

Majority have 'long COVID' symptoms seven weeks after discharge

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More than two-thirds of patients hospitalized due to COVID-19 continue to suffer from debilitating symptoms more than seven weeks after being discharged, according to a new study co-led by UCL researchers.

The study, carried out in collaboration with clinicians at the Royal Free London (RFL) and University College London Hospitals NHS Trust (UCLH), shows that 54 days after discharge, 69% of patients were still experiencing fatigue, 53% were suffering from persistent breathlessness, 34% still had a cough and 15% reported depression. In addition 38% of chest radiographs (X-rays) remained abnormal and 9% were getting worse.

Published in the medical journal *Thorax*, the study was led by Dr. Swapna Mandal and Professor John Hurst, who are both UCL Division of Medicine academics and RFL respiratory consultants. The findings represent the work of a large number of clinicians at these hospitals and UCL academics.

Clinical teams set up a "post-COVID" follow up clinic to review both the psychological and physiological symptoms of discharged patients.

In total, they observed 384 patients who had tested positive for COVID-19 and had been treated at Barnet Hospital, the Royal Free Hospital or UCLH. Collectively the average length of stay in [hospital](#) was 6.5 days.

All patients were telephoned or seen in person by a member of the clinical team on average 54 days after they had left hospital. Some further face-to-face clinical appointments were required for patients needing rehabilitation and/or further investigation.

The research showed that for those patients whose chest X-ray was still showing signs of infection when they were discharged, 62% had a normal X-ray when it was repeated, while the remainder (38%) were still showing changes. Almost one in ten (9%) of these patients had an X-ray which was worse than when they were discharged.

Dr. Mandal, an Honorary Clinical Associate Professor at UCL Division of Medicine, said that this data shows so-called "long COVID" is a real phenomenon and that further research is needed to understand how the symptoms of COVID-19 can be treated in the long-term.

"Patients whose COVID-19 illness is serious enough for them to require hospital care often continue to suffer significant symptoms for many weeks after their discharge," she said.

Professor Hurst (UCL Division of Medicine) said: "Understanding 'long COVID' is critical in helping people who have been through this life-changing experience return to health, while rapid roll-out of this follow-up service shows how our clinical teams worked together to deliver an innovative service during a period of unprecedented demand on our staff."

The researchers only included patients who tested positive for SARS-CoV-2, the virus that causes COVID-19; patients requiring prolonged ICU and in-patient stay may be under-represented in this early analysis. Comparing against maximal symptoms (those present when in hospital) risks recall bias and other symptoms such as chest pain may also be important. Not all participants were willing to take part in the review, or attend for investigations, potentially introducing selection bias. The researchers cannot determine if these features are unique to COVID-19 or similar to those following admission for other critical respiratory illness.

More information: Swapna Mandal et al. 'Long-COVID': a cross-sectional study of persisting symptoms, biomarker and imaging abnormalities following hospitalization for COVID-19, *Thorax* (2020).

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