

A little about me

- Mum of 3
- · Portfolio GP
- Multiple roles
 - · Long COVID role
 - · Locum GP
 - · Urgent Care Centre GP
 - 111 GP
 - Medical member of Tribunals for Her Majesty Court and Tribunal Service
 - Employment Support Allowance, Personal Independence Payment, Disability Living Allowance, Universal Credit
- Practicing Catholic
- Pilgrim



COVID Categories - Nice Guidance

- Acute COVID-19
- Up to 4 weeks
- Ongoing symptomatic COVID-19
- 4 Weeks to 12 weeks
- Post COVID Syndrome
- · More than 12 weeks and no alternative diagnosis
- Symptom clusters
- Fluctuating

https://www.nice.org.uk/guidance/ng188/resources/covid19-rapid-guideline-managing-the-longterm-effects-of-covid19-pdf-51035515742

What is post-COVID syndrome

- · Definition
- Signs and symptoms that develop during or following an infection consistent with COVID-19 which continue for more than 12 weeks and are not explained by an alternative diagnosis. The condition usually presents with clusters of symptoms, often overlapping, which may change over time and can affect any system within the body. Many people with post-COVID syndrome can also experience generalised pain, fatigue, persisting high temperature and psychiatric problems.
- · NICE, Scottish Intercollegiate Guidelines Network, RCGP
- https://www.nice.org.uk/guidance/gid-ng10179/documents/final-scope

Symptoms

- Respiratory
- Breathless
- Cough
- Cardiovascular
- Chest tightness
- · Chest Pian Palpitations
- Generalised Symptoms
- Fatigue
- Fever
- · Pain

- Neurological
- Brain fog
- Headache
- Sleep issues
- · Peripheral neuropathy
- Dizziness
- Delirium\Mobility
- Visual disturbance

Musculoskeletal

- Joint pain
- Muscle pain

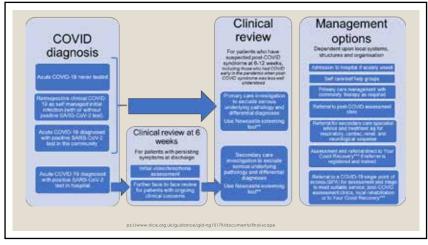
Symptoms Cont.d

- Gastrointestinal
- Abdominal pain Nausea/vomiting
- Diarrhoea
- Weight loss/reduced appetite
- ENT
- Tinnitus
- Earache Sore throat
- Dizziness
- Loss of smell/taste
- Nasal Congestion

- Dermatological
- Skin rashes
- Hair loss
- Psychological/Psychiatric
- Depression
- Anxiety
- PTSD

Less commonly reported in children and young people

- o shortness of breath
- o persistent cough
- pain on breathing
- palpitations
- variations in heart rate
- chest pain



Areas of Uncertainty

- Interventions possible to assist
- Variation among groups
- Cluster symptoms response
- Exercise interventions
- o Patient reported outcomes eg. Quality of Life
- Prevalence
 - Vaccination status
- Number of known infections

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Who may this effect

- Pilgrims
- Volunteers/Staff
- ∘You!

Areas of Inequality

- Age
- Disability
- Higher risk to COVID-19
- Pregnancy/Maternity
- Race
- Religion
- Gender
- Socioeconomic factors
- Mental Health comorbidities

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REACT- 2 Study - 24 June 2021

• Imperial college London

Over 2 million adults in England

3.5% increase each decade

Higher in:

- Women
- Overweight/obese
- Smokers
- Areas of deprivation
- Hospital admissions

Community – Prior to LC Clinic

- Blood tests
- Chest xray
- Sit to stand test
- Spirometry
- Consider alternative Diagnosis
- Referral to specialty
- Exercise tolerance
- Further imaging
- Appropriate further investigation or symptoms

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NICE Guidance

- Chest Xray at 12 weeks
- Continuing respiratory symptoms
- · Secondary Care Review
- 6 weeks post discharge
- Rule out other medical cause

Urgent referral

Low oxygen saturations

Desaturatung on exercise

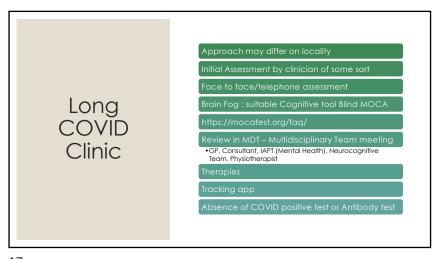
Signs of severe lung disease

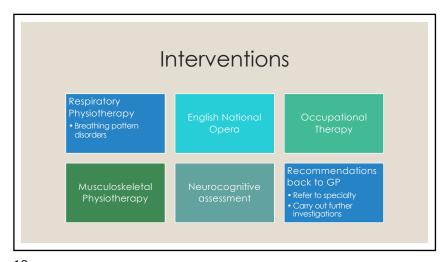
Chest pain sounding cardiac

Liaise with Patient GP

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Care Plan

Sharing of Information

Symptom diaries Impact on daily activities Ruchart nature Daily variation

Vital signs

Tracking app

Short term care packages (GP)

Patient intervention

• Your Covid Recovery

• https://www.vourcovidrecovery.nhs.uk/managing-the-effects/

• 16 interactive modules

• Video, power point, reading

• 4 stages

• Goal setting, Swallow, voice and communication, Nutrition, Sleep, Pain, Breathlessness, Cough Fatigue, Fear and anxiety, Mood and emotions, Memory and thinking, Getting moving again, Muscle weakness, Managing my day, Return to work

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Significant Comorbidities

- Heart disease
- Respiratory conditions
- Malignancy
- Mental Health
- Rheumatology
- Musculoskeletal
- Mobility restrictions

How this translates to Pilgrimage

- Pre pilgrimage
- Continuity of care/r if possible
- · Continuation of Symptom diary
- Whether vital signs are needed
- Mobility and aids
- Care plans
- Oxygen requirements
- How will they cope with travel

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Pre Pilgrimage

- Consider level of care for COVID at time of infection
- Community
- Hospitalised; 12 week CXR, review and consideration of investigation and rehabilitation
- ICU admission; MDT 4-6 weeks, 12 week review with Xray
- · Length of stay in hospital
- · How much rehabilitation needed
- What test/investigations/referrals were arranged
- Long COVID input

Pre Pilgramge Contd.

- Care considerations
- · On Pilgrimage what level of care, hospital vs hotel
- Personalised care
- What matters for you?
- https://www.personalisedcareinstitute.org.uk
- MDT and rehabilitation
- Supporting and enabling care
- Your COVID Recovery
- 20% digital platforms
- SMART goal setting, virtual groups for peer support
- Pharmacist
- · Medicine management
- Mental Health input
- · Memory enablement

During Pilgrimage

- Continuity of staff member/s
- Recognition of symptoms
- Daily Fluctuation of symptoms
- Exercises or continuation of rehab needed
- Assistance with accessing daily app'
- Be aware of Brain Fog
- Biggest challenge so far

Post pilgrimage

- Debrief with patient
- Sharing of information with GP/carers
- New symotoms/concerns
- deterioration
- Difficulties on pilgrimage
- o Daily diaries filled in Pilgrim/staff
- Your usual protocol

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Supporting NHS Staff

- Enhanced OH and wellbeing services for staff
- Mental health hubs
- Your COVID Recovery Website
- LC Clinics



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