

CLINICAL PEARLS:

POST-COVID-19 CONDITIONS

AANP

American Association of
NURSE PRACTITIONERS®

Assessment and Testing

May or may not be indicated in post-COVID patients. Will help clarify or exclude other conditions. Includes complete blood count, ferritin, electrolytes, troponin, liver panel, renal function, C reactive protein, creatinine kinase, D-dimer, BNP, chest x-ray, urinalysis and EKG.
<https://www.bmj.com/content/370/bmj.M3026.full>

Risks Factors for the Development of Long-COVID

Read a worldwide analysis of patients with post-COVID conditions, including data on preexisting health conditions, location and demographics. <https://patientresearchcovid19.com/research/report-1>

Management of Post-COVID Conditions

Stress Self-Management

Long haulers need to be encouraged to do all they can to support their own general health. Stop smoking; use pulse oximeter daily; diet, rest and sleep; limit alcohol and caffeine; pace and gradually increase activity and exercise.
<https://www.bmj.com/content/370/bmj.M3026.full>

Fatigue

- Fatigue is the most common symptom related to post-COVID with the male gender. Those who have comorbidities of hypertension and diabetes are at the greatest risk. Need to rule out other disorders and conditions that could be a cause.
<https://www.sciencedirect.com/science/article/pii/S0188440921000813?via%3Dihub>
- Explore rehabilitation outcomes to improve post-COVID fatigue, breathlessness and cognition.
<https://journals.sagepub.com/doi/10.1177/14799731211015691>

Cardiac Issues

- Myocarditis — Long-haul symptoms are related to the severity of myocarditis and residual cardiomyopathy. Evaluation, diagnosis and management algorithms are accessible at: https://www.jacc.org/doi/10.1016/j.jacc.2022.02.003?_ga=2.104755840.1454269183.1651005885-106646111.1651005885&
- Current evidence does not support the routine utilization of advanced cardiac imaging, and this should be considered on a case-by-case basis. <https://www.nature.com/articles/s41591-021-01283-z>
- Recommendations for competitive athletes with cardiovascular complications related to COVID-19 include abstinence from competitive sports or aerobic activity for three to six months until resolution of myocardial inflammation by cardiac MRI or troponin normalization. <https://www.nature.com/articles/s41591-021-01283-z>

Headaches

Standard therapies should be implemented for neurologic complications such as headaches, with imaging evaluation and referral to a specialist reserved for refractory headache. <https://www.nature.com/articles/s41591-021-01283-z>

Respiratory Issues

- Treatment with corticosteroids may be beneficial in a subset of patients with post-COVID inflammatory lung disease, as suggested by a preliminary observation of significant symptomatic and radiological improvement. <https://www.nature.com/articles/s41591-021-01283-z>
- Rehabilitation outcomes to improve post-COVID fatigue, breathlessness and cognition. <https://journals.sagepub.com/doi/10.1177/14799731211015691>

“Brain Fog” and Cognitive Impairment

Rehabilitation outcomes to improve post-COVID fatigue, breathlessness and cognition.
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Mood Changes

Standard screening tools should be used to identify patients with anxiety, depression, sleep disturbances, PTSD, dysautonomia and fatigue. <https://www.nature.com/articles/s41591-021-01283-z>

Nutrition

Malnutrition has been noted in 26%-45% of patients with COVID-19. Protocols to provide nutritional support for patients (many of whom suffered from respiratory distress, nausea, diarrhea and anorexia, with resultant reduction in food intake) continue to be refined.

<https://www.nature.com/articles/s41591-021-01283-z>

Health Inequities

Long COVID is significantly impacted by social determinants of health with the primary care provider in a perfect position to provide care and coordinate care for this vulnerable population of long haulers.

<https://onlinelibrary.wiley.com/doi/10.1111/1468-0009.12505>