Long COVID, the post-acute sequelae of SARS-CoV-2 infection, is seen in growing numbers of people and has been highlighted as the only illness to be initially identified by individuals coming together on social media. Each reports a constellation of symptoms that vary between individuals, many of whom are at increased risk of developing a psychiatric disorder. While searches for causes, mechanisms, and treatments are underway, it is crucial that the patient narrative is understood across the healthcare environment, with urgent attention paid to supporting those with long COVID to manage and mitigate their symptoms, moving towards recovery. This poses challenges because symptoms vary between individuals, many of whom are at increased risk of developing a psychiatric disorder.

In addition, our existing fragmented health and care environment, focused on symptoms and specialities, is not suitable for managing long COVID, not least as the collection of symptomology is underpinned by feelings of fear, uncertainty, anxiety, and depression, especially when many patients identify that their ‘quest to be seen and cared for’ by healthcare practitioners has failed.

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Life & Times

Long COVID:

supporting people through the quagmire

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