



LONG COVID FREQUENTLY ASKED QUESTIONS

An elusive and unpredictable complication of SARS-CoV-2 (COVID-19) infection has slowed recovery for up to twenty percent of infected individuals. Acute COVID-19 infection can cause a range of symptoms, from none to severe including hospitalization and death. After the initial infection, some have lingering or new symptoms that remain after the individual has recovered from the acute infection. These symptoms have frustrated patients and providers as researchers hunt for a clear path forward.

What is long COVID?

Long-COVID, also known as post-COVID conditions, describe a wide range of health problems people can experience four or more weeks after first developing COVID-19. Even those who do not become severely ill from COVID-19 infection may experience post-COVID conditions (PCC).

Most people recover from COVID-19 within a few days to a few weeks in an uncomplicated, predictable manner. People who develop long COVID have symptoms that typically last at least 4 weeks or more after their initial infection with symptoms that do not mimic their original illness. People who had asymptomatic COVID-19 can also develop long COVID symptoms.

Long-COVID can lead to a number of health problems that can affect multiple body systems. There are currently no tests to diagnose long-COVID. The diagnosis is made by a healthcare provider based on past positive results, symptoms, and findings from physician examination. The cause is poorly understood and follows an unpredictable course of recovery.

What are the symptoms of long COVID?

People with long-COVID symptoms can experience a wide range of symptoms lasting anywhere from a few weeks to a few months. Symptoms can go away and then come back, but most people improve over time.

Symptoms of long-COVID can include:

- General fatigue or tiredness
- Feeling tired after any physical or mental activity
- Fever
- Trouble breathing
- Cough
- Chest pain
- Difficulty focusing
- Headaches
- Issues with sleep
- Lightheadedness
- Depression or anxiety
- Stomach pain
- Diarrhea
- Joint or muscle pain
- Rash

COVID-19 infections can affect multiple body systems, and past infection can increase the risk of developing chronic diseases such as diabetes, heart or neurological conditions when compared to people who have never been infected with COVID-19.

Who is at risk of developing long-COVID?

Researchers are working to understand who is at a higher risk of developing long-COVID. Studies have shown that people who have had severe illness, specifically needing hospitalization or intensive care, people with underlying chronic health conditions, and people who have multisystem inflammatory syndrome (MIS) during or after COVID-19 infection are more likely to develop long-COVID. Studies have found that people who have been vaccinated against COVID-19 are less likely to develop long-COVID than those who have not been vaccinated. Long-COVID is also a reason to avoid infection by masking, social-distancing, and isolating when appropriate. The different variants of COVID-19 virus also contribute to long-COVID in different and poorly understood ways.

What should you do if you think you have long-COVID?

If you are concerned you have long-COVID, it is important to see your healthcare provider. Before your visit, make a list including:

- Past medical and surgical history before you were diagnosed with COVID-19
- Past COVID-19 test results and diagnosis of COVID-19 infection
- Approximate date when your symptoms began
- List of symptoms you have had and currently are experiencing
- List of any symptoms that worsen with activity
- List of any activity restrictions you may have after your infection
- List of any medications or supplements you take

Communicate any concerns you have with your healthcare provider so that you can work together to set goals to help create a treatment plan specific to you.