

Long COVID: More likely in patients with 5+ symptoms in first week of infection

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The presence of more than five symptoms of COVID-19 in the first week of infection is significantly associated with the development of long COVID, irrespective of age or gender, according to a new review



published by the Journal of the Royal Society of Medicine.

The review by the University of Birmingham-led Therapies for Long COVID (TLC) Study Group, summarizes current research on symptom prevalence, complications and management of long COVID. Pooled prevalence data in the review highlights the ten most common symptoms of long COVID. These are fatigue, shortness of breath, muscle pain, cough, headache, joint pain, chest pain, altered smell, diarrhea and altered taste.

The researchers identified two main symptom clusters of long COVID: those comprising exclusively of fatigue, headache and upper respiratory complaints; and those with multi-system complaints including ongoing fever and gastroenterological symptoms.

Lead author Dr. Olalekan Lee Aiyegbusi, Deputy Director at the University of Birmingham's Centre for Patient Reported Outcomes Research (CPROR), said: "There is evidence that the impact of acute COVID-19 on patients, regardless of severity, extends beyond hospitalization in the most severe cases, to ongoing impaired quality of life, mental health and employment issues. People living with long COVID generally feel abandoned and dismissed by healthcare providers and receive limited or conflicting advice. More than one-third of the patients in one of the studies included in the review reported they still felt ill or in a worse clinical condition at eight weeks than at the onset of COVID-19."

Dr. Shamil Haroon, Clinical Lecturer in Primary Care and co-Principal Investigator of the University of Birmingham NIHR/UKRI funded TLC Study, further commented: "Neither the biological or immunological mechanisms of long COVID, nor the rationale for why certain people are more susceptible to these effects, are yet clear, limiting development of therapies. It is essential we act quickly to address these issues."



In a comparison with other coronaviruses, the researchers suggest that in the longer term, patients with long COVID may also experience a similar disease trajectory to that of patients who had SARS or MERS, pointing to analysis showing that six months after hospital discharge, approximately 25% of patients hospitalized with SARS and MERS had reduced lung function and exercise capacity.

TLC Study's Co-Principal Investigator Melanie Calvert, Professor of Outcomes Methodology at the University of Birmingham and NIHR Senior Investigator, said: "The wide range of potential symptoms and complications patients with long COVID may experience highlights the need for a deeper understanding of the clinical course of the condition. There is an urgent need for better, more integrated care models to support and manage patients with long COVID to improve clinical outcomes."

More information: Olalekan Lee Aiyegbusi et al, Symptoms, complications and management of long COVID: a review, *Journal of the Royal Society of Medicine* (2021). DOI: 10.1177/01410768211032850

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