Long Covid lessons: beyond winter and the COVID pandemic

Paying attention to Long Covid lessons is key: Long Covid has already provided lessons for other long-term conditions and planning for future pandemics far beyond COVID-19

The UK, like many countries around the world, continues to face the long-term consequences of the pandemic. By December 2022, an estimated 1.9 million people were experiencing more than 12 weeks of symptoms after infection with SARS-CoV-2 (COVID), also known as Long COVID. Of these people, 1.2 million have had symptoms for at least one year and 594,000 for at least two years.

Direct COVID-19 hospitalisations and deaths were the principal concern of governments and health systems in the acute phase of the pandemic.

After several major delays, including due to staff sickness with Long Covid (among both study researchers and clinicians), the trial began in earnest in August 2022. Approximately 300 individuals with Long Covid have been recruited so far, with the ambitious aim of recruiting over 4500 people in the next 12 months. The trial is evaluating an investigation strategy with multi-organ MRI scanning (CoverscanTM), several drugs in a platform study (famotidine/loratidine, rivaroxaban and colchicine) and a digital rehabilitation programme (Living with Covid RecoveryTM).

“All study protocols are now in the public domain, whether our studies of patterns of Long Covid care, a Delphi study to inform integrated care or the trial itself, so that people can scrutinise what we are doing and why,” says Banerjee. Researchers have also developed a study to assess whether inequalities in referral rates from different populations (e.g. lower socioeconomic status or ethnic minorities) can be addressed using a “case-finding” intervention, by educating GPs and other health professionals regarding Long Covid. “Our team has already made important findings such as detectable clotting abnormalities and we will share more science, whether from our trial or non-trial studies, in coming months. Our work is relevant to other post-viral and other long-term conditions.”

Extra challenges over winter

Winter is already upon us in terms of weather and the NHS is already under strain due to chronic underfunding, under-staffing, under-prioritisation and the fall-out from Brexit. Moreover, every winter there are extra pressures on health services due to seasonal peaks of influenza, and this year, the cost-of-living crisis is an additional hurdle for the neediest in our society. That is before we look at the impact of the COVID pandemic, which has had three types of effects: direct, indirect and long-term.
Direct effects are directly due to the SARS-CoV-2 virus, leading to hospital admission, ITU admission and at worst, mortality. These effects can be greatly mitigated by increased vaccination rates, reduced infection rates and protection and timely treatment for vulnerable groups, such as those over the age of 70 years of age and those with chronic conditions, such as chronic kidney disease or diabetes. Indirect effects include the impact of the pandemic which is not directly due to COVID but results from either pressure on health systems, or changes in behaviour of health professionals or patients. For example, it is clear that rates of emergency and elective procedures dropped during the successive waves of the pandemic, and particularly the elective activity has taken time to return to pre-pandemic levels.

This not only contributes to backlogs which are increasing but may also create a situation where underlying conditions such as heart disease and lung disease are not diagnosed and treated as efficiently, leading to longer-term effects on health at the population level. Longer-term effects may be as a result of more chronic impact of direct and indirect effects, but the major burden is Long Covid. Over 200,000 people have died from the direct effects of COVID, but the indirect and long-term consequences will result in as much, if not far greater, disease burden and impact on individuals, populations, health systems and economies.

**Long Covid lessons and their relevance**

Albert Einstein is supposed to have said: “Insanity is doing the same thing over and over and expecting different results.” With the ongoing pandemic and these additional challenges to individuals and health systems over the coming winter and beyond, new ways of thinking are required.

Long Covid offers the opportunity for a system reset of research, practice and public health approaches to chronic diseases, pandemic preparedness and care delivery. Whether in terms of investigation strategies, ways of evaluating drugs, big data analyses using routine health records or methods to reduce inequalities, STIMULATE-ICP and other large-scale efforts to understand and better manage Long Covid can inform both science and care. Findings from Long Covid lessons may well have an application to the way we work in other disease areas.

**Concluding the lessons learnt from Long Covid**

Long Covid lessons and studies in the UK and around the world have implications for understanding and planning care delivery for long-term conditions far beyond the COVID-19 pandemic.

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