**An approach to systemic therapeutics in the era of COVID:**

The decision to start, withhold or change systemic immunosuppression during the current pandemic is challenging for both providers and patients. We believe the approach to this decision process is not a simple prescriptive one but instead a shared decision making process around at least the following four points:

1. The severity of the **underlying condition** which is being treated including:
	1. consideration of past flare with medication changes
	2. severity peaks / typical frequency of flares
	3. potential need for emergency care / hospital exposure if the underlying disease flares off of medication
	4. the potential immunosuppressive effect or infection risk of the condition itself when flaring (eg skin barrier breakdown)
2. The **relative level of immunosuppression** attributed to a given therapy or combination of therapies
	1. While this information is hard to quantify, it should be conveyed in the course of shared decision making with patients the physician’s understanding of the risk relative to a viral infection such as COVID that a given agent might pose based on any available evidence
3. Consideration of the need for **monitoring** labs; exposure to healthcare settings in the course of that monitoring and/or **administration of drug** (ie infusions)
4. The **contextual factors** that would impact a given patient’s risk
	1. Career / job exposures, caregiver roles, at-risk individuals in the home or work environment