Guy's & St Thomas' Charity &...







Guy's & St Thomas' Hospital Health Seminar 2022

**COVID-19 Update** 

### The Changing Face of COVID-19: The Long COVID Story



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'COVID-19 is this generation's polio. Patients will have mild, moderate and severe illness. Large numbers of patients will have physical, cognitive and psychological disability that will require long-term management. We must plan ahead' **Nicholas Hart** 

**March 21st 2020** 



A multi-disciplinary clinical-academic approach to deliver the best holistic care to our patients from front door to back door and beyond



### The changing face of COVID-19: Long COVID

### LONG COVID: BUILDING A MIND & BODY CLINICAL ACADEMIC SERVICE

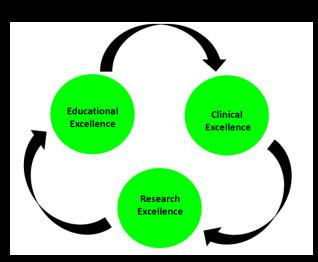








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#### **CYCLE OF EXCELLENCE**

Clinical Excellence <u>asks</u> the research question Research excellence <u>answers</u> the research question Educational excellence <u>delivers</u> the answer into clinical practice





### LONG COVID CLINICAL RESPONSE: **DEVELOPING A MIND & BODY CLINICAL ACADEMIC SERVICE**



Georgios Kaltsakas











Tim Nicholson



Trudie Chalder









Jacky Jones



Irem Patel



Lynette Linkson



Philippa Yeeles



Alicja Bellamy





COVID-19 rapid guideline: managing the long-term effects of COVID-19



### **COVID CATEGORIES**

- ACUTE COVID
- POST ACUTE COVID (Up to 12 weeks)
- SEQUELAE OF ACUTE COVID (>12 weeks)\*
- LONG COVID (>12 weeks)

<sup>\*</sup>respiratory, cardiac, renal, neurological and endocrine

### LETTERS

https://doi.org/10.1038/s41591-021-01292-y



NATURE MEDICINE | VOL 27 | APRIL 2021 | 626-631

Carole H. Sudre et al

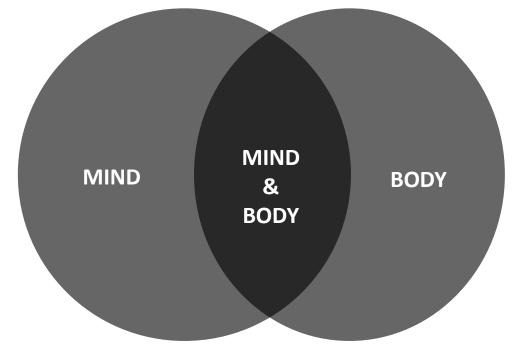
- COVID symptom app
- 4,182 incident cases
- 2.3% reporting symptoms at ≥ 12 weeks
- Characterised by Long COVID symptoms
- > 5 symptoms during first week of illness was 3.5 Xs more likely to report Long COVID symptoms

COVID-19 rapid guideline: managing the long-term effects of COVID-19



#### Most commonly reported symptoms

- Fatigue
- Breathlessness
- Muscle ache
- Muscle weakness
- Joint pain
- Lethargy
- Impaired sleep quality
- Short-term memory loss
- Slower thinking



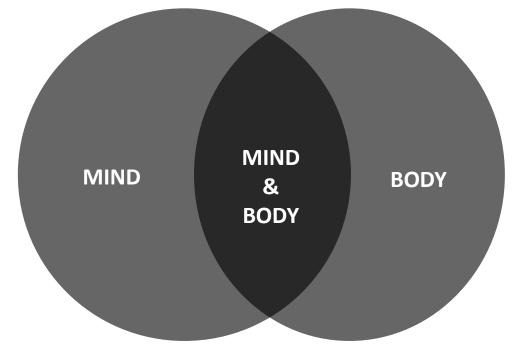
**Psychophysiological Medicine** 

COVID-19 rapid guideline: managing the long-term effects of COVID-19



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**Psychophysiological Medicine** 

## Coronavirus and the social impacts of 'long COVID' on people's lives in Great Britain

Opinions and Lifestyle Survey

- Long COVID reported in 3.6% of adults
- Women more likely to experience Long COVID than men
- More likely to experience Long COVID between 30 and 49 years
- More likely to experience Long COVID if live in deprived area
- Anxiety, life satisfaction and happiness affected in two thirds reporting Long COVID
- Anxiety and depression affected one third reporting Long COVID
- Work affected in half reporting Long COVID
- Household finances in one fifth reporting Long COVID

https://coronavirus.data.gov.uk/



Total COVID-19 Cases: 628,034 Total Deaths: 4089 (0.65%) Total Hospitalisations: 26,116

### Long COVID 2.8% of All Community COVID-19 Infections = Predicted 16,739

https://coronavirus.data.gov.uk/



Total COVID-19 Cases: 628,034

Total Deaths: 4089 (0.65%)
Total Hospitalisations: 26,116

SEL Predicted Long COVID = 16,739

**GSTT LONG COVID CLINIC** 

**Therapy Led-Medically Supported** 

Physiotherapy

**Occupational Therapy** 

**Psychology** 

**Respiratory Consultants** 

**Rehabilitation Consultant** 

Domain	Measure
Function	Work & Social Adjustment Scale
Fatigue	FACIT/NRS
Breathlessness	MRC-DS/NRS/BPAT
Brain Fog	PDQ
Mental Health	PH2/GAD2
Health Economics	EQ5D-3L

- 63% female
- 46 years
- 87% non-hospitalised COVID illness
- 11% hospitalised COVID illness
- 2% critical care COVID illness

#### **REASON FOR REFERRAL**

- 76% fatigue
- 74% breathlessness
- 53% functional limitation
- 18% brain fog/return to work
- 10% combination breathlessness, fatigue, functional limitation, brain fog/return to work

#### **CLINICAL PROBLEM IDENTIFIED**

- 82% fatigue
- 75% breathlessness
- 55% brain fog/return to work
- 52% functional limitation
- 15% psychological
- 11% palpitations
- <5% headache, cough, sleep disturbance, loss of taste/smell, hair loss, rash

#### IN CLINIC TESTING

n	Test
93%	SpO2 and heart rate (STS)
69%	Blood profile
17%	Chest X-Ray
30%	Lung function test and home oximetry
9%	ECG
2%	Echocardiogram

#### **IN CLINIC ADVICE**

n	ADVICE
99%	COVID recovery advice
95%	Fatigue advice
95%	Exercise advice
89%	Psychology advice
77%	Vocational rehabilitation advice

#### **ONWARD REFERRAL**

- 40% IAPT (Improving Access to Psychological Therapies)
- 35% pulmonary rehabilitation
- 35% persistent symptom service
- 28% respiratory clinic
- 21% vocational rehabilitation
- 15% ENO
- 13% MSK referral
- 5% cardiology referral
- 5% neurology referral

#### **ONWARD REFERRAL**

- 40% IAPT
- 35% pulmonary rehabilitation
- 35% persistent symptom service
- 28% respiratory clinic
- 21% vocational rehabilitation
- 15% ENO
- 13% MSK referral
- 5% cardiology referral
- 5% neurology referral

#### **POST CLINIC OUTCOMES**

Did you find the clinic useful? Yes 99 %
Do you feel we addressed your issues? Yes 99%
Anything we could have done better? No 97%

#### **OUTCOMES AT 3 MONTHS**

**EQ5D-3L: 66% improvement** 

**WSAS: 55% improvement** 

**Symptoms: 48% improvement** 

## BUILDING A MIND & BODY CLINICAL ACADEMIC SERVICE: LEARNING IN REAL TIME

### DO NOT BECOME COVID BLIND

**AVOID DUALISTIC CARE & OVER-MEDICALISATION** 

PROMOTE EXPECTED RECOVERY PATHWAY



### The changing face of COVID-19: where next?



### The changing face of COVID-19: where next?

RESEARCH IS THE EXIT STRATEGY FROM THE PANDEMIC