

# Sick days: Assessing the economic costs of long COVID

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A new Yale study finds that the effects of long COVID have caused many Americans to miss extensive work time, and that 14% of study participants reported not returning to work in the months after their

infection.

The findings, [published](#) recently in *PLOS ONE*, suggest that long COVID may have affected millions of Americans and generated steep economic costs, highlighting the need for policies to support those with the condition, researchers said.

The study drew on a long-term survey of individuals who contracted COVID-19—dubbed Innovative Support for Patients with SARS-CoV-2 Infections Registry, or INSPIRE—that began recruiting participants in the fall of 2020 and continued through summer 2022. More than 6,000 participants—at eight study sites in Illinois, Connecticut, Washington, Pennsylvania, Texas, and California—received surveys upon recruitment and every three months thereafter for 18 months.

The Yale researchers focused specifically on participant responses to questions pertaining to work—including whether they returned to work after contracting COVID-19 and how many workdays they missed due to COVID-19-related symptoms. They also assessed how many symptoms participants experienced after having COVID-19.

Among the nearly 3,000 participants who were employed prior to the pandemic, almost 10% reported having five or more symptoms three months after having contracted COVID-19.

"And this number was important because we've shown in previous studies that the number of symptoms someone has after being infected with SARS-CoV-2 may be more indicative of how severe their long COVID is," said Arjun Venkatesh, lead author of the study and chair of the Department of Emergency Medicine at Yale School of Medicine.

The researchers also found that more than 7% of participants missed more than 10 days of work in the three months following SARS-CoV-2

infection due to COVID-19 symptoms. (Most of the study data was collected after the U.S. Centers for Disease Control and Prevention reduced their recommended isolation period to five days for those with COVID-19.) Additionally, nearly 14% of participants did not return to work within three months after their infection; those with five or more symptoms were more than twice as likely to not return to work than individuals with no symptoms.

"We found that having five or more symptoms three months after infection was strongly associated with not returning to work," said Venkatesh. "And when we compare the rates observed in this study to the national population, it could mean as many as 2 million people may be out of work because of post-COVID conditions."

This is especially startling, Venkatesh said, since the participants in this study were fairly young; the average age was roughly 40.

"This has big economic impacts," he added. "It also has impacts on those people individually in terms of their own income security and their ability to care for themselves and their families."

At the beginning of the pandemic, Venkatesh said, policymakers enacted key measures to offer economic relief and support to Americans, including [federal legislation](#) that helped workers remain employed even if they weren't able to work and to weather the economic storm of the initial part of the pandemic. But the economic and personal costs of long COVID have not yet received the same level of attention, he said.

As [public health officials](#) and lawmakers consider the long-term health and economic effects of COVID-19 and long COVID, said Venkatesh, they may want to assess how disability policy should address long COVID and whether to support work transitions for people whose long COVID symptoms prevent them from returning to their previous jobs.

"Given the millions of people who have had COVID-19 in the United States and the millions of people that report prolonged symptoms, this is not a small problem," said Venkatesh. "So it does require big interventions."

**More information:** Arjun K. Venkatesh et al, The association between prolonged SARS-CoV-2 symptoms and work outcomes, *PLOS ONE* (2024). [DOI: 10.1371/journal.pone.0300947](https://doi.org/10.1371/journal.pone.0300947)

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