:

- All clinical staff managing patients with COVID-19

Dear Colleagues,

COVID-19 therapy: corticosteroids including dexamethasone and hydrocortisone

In accordance with World Health Organization (WHO) recommendations, systemic corticosteroids should be used in patients with severe and critical COVID-19 disease, but not in patients with non-severe COVID-19.

In England the WHO guidance is likely to apply primarily to patients with COVID-19 who are hospitalised and receiving supplemental oxygen. However, there may be occasions when UK patients with COVID-19 meet the WHO criteria of severe or critical, but are not hospitalised; in which case the WHO guidance for treatment would apply.

Dexamethasone is indicated for the treatment of COVID-19 infection for:

- Hospitalised patients
- COVID-19 (suspected or confirmed) in patients having oxygen therapy (see [guide to oxygen therapy link](#)), non-invasive or invasive ventilation, or ECMO
- Adults – the use in children is still being studied (the RECOVERY trial included children), currently the evidence of benefit in children is unproven
- In pregnant or breastfeeding women, prednisolone 40 mg administered by mouth (or intravenous hydrocortisone 80 mg twice daily) should be used instead of dexamethasone.

Medical staff should follow this guidance in the management of COVID-19. Hospital clinical pharmacists should ensure prescribing guidance is followed.

See also [CAS Alert 3 September 2020](#) and [NICE Prescribing Briefing](#).

Kind regards,



Dr Keith Ridge CBE

Chief Pharmaceutical Officer

NHS England and NHS Improvement



Professor Stephen Powis

National Medical Director

NHS England and NHS Improvement