



Post Acute Sequelae of SARS-CoV-2 Infection (PASC)

Formally Long COVID

Wednesday, 21 April 2021

Dr Murray Dryden, Ms Caroline Mudara

Ms Caroline Vika, Dr Waasila Jassat, Prof Lucille Blumberg

Terminology

- **Acute COVID-19**
 - Signs and symptoms of COVID-19 for up to 4 weeks from symptom onset
- **Ongoing symptomatic COVID-19**
 - Signs and symptoms of COVID-19 from 4 weeks up to 12 weeks.
- **Post-COVID-19 syndrome**
 - Signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis.
 - It usually presents with clusters of symptoms, often overlapping, which can fluctuate and change over time and can affect any system in the body.
- **Long COVID**
 - In addition to the clinical case definitions, the term ‘Long COVID’ is commonly used to describe signs and symptoms that continue or develop after acute COVID-19
 - It includes both ongoing symptomatic COVID-19 (from 4 to 12 weeks) and post COVID-19 syndrome (12 weeks or more).
- **Post-Acute Sequelae of SARS-CoV-2 infection (PASC)**
 - Persistence of signs and symptoms associated COVID-19 beyond 4 weeks of acute illness not better explained by another disease process.

(National Institute for Health and Care Excellence (NICE), UK)



Background

- “Long Haulers” – First Articles as early as February 2020
 - Stories of patients reporting persistence of symptoms months after their initial diagnosis shared on Blogs, Facebook Groups and other social media platforms
 - Concerned whether these were as a result of ongoing infection
 - Whether they could infect other people
- Initial Medical Response was poor – Focused on those who were acutely ill

COVID-19 SUPPORT GROUP



When members of our team fell ill in March, we relied on each other for emotional support. In creating the COVID-19 support group, we wanted to provide others with that same opportunity to feel connected and supported through infection, symptoms, and

Subscribe

Latest Issues

SCIENTIFIC
AMERICAN.

Get Sign In Newsletters

CORONAVIRUS THE SCIENCES MIND HEALTH TECH SUSTAINABILITY VIDEO PODCASTS OPINION PUBLICATIONS

Read Our Latest Issue

Read Now

PUBLIC HEALTH | OPINION

The Problem of 'Long Haul' COVID

More and more patients are dealing with major symptoms that linger for months

By Carolyn Barber on December 29, 2020



READ THIS NEXT

POLICY & ETHICS
Scandal over COVID Vaccine Trial at Peruvian Universities Prompts Outrage

32 hours ago — Luke Taylor and Nature magazine

POLICY & ETHICS
George Floyd's Autopsy and the Structural Gaslighting of America

33 hours ago — Ann Cravens Roberts, Sonja Shadravan, Jennifer Tsai, Nicolas E. Baroni, Ake-Gun, Michael Mensch



About Impact Resources Stories Media Contact Join Us

1000s of people with #LongCovid need:

Rehab - Research - Recognition

JOIN OUR SUPPORT GROUP

About

Impact

Resources

facebook



I'm a COVID-19 long-hauler and an epidemiologist - here's how it feels when symptoms last for months

August 11, 2020 2:10pm GMT

Long Covid Support Group

Private group · 37.9K members

About Discussion

About this group

This is a private group for people with Long haul Covid, post-Covid (syndrome) or someone ... See more





Waking up to PASC

- Current Literature on PubMed:
 - Long Haulers: 22 results
 - Long COVID: 133 results
 - Post Acute COVID: 1 214 results
 - COVID-19/complications: 3,326 results
 - COVID-19: 113 657 results



Causes of PASC

- May be as result of the inflammation and injury that occurs during the acute infectious period
- Injuries can occur in a variety of organ systems including the brain, heart and of course the lungs
 - Ultimately the injury may be widespread throughout all organ systems in the body
- No ongoing SARS-COV-2 infection – Non-Communicable per se

Presentation of PASC

- **Most Common Symptoms**

- Severe fatigue
- Shortness of breath/breathlessness
- Persistent cough
- Chest pain or heaviness
- Joint pain or swelling

The syndrome is often accompanied by anxiety and depression, associated with the protracted and unpredictable course of the symptoms.

- **Other Symptoms**

- Cognitive impairment – “brain fog”
- Muscle pain
- Headache
- Intermittent fever
- Palpitations
- Anosmia and/or ageusia
- Reduced exercise capacity
- Vertigo and tinnitus
- Peripheral neuropathy
- Metallic or bitter taste
- Skin rash

Prevalence of Persistent Symptoms

- Amongst 9 studies, the prevalence of ≥ 1 persistent symptoms ranges from 29-93% (Follow up ranged from 1-7 months)

Most Commonly reported Symptoms amongst 14 Studies with $\pm 9\ 000$ patients

Symptoms	Range	Studies	Symptoms	Range	Studies
<i>Fatigue</i>	9-84%	13	<i>Sleeping Disorder</i>	8-44%	6
<i>Cognitive Impairment/Brain Fog</i>	2-82%	3	<i>Palpitations</i>	9-40%	3
<i>Anosmia</i>	9-74%	9	<i>Menstrual Disturbances</i>	36%	1
<i>Dyspnoea</i>	11-66%	14	<i>Sexual Dysfunction: Male</i>	15-33%	2
<i>Headache</i>	2-64%	8	<i>Fever</i>	0-31%	5
<i>Ageusia</i>	10-64%	3	<i>Chest Pain</i>	5-28%	8
<i>Muscle Pain</i>	2-60%	5	<i>Joint Pain</i>	7-27%	5
<i>Sore Throat</i>	10-60%	2	<i>Cough</i>	2-21%	8
<i>Anxiety</i>	15-58%	4	<i>Diarrhoea</i>	1-21%	6
<i>Memory Impairment</i>	51%	1	<i>Sexual Dysfunction: Non-Binary</i>	16%	1
<i>Depression</i>	47%	1	<i>Lack of Appetite</i>	10-14%	2
<i>PTSD</i>	24-47%	2	<i>Sexual Dysfunction: Female</i>	8%	1

Diagnosis of PASC

- No laboratory test verified
 - Antibody testing is not reliable or translatable
- Diagnosis is primarily clinical and based on exclusion
 - Confirmed acute COVID with persistent symptoms >4 weeks
 - COVID-like illness without confirmation but persistence of symptoms >4 weeks



Risk Factors for PASC

- 10% of patients who suffered from COVID-19 may be at risk
- Severity of acute COVID-19 infection not shown to be a factor associated with the development of PASC
- Early data on at-risk groups:
 - Pre-existing depression is associated with severe post-COVID fatigue
 - Male sex (twice as common than in woman)
 - Data is conflicting (Need to consider health seeking behavior between sexes)
 - High BMI

Impact of Activities of Daily Living and Occupation

- Haeverall, et al., 2021
 - 8% reported long-term symptoms moderately to markedly disrupted their work life
 - 15% reported long-term symptoms moderately to markedly disrupted their social life
 - 12% reported long-term symptoms moderately to markedly disrupted their home life
- Garrigues, et al., 2020
 - 56 (47%) were active workers; amongst them, 38 (69%) had gone back to work.
 - 39 patients who had performed regular sports activity before their hospitalization for COVID-19, 28 (72%) have been able to resume physical activity, but at a lower level for 18 (46%).
 - Reduced proportion of patients returning to work amongst ICU patients (47% versus 78%, $P = 0.061$).
- Carvalho-Schneider et al. 2021
 - 20% of patients were on sick leave at the 1 month follow up
 - 11% of patients were on sick leave at the 2 month follow up



NICD (DATCOV) LONG COVID/PASC STUDY

Study Overview

- Study Design:
 - *Quantitative Longitudinal Cohort*
 - *ISARIC - International collaboration with 10 countries*
- Purpose:
 - *Establish the presence of long-term complications in COVID-19 survivors and guide their rehabilitation.*
- Objectives:
 - *Characterize physical and psychosocial consequences in patients post-COVID-19 infection.*
 - *Estimating the risk of and risk factors for post-COVID-19 medical sequelae, psychosocial consequences and post COVID-19 mortality.*
- Ethics:
 - *Wits HREC Approval Number M201150*
- Funding:
 - *Bill and Melinda Gates Foundation*
- Sampling:
 - *Currently only patients discharged post-hospitalisation are included*
- Methodology:
 - Utilize DATCOV Hospital Surveillance database to extract potential participants based on Outcome Dates
 - Research Assistants and Surveillance Officers trained to conduct 15-20 min telephonic interview
 - 1, 3, 6 and 12 month follow up
 - ~120 questions CRF
 - Presenting Symptoms
 - On going symptoms
 - Quality of Life Validated tools
 - Changes in employment status/activities of daily living

Participants enrolled

Total Calls	4 462	100%
Total Unreachable	3 083	69%
Total Refusals	315	7%
Total Surveys Completed	1 061	24%

*Unreachable are predominately due to incorrect contact numbers extracted from the DATCOV Database and the Master Linelist.

Time from discharge to survey date:

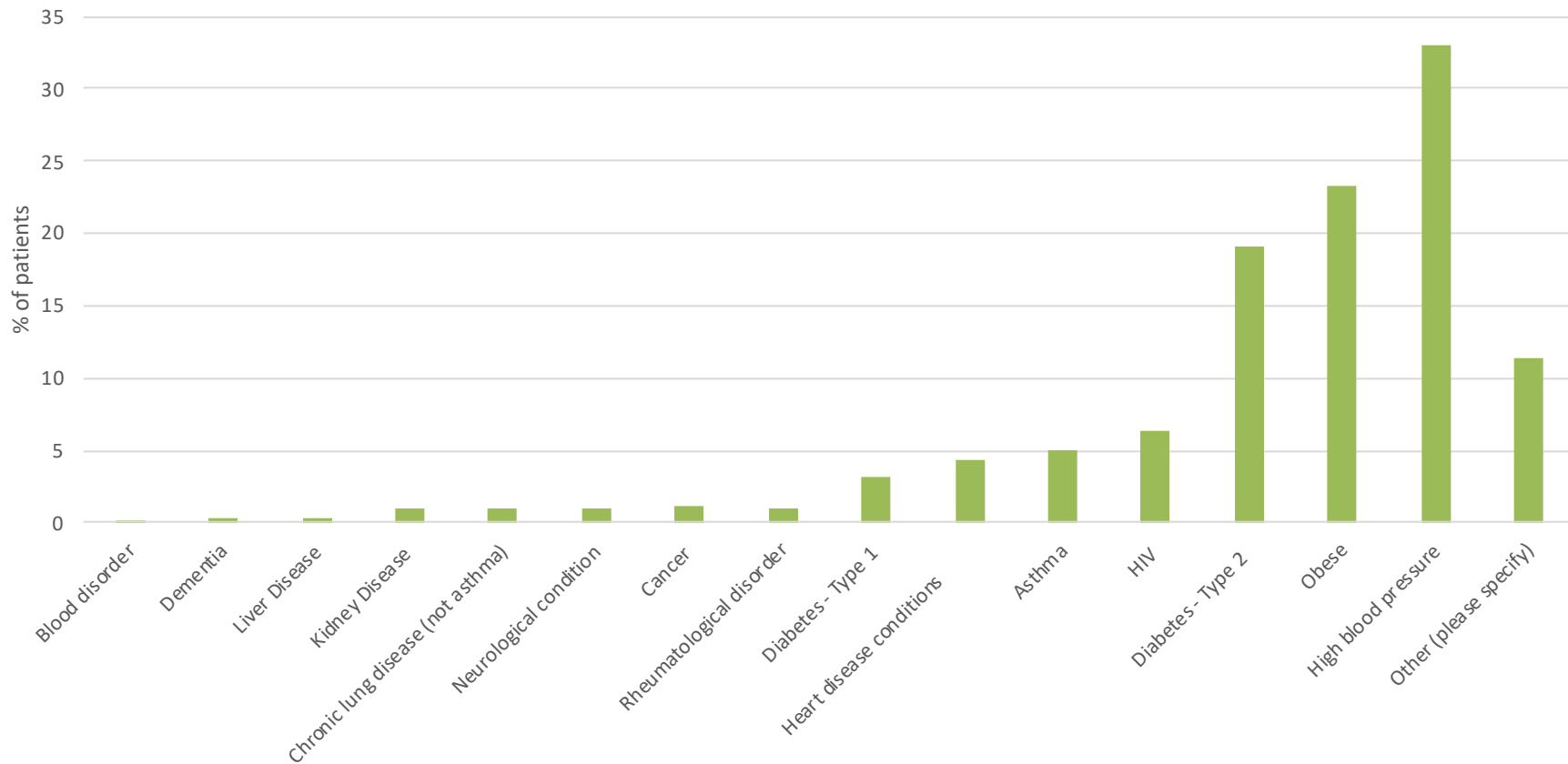
Median: 28 days

IQR [28 - 29]

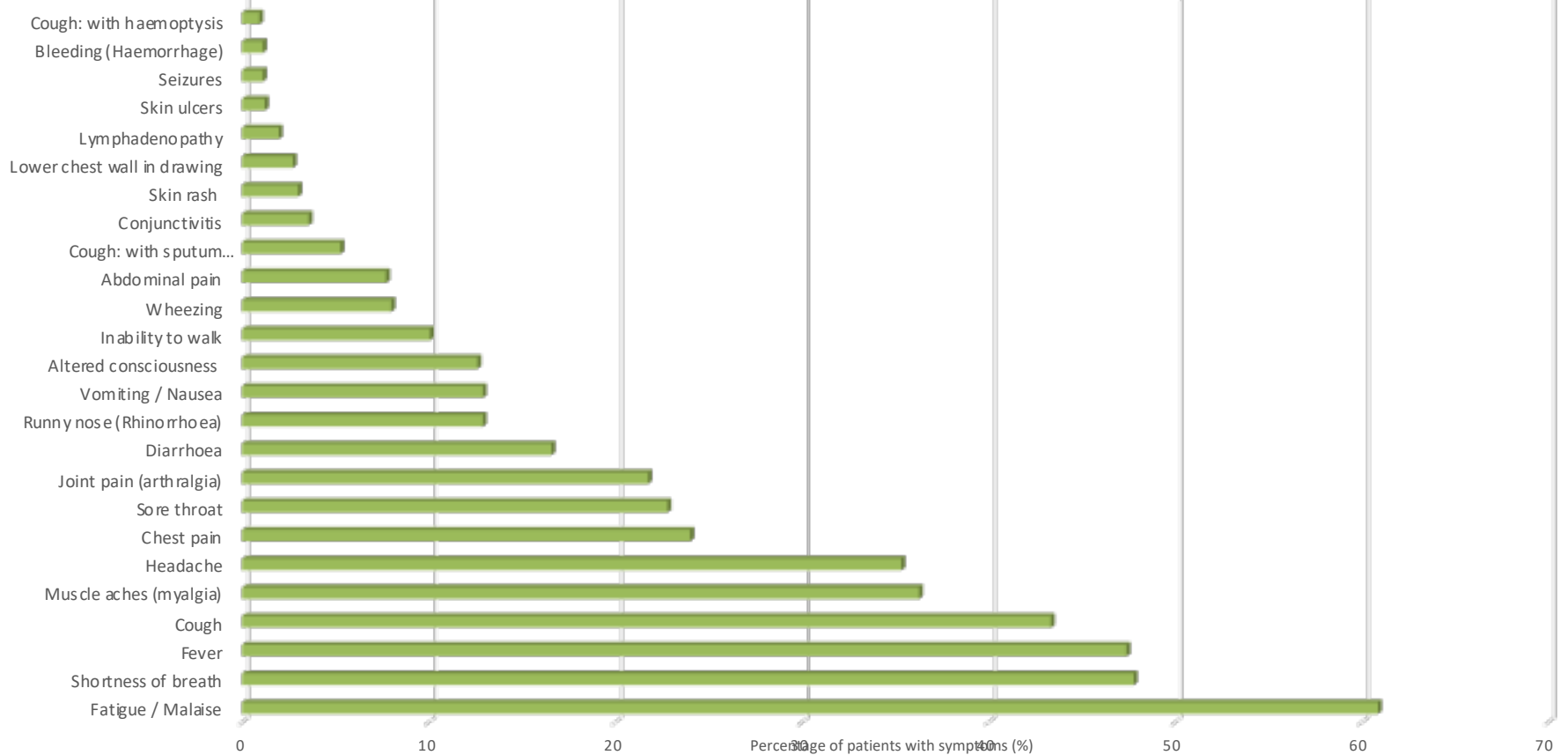
Demographic characteristics

Characteristic	Female	Male	Total
	Female 548 (51.7%)	Male 513 (48.4%)	N=1 061
Median age (IQR)	50 [38-60]	53 [44-62]	52 [40 - 61]
Age group			
<40 years	155 (28.3)	93 (18.2)	248 (23.4)
40-64 years	305 (55.7)	319 (62.3)	624 (58.9)
≥65 years	87 (15.9)	100 (19.5)	187 (17.6)
Unknown	1 (0.2)		1 (0.1)
Race			
White	62 (11.3)	84 (16.4)	146 (13.8)
Africans	280 (51.1)	211 (41.1)	491 (46.3)
Coloured	37 (6.8)	36 (7.0)	73 (6.9)
Indian	34 (6.2)	33 (6.4)	67 (6.3)
Other	2 (0.4)	1(0.2)	3 (0.3)
Unknown	133 (24.3)	148 (28.9)	281 (26.5)

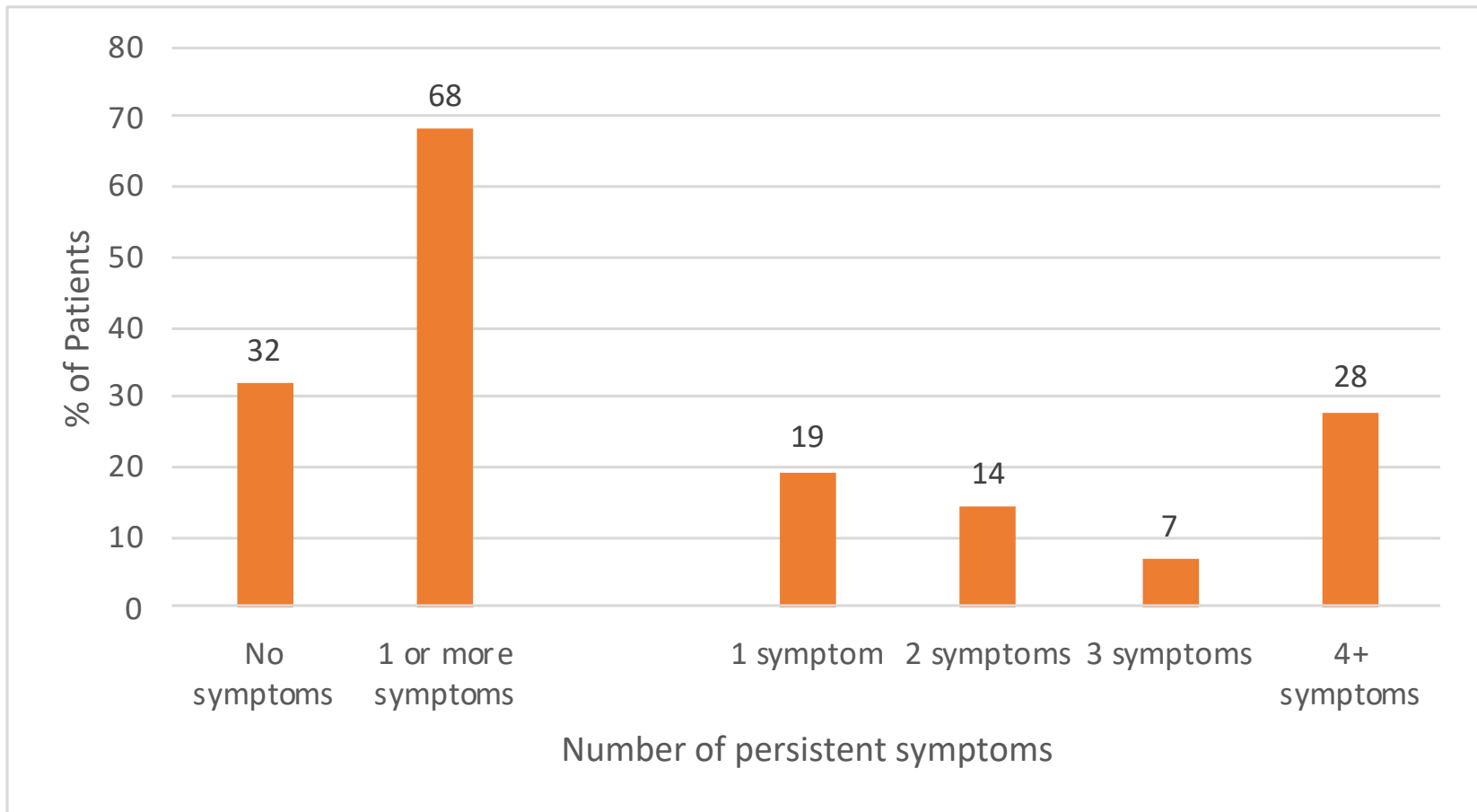
Prevalence of comorbidities (N=1061)



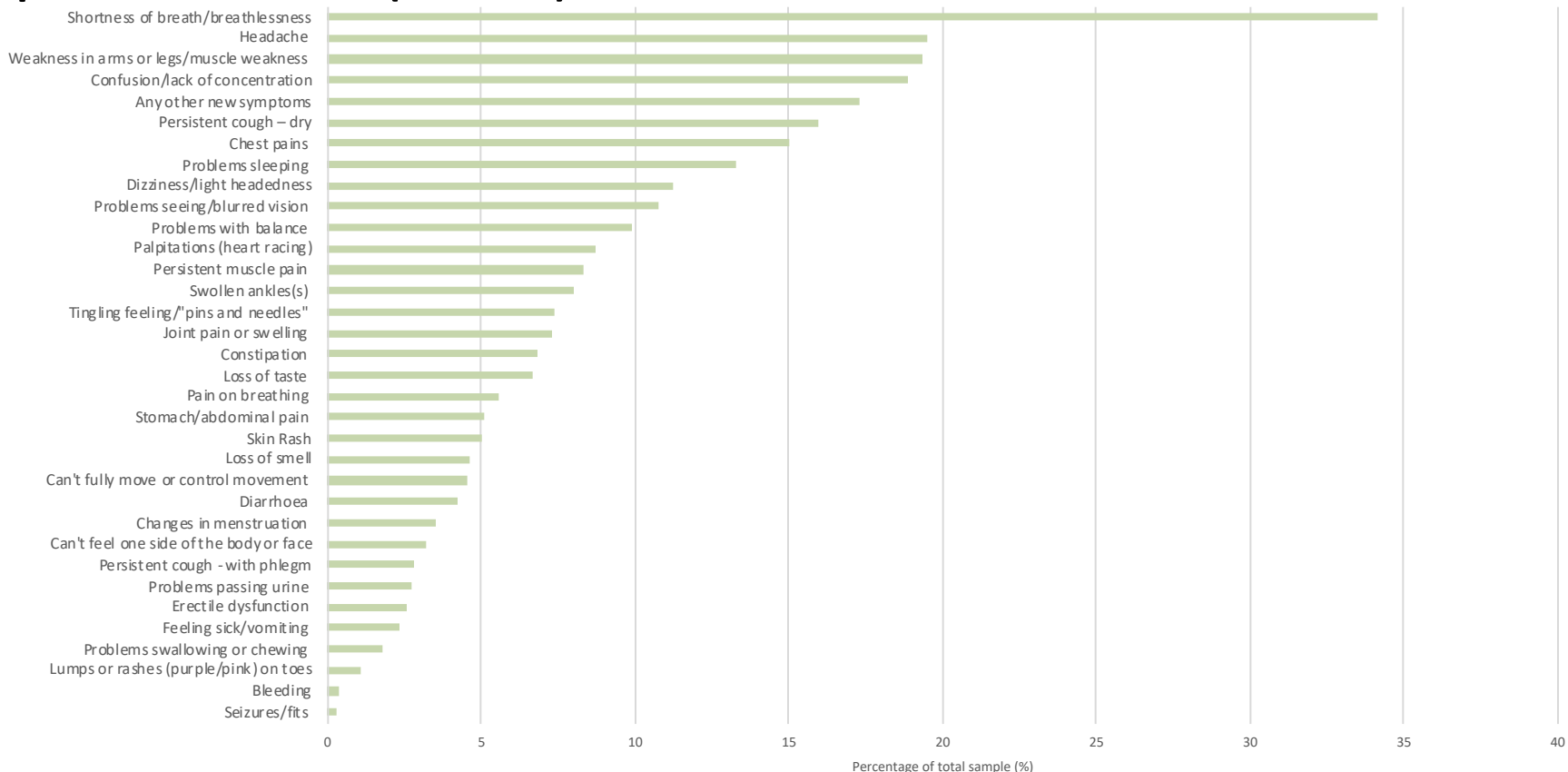
Symptoms on admission during acute COVID-19 (N=1061)



Number of Persistent Symptoms (N=1061)



Symptoms at 1 month (N=1061)



Symptoms at 1 month by Sex (N=1061)

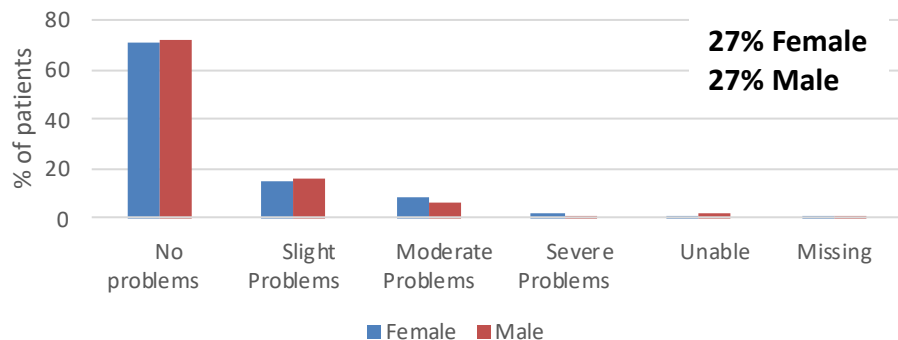
Characteristic	Symptoms in the past seven days		
	Female (%)	Male (%)	Total (%)
Shortness of breath/ breathlessness	33.9	34.3	34.1
Headache	22.5	16.4	19.5
Weakness in arms or legs/ muscle weakness	18.1	20.7	19.3
Confusion/ lack of concentration	21.4	16.2	18.9
Persistent cough – dry	15.0	17.0	15.9
Chest pains	17.7	12.1	15.0
Problems sleeping	12.8	13.8	13.3
Dizziness/ light headedness	13.7	8.6	11.2
Problems seeing/ blurred vision	12.6	8.8	10.7

Severe complications by Sex (N=1061)

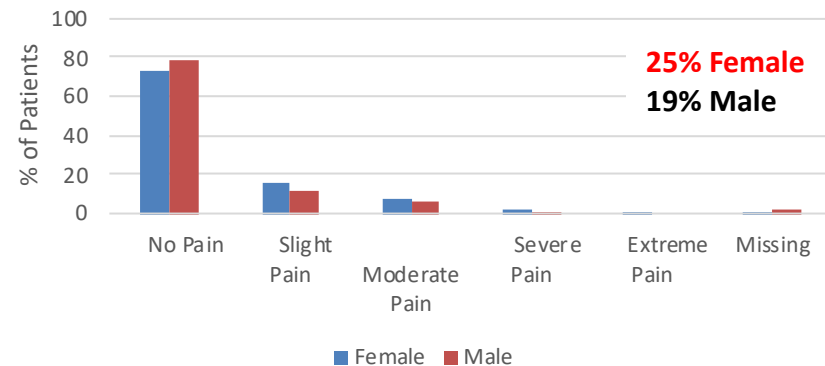
Disease	Diagnosis after COVID Diagnosis		
	Female n=548(%)	Male n=513 (%)	Total N= 1 061
Heart Attack			
Yes	5 (0.9)	2 (0.4)	7 (0.7)
No	536 (97.8)	501 (97.7)	1037 (97.7)
Not sure	3 (0.6)	1 (0.2)	4 (0.4)
Deep vein thrombosis (DVT)			
Yes	2(0.4)	0	2 (0.2)
No	538 (98.2)	501 (97.7)	1 039 (97.9)
Not sure	3 (0.6)	3 (0.6)	6 (0.6)
Stroke or mini stroke/TIA			
Yes	3 (0.6)	1 (0.2)	4 (0.4)
No	537 (98.2)	501 (97.7)	1 038 (97.8)
Not sure	3 (0.6)	2 (0.4)	5 (0.5)
Pulmonary embolism (PE)			
Yes	7 (1.3)	7 (1.4)	14 (1.3)
No	532 (96.9)	491 (95.7)	958 (96.3)
Not sure	4 (0.7)	4 (0.8)	8 (0.8)
Kidney problems			
Yes	10 (1.8)	16 (3.1)	26 (2.5)
No	527 (96.2)	484 (94.4)	1 011 (95.3)
Not sure	5 (0.9)	2(0.4)	7 (0.7)

Difficulties with Activities of Daily Living by Sex (N=1061)

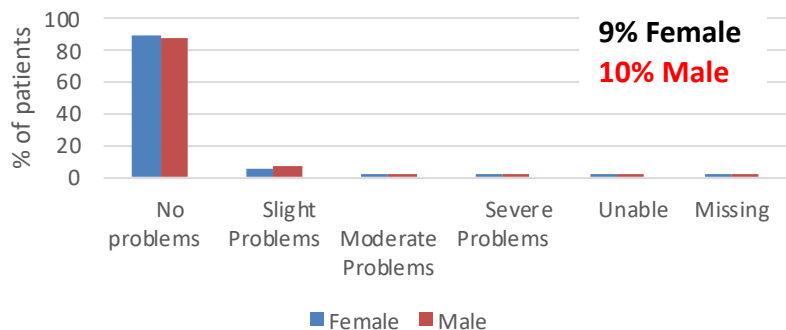
Mobility



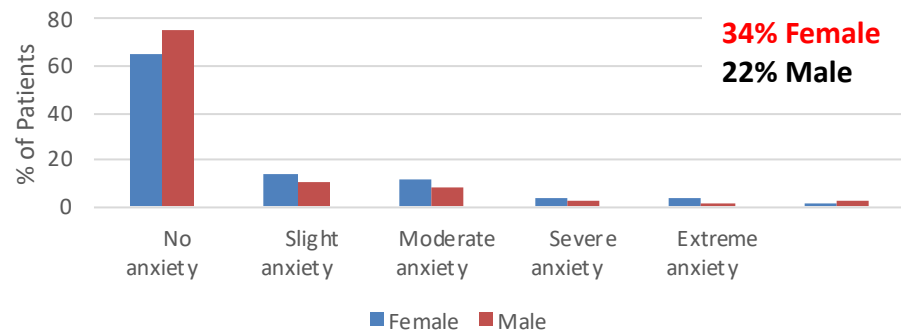
Pain/ Discomfort



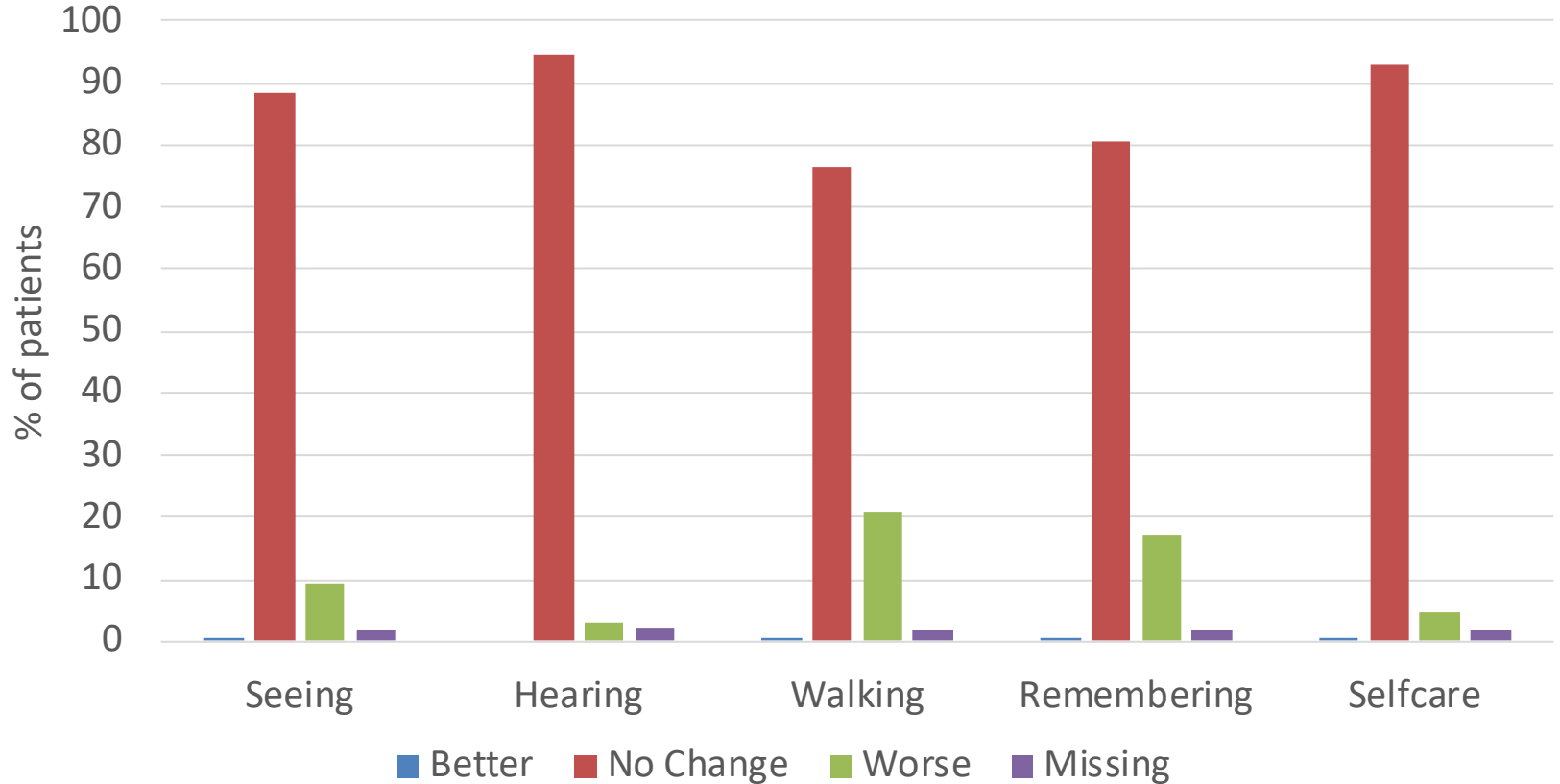
Self Care



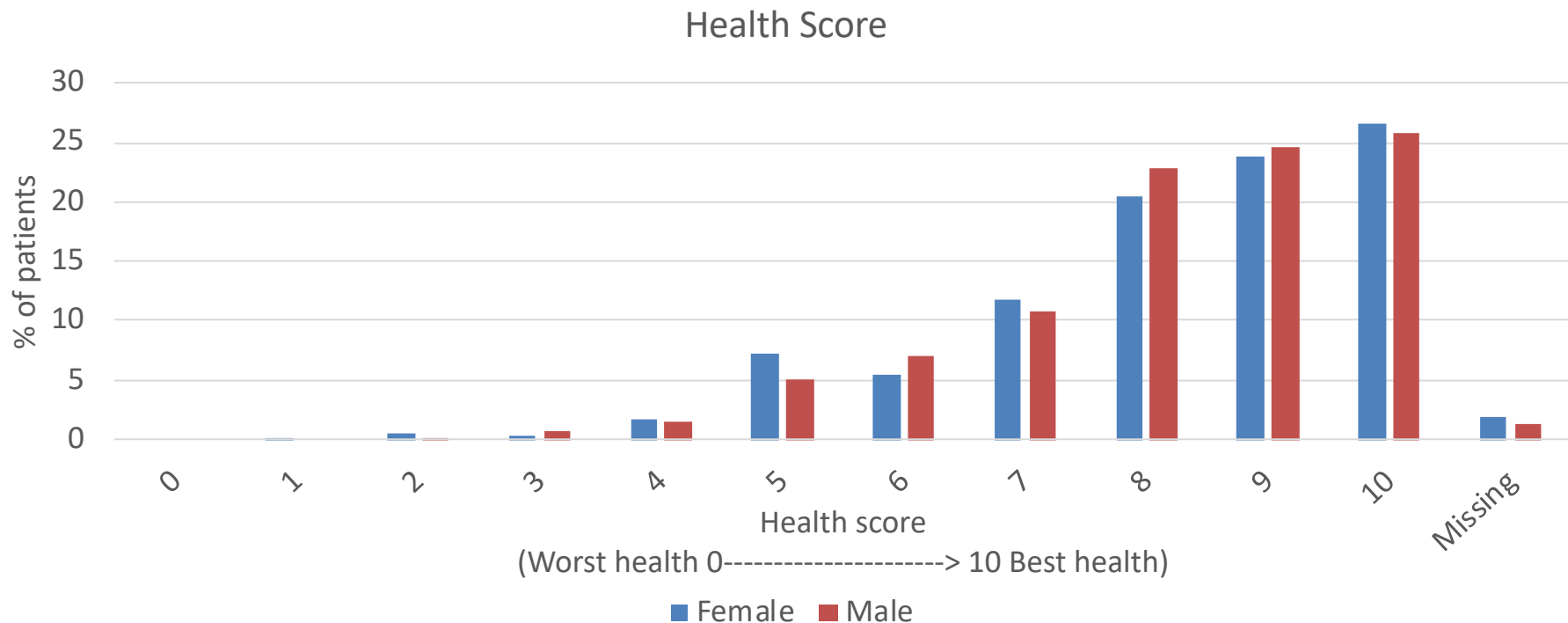
Anxiety/ Depression



Changes in Activities of Daily Living (N=1041)

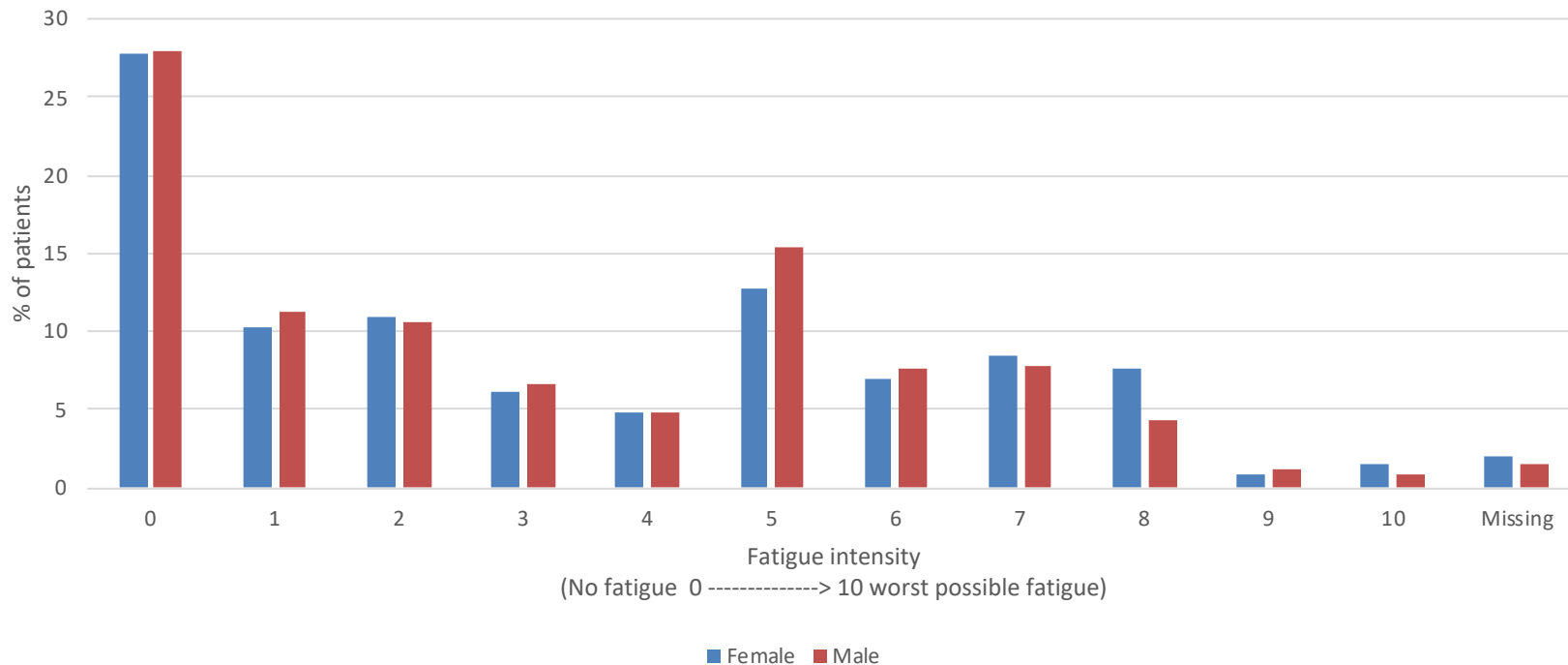


Self Perceived Health Score (N=1061)



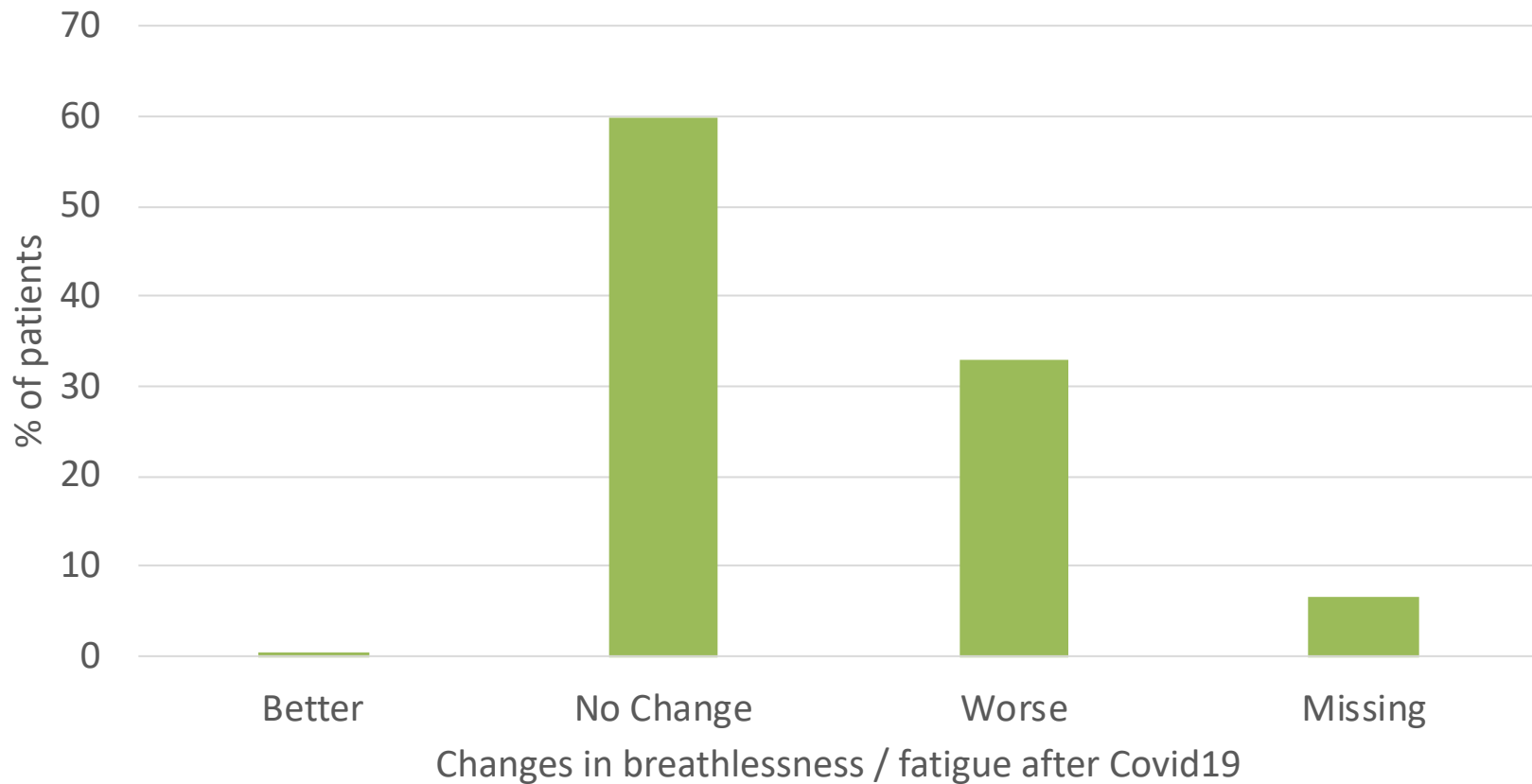
16% Females and 15% Male Reporting Health Score ≤ 6

Fatigue Intensity among patients reporting Fatigue (n=1061)

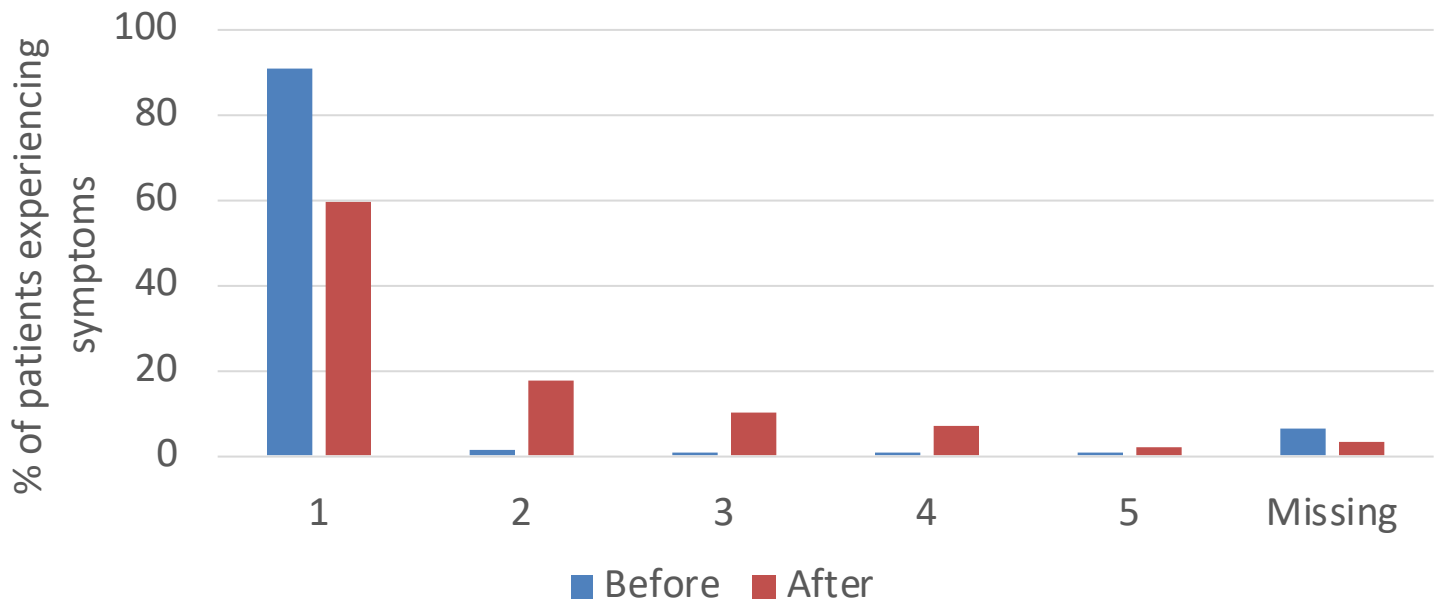


38% Females and 37% Male Reporting Fatigue Intensity ≥ 5

Change in breathlessness/ fatigue (N=1061)



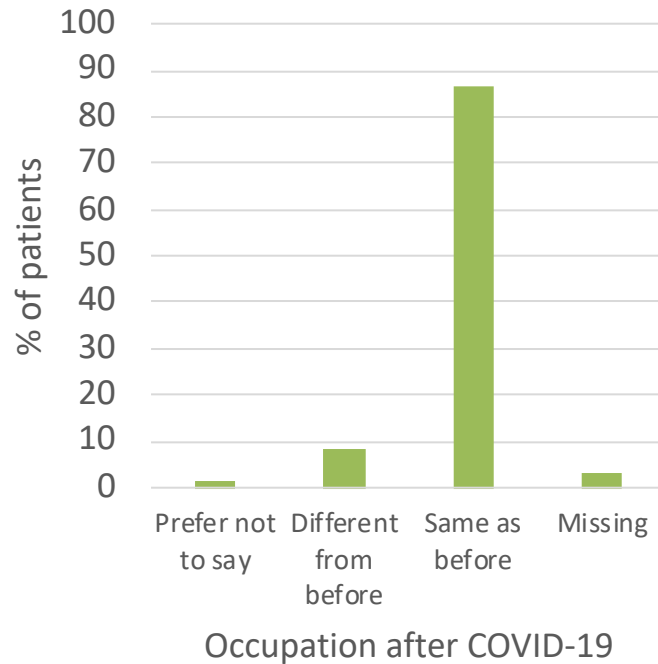
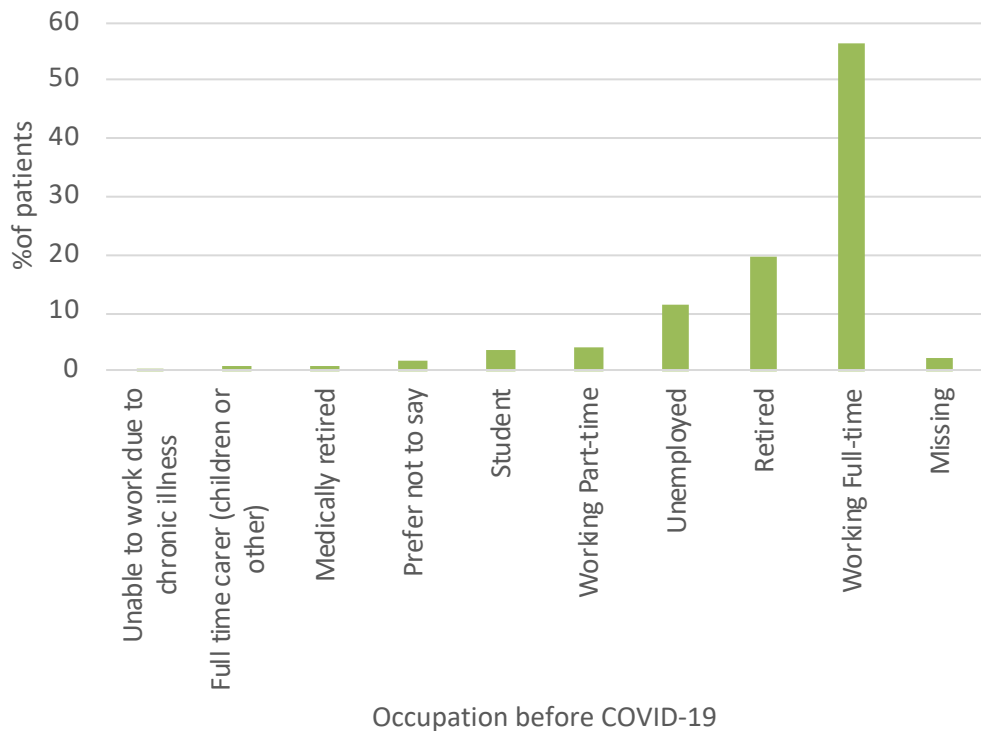
Shortness of Breath (N=1061)



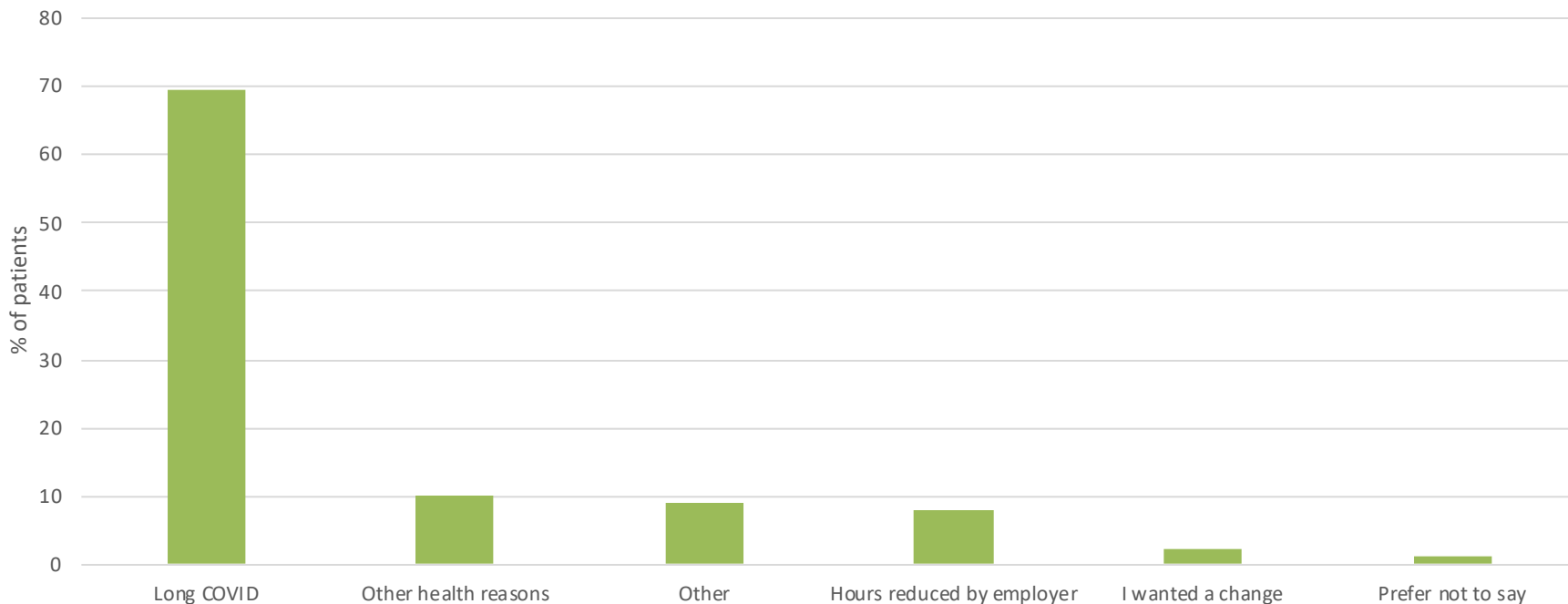
Key

- 1 - Not troubled by breathlessness except on strenuous exercise
- 2 - Short of breath when hurrying or when walking up a slight hill
- 3 - Walked slower than most people of my age because of breathlessness, or had to stop for breath when walking at own pace
- 4 - Stopped for breath after walking 100 yards/ 90-100 meters, or after a few minutes on level ground
- 5 - Too breathless to leave the house, or breathless when dressing/undressing

Occupation before and after COVID-19 (N=1061)



Reasons for Changed Occupation (N=88)



70% of patients who changed occupation following Acute COVID illness reported that the reason for the change was due to Long COVID

Lifestyle changes (N=995)

Disease	Life style changes			
	Smoking	Drinking alcohol	Eating healthy food	Physical activity
I do this more often	0.6	0.5	49.7	21.4
I do this less often	3.1	20.5	4.0	30.5
No difference	22.7	30.8	44.2	45.2
I did not do this before COVID-19	71.9	46.2	-	-



WHAT NEXT



What next...

- Guidelines and training for health providers
- Collaboration with NDoH, media, advocacy organizations
 - Health messaging on PASC
 - YourCOVIDRecovery website
 - Inform members of the public, improve enrollment
 - Plan for health services needs for people with PASC
 - Virtual consultation with health services
- Project Expansion
 - Conduct survey among non-hospitalized patients

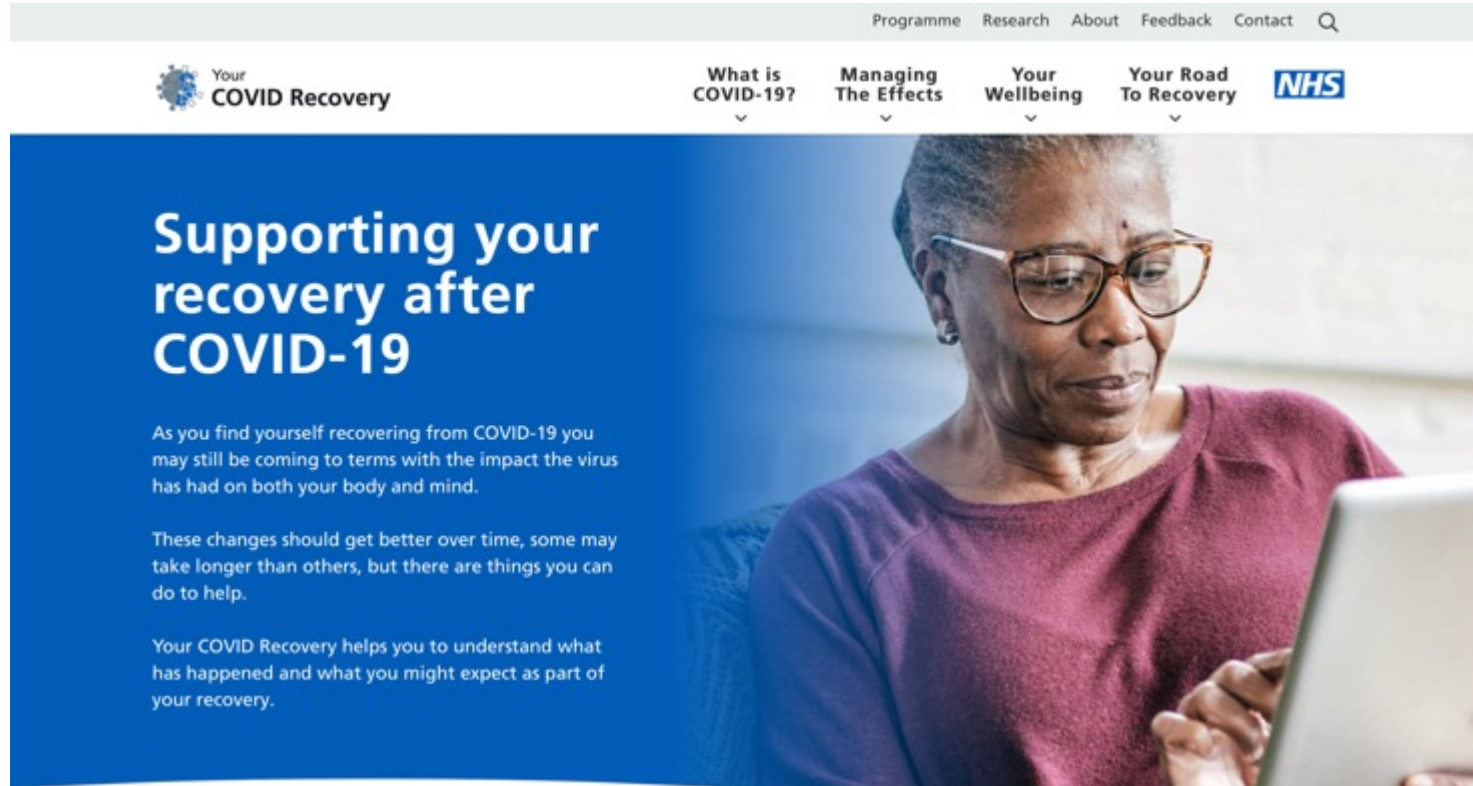
Occupational Health Recommendations

- Formulation and Dissemination of Guidelines
- Training of Health Care Professionals
 - Rule out other potential diagnoses
- Patient Messaging and Engagement
 - What to expect
 - Self management techniques
 - When to seek help
- Establish PASC Clinics
 - Provide support to patients
 - Outpatient and/or Virtual Consultations
- Provisions for support services
 - Psychology & Counselling services
 - Social Support Services
 - Rehabilitation
 - Occupational and Physiotherapy
 - Home Oxygen

YourCOVIDRecovery UK

<https://www.yourcovidrecovery.nhs.uk>

- Public platform to address acute COVID and PASC
- NDOH and NIOH involvement



The screenshot shows the homepage of the 'Your COVID Recovery' website. At the top, there is a navigation bar with links for 'Programme', 'Research', 'About', 'Feedback', and 'Contact', along with a search icon. Below this is the 'Your COVID Recovery' logo on the left and a menu with four items: 'What is COVID-19?', 'Managing The Effects', 'Your Wellbeing', and 'Your Road To Recovery', each with a dropdown arrow. The NHS logo is on the right. The main content area features a large blue background with a photograph of an elderly woman with glasses looking at a laptop. The text on the page reads: 'Supporting your recovery after COVID-19', 'As you find yourself recovering from COVID-19 you may still be coming to terms with the impact the virus has had on both your body and mind.', 'These changes should get better over time, some may take longer than others, but there are things you can do to help.', and 'Your COVID Recovery helps you to understand what has happened and what you might expect as part of your recovery.'

YourCOVIDRecovery UK

<https://www.yourcovidrecovery.nhs.uk>

Learning about your recovery



What is COVID-19?

Understanding COVID, your symptoms and experience of this illness.

- › Background About COVID
- › How Can COVID Affect You?
- › After a Stay On An Intensive Care Unit



Your Wellbeing

Supporting your wellbeing during your recovery.

- › Eating Well
- › Sleeping Well
- › Getting Moving Again
- › Family, Friends and Carers
- › Grief and Bereavement



Your Road to Recovery

Information for your life beyond COVID.

- › Coming Home From Hospital
- › Managing Daily Activities
- › Returning To Work
- › When Do I Need To Seek Help?
- › What Next?



Testimonial Clip

- Please find a link for a video testimonial from two PASC patients in the USA

<https://www.washingtonpost.com/technology/2020/10/01/long-haulers-covid-facebook-support-group/>

ACKNOWLEDGEMENTS

- **Research Assistants**
 - Claudette Kibasomba
 - Dorcas Magorimbo-Njanjeni
 - Jeniffer Nagudi
 - Lindelwa Ngobeni
- **Surveillance Officers**
 - Okaeng Plaatjie
 - Kadija Shangase
 - Zelna Jacobs
 - Thandeka Kosana
 - Bawinile Hlela
 - Salaminah Mhlangu
 - Menzi Mbonambi
- NICD (Dr Natalie Mayet and Dr Michelle Groome) and DATCOV Team
- ISARIC Team – Laura Merson, Daniel Plotkin, Tom Drake and Louise Sigfrid
- Bill and Melinda Gates Foundation – Prof Keith Klugman, Georgina Murphy



**NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES**

Division of the National Health Laboratory Service