

Guidance

COVID-19: long-term health effects

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Around 10% of mild coronavirus (COVID-19) cases who were not admitted to hospital have reported symptoms lasting more than 4 weeks. A number of hospitalised cases reported continuing symptoms for 8 or more weeks following discharge.

Persistent health problems reported following acute COVID-19 disease include:

- respiratory symptoms and conditions such as chronic cough, shortness of breath, lung inflammation and fibrosis, and pulmonary vascular disease
- cardiovascular symptoms and disease such as chest tightness, acute myocarditis and heart failure
- protracted loss or change of smell and taste
- mental health problems including depression, anxiety and cognitive difficulties
- inflammatory disorders such as myalgia, multisystem inflammatory syndrome, Guillain-Barre syndrome, or neuralgic amyotrophy
- gastrointestinal disturbance with diarrhoea
- continuing headaches
- fatigue, weakness and sleeplessness
- liver and kidney dysfunction
- clotting disorders and thrombosis
- lymphadenopathy
- skin rashes

Research to evaluate the long-term health and psychosocial effects of COVID-19 is continuing. Major studies include the Post-Hospitalisation COVID-19 study (PHOSP-COVID) in the UK and the International Severe Acute Respiratory and emerging Infection Consortium (ISARIC) global COVID-19 long-term follow-up study.

Patients recovering from COVID-19 infection should speak to their GP about local care pathways for support and assessment of any long-term symptoms or health problems. Healthcare providers can also refer patients to the online COVID recovery programme.

The NHS has produced guidance for primary care and community health services to meet the immediate and longer-term care needs of patients discharged following an acute episode of COVID-19.