

TRENDS TALK

Possible osteopathic care for long COVID

Unless you have been living under a rock the last few months you probably have heard about long COVID. Now a good question is, what can we, as osteopaths, mean for these patients? Our potential role has been explained nicely by Prof. Dawn Carnes in a presentation for the EFO back in April¹



Céline Van Ballart

Acute COVID-19

Signs and symptoms of COVID-19 for up to four weeks

Ongoing symptomatic COVID-19

Signs and symptoms of COVID-19 from four to twelve weeks

Long COVID

Signs and symptoms that develop during or after the infection consistent with COVID-19, continue for more than twelve weeks and are not explained by an alternative diagnosis

-Definition (NICE/SIGN/RCGP Guidance 2020)

Let's say we start with looking at some numbers. Studies indicate that approximately one out of ten patients who tested positive for COVID-19 are at risk for having symptoms for more than 12 weeks.² If we translate this to Belgium numbers, where we currently have a total of 1,036,499 confirmed cases, around 106,349 patients might (have) develop(ed) long COVID.³

But who are those patients at risk for acquiring long COVID? Age, higher BMI and being female are seen as potential risk factors for developing symptoms like fatigue, headache, dyspnea and anosmia.

As for the disease itself, the severity of the initial infection does not mean the patient is at a higher risk for having long lasting symptoms. On the other hand, patients with five or more symptoms during the first week are considered to be at higher risk to develop long COVID, even if these symptoms were mild.⁴ In kids and young adults we are also seeing a slightly higher risk for long COVID (12.9% in two to eleven year olds; 14.5% in twelve to sixteen year olds).⁵ The exact cause for patients to develop long lasting symptoms is not yet very clear, different theories are still under investigation. Some researchers believe that it is not the virus itself, but the continuing (auto-)immune response causing the problem. Others then believe

it is the virus itself, still being present, but in such low levels it does not show on the tests. Another group believes in post viral fatigue. Then there are those who blame it on organ impairment being worse after the illness than initially thought, on a different response based on e.g. biological sex differences, neurological changes.¹

Long COVID presents as a cluster of symptoms, often overlapping, which can fluctuate and change over time, and affect any system in the body. Some patients report periods of good health before relapsing. The symptom patterns are irregular. Studies describe approximately 205 different symptoms affecting at least ten different systems in the body.^{1,6}

The most common symptoms are persistent cough, low grade fever, and a disabling fatigue. Other possible symptoms can be shortness of breath, chest pain, headache, neurocognitive difficulties (brain fog), muscle pain and weakness, gastro-intestinal problems, skin rashes, and depression.

It will not come as a surprise that these symptoms can have a significant impact on the physical, psychological and sociological aspects in life. It can affect family life, relationships, the ability to take care of one's self or others, impact cognitive function (your thinking), and possibly lead to depression and anxiety.¹