BC ECHO for Post-COVID-19 Recovery

Session 3: Top 10 Challenges Faced by Family Practitioners in Caring for the Post-COVID Patient and How to Navigate Them

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Presenters

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And our additional panelists:
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• Dr. Jill Calder
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No disclosures/ conflicts of interest
Learning Objectives

The learner will:

• be able to leverage pre-existing knowledge and resources to care for post-COVID-19 patients
• know where to access tools and resources to facilitate more effective clinic visits
• understand the various presentations of typical post-COVID-19 patients
• have a better understanding of common post-COVID-19 symptoms and how to help their patients self-manage
Challenge #1

What is Post-Acute COVID-19 Syndrome?
What is Post-Acute COVID-19 Syndrome?

• No standard definition but common nomenclature includes:
  o LONG COVID
  o CHRONIC COVID
  o LONG HAUL COVID
  o Post-Acute Sequelae of SARS-CoV-2 infection (PASC)
  o POST-ACUTE COVID 19 SYNDROME
What is Post-Acute COVID-19 Syndrome?

- Typically will need to be symptomatic for >12 weeks
- The 4-12 week mark is still a but ambiguous, but reasonable to just refer to it as a subacute period
  - Unclear who will develop long-term symptoms
Challenge #2

The inability to give a prognosis
The inability to give a prognosis

- We are seeing a wide variety of patient phenotypes
  - Post-Hospitalization/ICU (PICS)
  - Non-hospitalized and very symptomatic (fatigue, brain fog, insomnia)
  - Asymptomatic
  - Mildly symptomatic (hospitalized and non-hospitalized)
    - Similar to protracted mono-type illness
The inability to give a prognosis

• Post-Hospitalization/ICU (PICS)
  o For this population, we are seeing recovery as expected in the PICS population
  o Many are still symptomatic at 3, 6, 12 months.
    • We do not know how to predict rate of recovery, but ICU delirium, length in ICU, sedation, etc.. are presumed risk factors
    • However, we are counselling that overall we are seeing improvement at each visit
  o There is a percentage of individuals at the 3 month mark who are asymptomatic
The inability to give a prognosis

• Non-hospitalized and very symptomatic
  o Often what we hear most about on news and what patients are most fearful of Post-Acute COVID-19 Syndrome
  o Still a novel disease and don’t know have good estimates for long-term outcome
  o What we know
    • If minimal symptoms at 3 months, unlikely to develop any new symptoms
    • If very high symptom burden at 3 months, very hard to predict outcome
    • If high symptom burden and slow improvement, likely to continue to improve
    • Estimates of symptoms at 12 weeks:
      – Likely ~15% of positive tests
      – When considering debilitating symptoms: 1.2% of 20 year old cases to 4.8% of 60 year old cases
Challenge # 3

There are no clear guidelines on how to investigate symptoms.
Investigating symptoms

- Given wide variety of presentations and symptoms, there are no guidelines.
  - Investigate as you would if COVID wasn’t diagnosed
  - Look for red flags
    - Pleurisy, signs of DVT, increased ICP
    - Hypoxia
  - Mental health screening
  - Fatigue: CBC, TSH, Ferritin, OSA testing
  - Palpitations: CBC, TSH, ECG, +/- Holter, orthostatic vitals
  - Brain fog/neuropsychiatric: Mental health screening
Investigating symptoms

- Notes
  - CXR: In non-hospitalized patients, almost never identify any abnormalities (unless incidental).
    - Can be useful for reassurance
  - CT Scans (NON-PE): similar as above. Changes being seen in hospitalized
  - PFTs: Not overly helpful for management (Decreased DLCO in hospitalized patients)
  - D-Dimers: approximately 50% of hospitalized patients have persistently positive D-dimers. Not being seen in outpatients, so can still be used as as rule-out test.
  - If liver enzymes still elevated after 3 months, look for other causes
Investigating symptoms

- Check out the Post-COVID-19 Recovery Care Pathway on Pathways for practical approaches to investigating symptoms and self management techniques
Challenge # 4

How can we support our patients in such short visits?
Supporting Patients in Short Visits

- Direct them to some resources prior to the appointment
- Validate and Normalize
- Therapeutic Listening
- Patient based initiatives
- Encourage use of symptom logs and trackers
- Use office staff for screening
- Focus on one symptom at a time. What are your top two concerns today?
Challenge # 5

How do we manage patient’s expectations?
Managing patients expectations

- Inform your patients that there is no “quick fix”
- Requires active participation and commitment to recovery
- COVID-19 Recovery is rooted in self-management
- Just because we don’t find anything “wrong” on labs or scans does not mean your symptoms are not real
- Recovery is not linear
  - There will be good days and bad days and setbacks
  - When you have a setback, go back to the basics of PLAN, PACE, PRIORITIZE
Challenge # 6

How can we support our patients who are struggling with mental health concerns when resources are limited?
Supporting patients with mental health concerns

• Approach mental health concerns the same way you would in your everyday practice
• Validate your patient
• Direct patients to resources
• We will be having an upcoming session in December specifically targeted towards mental health in the Post-COVID-19 population
Supporting patients with mental health concerns

**Assessment**
- Screen for mood disorders, anxiety disorders, substance use disorders, and PTSD
- Screen for ideation of homicide, self-harm, or suicide.

**Management**
- As best as possible, address other common physical symptoms of long-COVID that may contribute to mental health symptoms.
- Recommend pacing strategies (similar to those suggested for ME/CFS or post-concussion) as appropriate.
- If not meeting DSM5 criteria, offer reassurance and consider recommending nonpharmacological management such as meditation, exercise, referral to psychotherapy, and digital patient resources
- If meeting DSM5 criteria, manage per regular guidelines (including pharmacologic & non-pharmacologic treatments).
Pathways Demonstration
Supporting patients with mental health concerns

• Check out the Victoria Based CBT Skills Group
  o Open to all residents of BC
  o For patients with PHQ9 <18
  o 8 week program
  o Group medical visits
Web Resources for Mental Health

Anxiety Canada - COVID19: www.anxietycanada.com/covid-19/
Foundry (for Ages 12 - 24): www.foundrybc.ca/covid19/
Calm - Videos for meditation & relaxation: www.youtube.com/c/calm
PC-ICCN Mental Health in Post-COVID Recovery Fact Sheet

Support Groups
www.covidlonghaulcanada.com (Facebook support group)
www.wearebodyspolitik.com/covid19 (Resources and online support group)
www.longcovidcanada.ca (Resources and Support group)
Challenge #7
Where do we find resources for symptoms management?
Resources for symptom management?

Many resources that are available to patients online do not necessarily have to be COVID-specific. They can be used with patients presenting with a post-viral syndrome which can include prolonged symptoms such as persistent fatigue, poor sleep, cognitive dysfunction.
Review of Pathways Resources
Resources for symptom management

- Pathways
- PHSA PC-ICCN Website (symptom specific resources)
- VCH My Concussion Guide (excellent self-management guide)
- BC Women’s Living With Complex Chronic Disease
- ME/CFS: Pacing
- Sleep hygiene instructions
- Sleep hygiene (video)
- Your COVID Recovery (NHS)
- Loss of Smell Resources
- Long COVID Physio – www.longcovid.physio
Challenge #8

How do we support patients who did not have a positive COVID-19 test?
No Positive COVID-19 Test

• If we, as health care professionals, are skeptical of patients’ symptoms, this CAN increase their distress and hamper their recovery
• Some patients may not have been tested in their acute phase and serology is not always sensitive or readily available, and is costly to the patient
• Recognize that persistent symptoms after infectious illness is well-established
• Same self-management approaches apply here
Challenge # 9

When should we refer to the Post-COVID-19 Recovery Clinic and How?
When should we refer to the Post-COVID-19 Clinic?

- If your patient was ever hospitalized and you’re concerned about end organ damage or prolonged recovery
- Patients who have had more than 2 or more ED presentations following COVID diagnosis
- New evidence of end organ impairment
- Functional deterioration (i.e. inability to return to work/school) lasting >12 weeks
- Unexplained, persistent symptoms, thought to be related to COVID lasting >12 weeks
Post-COVID-19 Recovery Clinic Criteria

• Positive COVID-19 test (swab or serology)
  o The clinics will accept referrals for individuals who did not have access to a swab from January-May 2020
• The clinics are designed to see individuals no sooner than 3 months post symptom onset
  o If you patient was hospitalized, we will accept the referral and arrange the appointment for ~ 3 months
  o If your patient was managed in the community, please do not send a referral until 3 months post symptom onset, it will be declined.
• We have a new process!! Please complete the referral form and fax to Central Post-COVID Triage: 604-806-8809
Challenge # 10

What guidance should we be giving about returning to activities?
What guidance should we be giving about returning to activities?

- REST
- Patient-managed strategies
- Resources on energy envelope and pacing
- It does appear most patients get better, albeit slowly
What guidance should we be giving about returning to activities?

**FIGURE.** The “Stop. Rest. Pace” approach to safely manage physical and cognitive activities while recovering from long COVID.

*STOP* trying to push your limits. Overexertion may be detrimental to your recovery.

*REST* is your most important management strategy. Do not wait until you feel symptoms to rest.

*PACE* your daily physical and cognitive activities. This is a safe approach to navigate triggers of symptoms.

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Tools/Symptom Trackers

- Available on the Post-COVID Care & Recovery website: Tools for Managing Symptoms
- Scale of COVID-19 Symptoms
- Living in Your Energy Zone
  - Determining what you can do WITHOUT triggering your symptoms
## Living in Your Energy Zone

<table>
<thead>
<tr>
<th>Energy Demand</th>
<th>Physical</th>
<th>Chores/Work</th>
<th>Cognitive (Thinking)</th>
<th>Emotional/Social/Spiritual</th>
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<tbody>
<tr>
<td>10</td>
<td>Aerobic exercise: Step ups, Running, high resistance Exercise bike/Fast road bicycle, cross trainer, roller blades (per half hour)</td>
<td>Building, constructing, large surface painting (per hour)</td>
<td>Detailed calculations, accurate form-filling, major decision-making (per hour)</td>
<td>Socializing, large group, 6 people or greater (per half hour)</td>
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<td>9</td>
<td>Jogging in water, swimming, moderate effort bicycling (per half hour)</td>
<td>Work: Millwork, Forestry (per hour)</td>
<td>Reading a book or a report that is complex (per hour)</td>
<td>Anxiety/worrying-most of the day</td>
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<td>8</td>
<td>Rowing machine, Walking hills, jogging, canoeing (per half hour)</td>
<td>Planning Meals (per hour)</td>
<td>Answering emails (per hour)</td>
<td>Frustration/Anger (per episode/or per half hour)</td>
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<td>7</td>
<td>Driving a car on a routine route (per hour)</td>
<td>Lifting and carrying groceries or household items (per hour)</td>
<td>Attending appointments (per hour)</td>
<td>Attending church or religious services (per hour)</td>
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<td>6</td>
<td>Slow/light bicycling, moderate effort weight-lifting (per half hour)</td>
<td>Home repair-sawing wood (per hour)</td>
<td>Reading a book that is less complex (per hour)</td>
<td>Anxiety/worrying (per hour)</td>
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<td>5</td>
<td>Sexual activity of higher effort (per hour)</td>
<td>Home repair-washing fence, painting outside (per hour)</td>
<td>Tutoring children in studies (per hour)</td>
<td>Social media (per hour)</td>
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<td>4</td>
<td>Landscaping-planting trees (per hour)</td>
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*Note: Energy demand levels range from 1 to 10.*
### Post-COVID-19
Interdisciplinary Clinical Care Network

**DIARY OF ACTIVITIES**

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<th>DATE</th>
<th>Physical</th>
<th>Chores/Work</th>
<th>Cognitive (Thinking)</th>
<th>Emotional/Social/Spiritual</th>
<th>SUM OF DAY'S ACTIVITIES</th>
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Questions?