

Viewpoint: Doctors with long COVID deserve more support

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Freelance journalist Adele Waters speaks to scores of doctors unable to work or play with their children, forced to sell their homes or facing financial destitution by an illness they caught while doing their jobs. She

hears of "shockingly low" access to protective equipment faced by many doctors in their workplaces, and how some have struggled for medical colleagues to take their symptoms seriously.

Charities that provide [financial support](#) to doctors in need have seen a sudden rise in demand, and now there are calls for long COVID to be considered an occupational disease to help doctors and other health care workers access [support](#) and financial aid.

Long COVID is an umbrella term for a range of symptoms—from fatigue and [respiratory problems](#) to [heart palpitations](#) and [joint pain](#)—that last longer than four weeks after an acute COVID-19 infection and are not explained by an alternative diagnosis.

There are no precise figures for how many health care workers are affected, but estimates suggest that up to 4.41% (one in 25) have acquired long COVID.

Long COVID Doctors For Action (LCD4A) is a support network campaigning for greater recognition of long COVID and its impact on doctors' health and careers. Members include doctors who have been dismissed by their employer on capability grounds, those who have applied for ill health retirement decades early, and others who have lost their places in training programs.

Last year, the British Medical Association (BMA) joined forces with LCD4A to survey doctors with the condition. Of 603 doctors who responded, almost one in five (18%) were no longer able to work. While more than half (57%) had worked full time before the onset of their COVID illness, by the time of the survey count that proportion had dropped to one in three (31%). Nearly half (49%) of respondents had lost income because of long COVID.

Both the BMA and LCD4A have set out five demands, including greater workplace protection for health care staff, better support for sufferers to return to work safely, and a call for long COVID to be considered an occupational disease to help doctors and other health care workers access support and financial aid.

In March, the Trade Union Congress made the same call, and in November 2022 the Industrial Injuries Advisory Council, which advises the government on which diseases should be classified as work-related, recommended that health workers with long COVID be able to claim industrial injuries benefit, notes Waters.

But there is no sign yet that such a move is on the cards.

The Department of Health and Social Care (DHSC) told *The BMJ* it recognizes that long COVID can have a debilitating impact on people but adds, "The evidence in relation to making long COVID an occupational disease is at present insufficient, given continuing uncertainties around its definition, fluctuating nature and range of symptoms."

A spokesperson for the DHSC said, "We are backing our world-leading scientists with over £50 million to better understand the long-term effects of this virus and make treatments available. NHS staff are able to seek support for long COVID from their GP or one of the 100 specialist clinics available nationwide. The NHS has also committed £314 million to support people with ongoing symptoms of long COVID."

But for doctors such as Kelly Fearnley, who co-founded LCD4A after long COVID left her unable to work, that simply is not good enough. "After risking our lives to save others, now disabled, we are being managed out of the door with no support system in place," she says.

"I contracted this illness caring for COVID positive patients because my

employer failed to provide me with adequate respiratory [protective equipment](#). There should be more of an effort to support health care workers. At a time when the country needed us, we stepped up, and it's not right now that in our time of need the country steps away."

More information: Long covid: the doctors' lives destroyed by an illness they caught while doing their jobs, *The BMJ* (2023). [DOI: 10.1136/bmj.p1983](#)

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