



The Rt. Hon. Robert Jenrick MP
Secretary of State for Health and Social Care
Department of Health and Social Care
39 Victoria Street
London SW1H 0EU

12 October 2022

Dear Mr Jenrick,

I am writing to you in my capacity as Policy Director for Kidney Care UK to highlight the deep concern and mounting frustration held within the kidney patient community across the country following the decision by the previous Secretary of State for Health and Social Care not to procure the prophylactic COVID-19 treatment, Evusheld.

On Wednesday 12 October I attended the Westminster Hall debate, secured by Daisy Cooper MP, to reiterate our campaign for the Government to advance the procurement of Evusheld ahead of winter 2022. I was lucky enough to discuss the matter with you briefly following the debate and am following up now to set our case.

As you know, approximately 500,000 immunosuppressed people in the UK remain at much higher risk from COVID-19 – this includes around 40,000 immunosuppressed people with kidney transplants and 12,000 who are treated with immunosuppressive drugs for their kidney conditions. People with late-stage chronic kidney disease in particular, are far more likely to be hospitalised or die following COVID-19 infection than other groups, despite being fully vaccinated.

Minister, many of these people feel they have no option but to continue to shield and some are even struggling to access medical care because of their ongoing vulnerability. The psychological distress for this group and their families is enormous.

We share the extreme disappointment of the kidney patient community that, despite a wealth of evidence on safety and effectiveness, the Government is choosing not to act with the same swift and decisive action regarding Evusheld which was taken with other COVID-19 treatments which were procured and made available on the NHS via the RAPID C-19 route before being fully appraised.

Government guidance still highlights behavioural measures which people who are severely immunosuppressed can follow to reduce their risk from Covid and the RAPID-C19 group is clear that there is a significant unmet need in a vulnerable population. As further protection is available and the Government has chosen not to procure it, patients for whom it is particularly important that they avoid infection, feel stuck.

To allow us to move forward we would be very grateful for 3 things:

- Make it available now. In the light of rising COVID-19 infection rates and the risks to thousands of immunosuppressed individuals, please reconsider the decision to delay the procurement of Evusheld and make the treatment available to those with reduced protection from vaccination this winter.

- Give an explanation as to why a wealth of evidence that Evusheld is effective has been ignored while it has already persuaded 33 other countries to make the treatment available for immunocompromised people. We are concerned that it is being held to an impossible standard of evolving evidence and the UK is the only G7 country which is not giving it.
- Be consistent. Other Covid treatments, such as the anti-viral drugs given if infected have been bought rapidly after approval and made available. Patients would far rather have protection than infection.

Finally Minister, I would like to share with you a quote from a person who has received a kidney transplant which really brings home their sense of frustration around this issue:

'I would be able to feel safer. I would be able to live my life like everyone else. It isn't a 100%, no, but it's something – a chance. I'm exhausted. I'm not sure how much longer I can bear shielding – the effect on my life and my family's is appalling'

We very much appreciate the decision not to procure Evusheld was taken by the previous Health Secretary, but we strongly urge you to reconsider this decision and roll out the treatment in the next few weeks for our desperate patient group. To that end we would welcome the opportunity to meet with you to relay those concerns and better understand the steps you plan to take to address this issue. If this was possible we have 2 expert medical colleagues who would be available to join the discussion and explain why the prophylactic approach is appropriate for immunocompromised people this winter.

Yours sincerely

Fiona Loud

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