

COVID matters

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The ongoing impact of COVID-19 in, and on, the workplaces of Australia

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Preparing for long COVID complexities in the workplace

While COVID-19 symptoms may fade relatively quickly for most, some people are suffering long-term effects. The time it takes to get well from COVID-19 is different for each person, and it can also depend on whether they have any other existing health conditions.

On Oct. 6, 2021, the World Health Organization (WHO) announced the first official definition of what constitutes ‘long COVID’.

Referring to it as “post COVID-19 condition,” the document says that long COVID “occurs in individuals with a history of probable or confirmed SARS-CoV-2 infection, usually 3 months from the onset of COVID-19, with symptoms that last for at least 2 months and cannot be explained by an alternative diagnosis.”

The definition further states that common symptoms may include fatigue, cognitive dysfunction, and several others that can impact daily functioning.

It’s difficult to accurately predict the long-term outcomes for people with long COVID as much is still unknown. People may experience symptoms for many weeks, months or even years.

Instances of long COVID are increasing and causing some employees to suffer from long-term side effects that impact them at work.

In this issue, we look at four interesting papers about long COVID, drawing out some of the research and information, and its workplace implications.

As always, if you have any questions or issues that we can support you with, please get in touch.

We tap into our medical and allied health expertise and capabilities to support our customers with COVID-related matters, while at the same time ensuring we keep our own valued workforce safe and supported. This gives us a holistic view of the issues and the supports that will best help.

We hope you enjoy this issue and find it a valuable resource for the challenges ahead. Have a relaxing Christmas and a safe and happy 2022.



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COVID Post-COVID-19 Symptom Burden: What is Long COVID and How Should We Manage It?

BY SYKES ET AL.

Lung Journal, February 2021

The findings in a nutshell

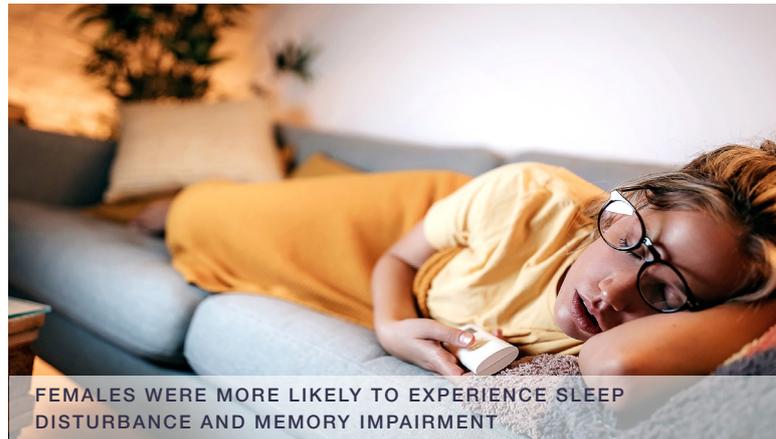
Patients who contracted COVID-19 pneumonia as part of the first wave of the pandemic and were treated in a large teaching hospital in England, were followed up for information in relation to ongoing symptoms via telehealth. 86% of patients reported at least one residual symptom at follow up, which was not necessarily correlated with the severity of acute COVID-19 infection. The findings encourage further review of biopsychosocial factors that may play a greater role in its presentation.

Overview of the paper

A total of 134 patients attended a routine follow up appointment approximately one and a half to four months after their admission to Hull Hospital with COVID-19. Of this group, all had radiological evidence of COVID-19 pneumonia, 87% required oxygen and/or respiratory support, 80% were treated in hospital wards and the other 20% were treated in intensive care. A clinical pathway was established, and patients were followed up based on their symptoms and referred on for further investigation/services, such as a chest x-ray or referral to a specialist.

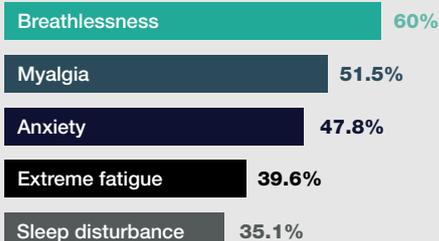
The most common side effect was breathlessness, followed by myalgia (muscle pain), anxiety, extreme fatigue and sleep disturbance. Females were more likely to experience anxiety, low mood, myalgia, sleep disturbance and memory impairment.

Long COVID presents very similarly to that of chronic fatigue syndrome (CFS), with some shared epidemiological markers such as increased prevalence in females and those with obesity.



FEMALES WERE MORE LIKELY TO EXPERIENCE SLEEP DISTURBANCE AND MEMORY IMPAIRMENT

MOST COMMON SIDE-EFFECTS EXPERIENCED



Implications for Australian workplaces

There may be further scope to review post long COVID diagnosis multi-faceted rehabilitation protocols likened to that of the CFS services in the UK and incorporate this into best practice return to work programs.

Increased COVID-19 claims may require insurers and employers to review what supports and procedures they have in place for managing those with long COVID. This may help pave the way for a more holistic approach to rehabilitation.

[SEE FULL ARTICLE](#)

COVID Attributes and predictors of long COVID

BY SUDRE ET AL

Nature Medicine, April 2021

The findings in a nutshell

Long COVID is having persistent symptoms lasting longer than at least 28 days following infection. Symptoms that are commonly persistent include fatigue, headache, shortness of breath, and loss of taste.

There is little evidence on the prevalence, risk factors and whether it is possible to predict who may be vulnerable to long COVID.

The researchers analysed the data from an App to track COVID-19 symptoms from positive individuals across the UK, US and Sweden. Results demonstrated that the strongest predictors of long COVID were increasing age and the number of symptoms in the first week.

Overview of the paper

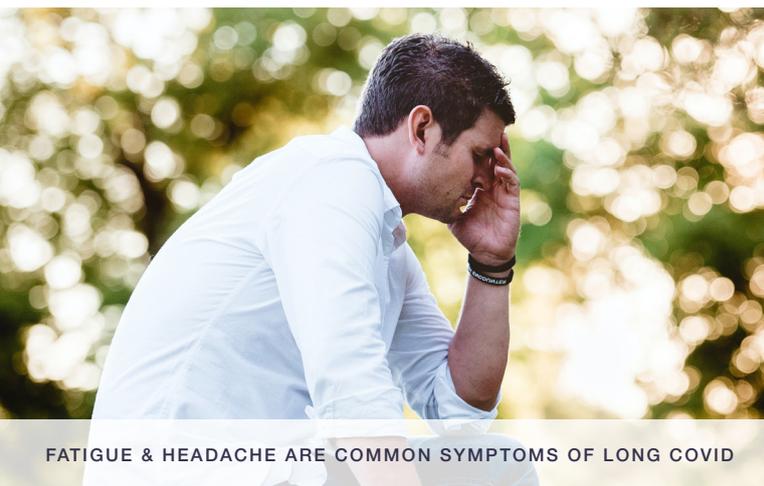
A small proportion of symptomatic COVID-19 patients have reported ongoing and persistent symptoms, the so-called "long COVID".

Individuals who tested positive to COVID-19 in the UK, US and Sweden were requested to use an App to track their daily symptoms. Throughout their symptoms, the individuals completed daily logs. The authors used the data to investigate whether they could predict individuals at risk of long COVID and what risk factors would make them susceptible.

The results identified two strong predictors of long COVID including increasing age, and the number of symptoms present in the first week of sickness. The symptoms in the first week described were fatigue, headache, shortness of breath, hoarse voice, and muscle aches. Using this model, clinicians could identify individuals who are at risk of long COVID and treat them appropriately.

Implications for Australian workplaces

These results can assist in the early identification of individuals who are at risk of long COVID. It could be useful to identify these individuals within your staff, patients, clients, or community and ensure they are prioritised in treatment or even trials to ensure their health in the long term.



FATIGUE & HEADACHE ARE COMMON SYMPTOMS OF LONG COVID

[SEE FULL ARTICLE](#)

COVID-19 rapid guideline – Managing the long-term effects of COVID-19

BY NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE (NICE).

NICE Guidelines, December 2020

The findings in a nutshell:

NICE developed rapid guidelines on identifying, assessment and managing the long-term effects of COVID-19, commonly known as “long COVID”. Long COVID refers to symptoms that persist longer than four weeks.

Education, identification and, timely referrals at the early stages of symptoms are recommended for clinicians to address. When managing patients with long COVID, a multidisciplinary rehabilitation approach is recommended. The rehabilitation plan includes physical, psychological, and psychiatric pathways. The main goal of rehabilitation is to return to life, involving a return to work in a phased approach.

Overview of the paper

The purpose of the guidelines is to guide clinicians in identifying, assessing, and managing the long-term effects of COVID-19. It was made clear that there is no clear treatment pathway or definition for the long-term effects of COVID-19 so, the guideline will continue to evolve as evidence becomes readily available.

The guidelines help treating practitioners to appropriately educate, identify symptoms and refer in line with their recommendations. Both self-management and self-supported management plans are recommended, in line with the severity of their symptoms. A multidisciplinary rehabilitation approach is required for patients presenting with ongoing and persistent symptoms of COVID-19. To ensure all areas of treatment are covered. The multidisciplinary approach should address the physical, neuropsychological, and psychiatric aspects of rehabilitation.

THE NICE GUIDELINES DEFINED LONG-TERM EFFECTS OF COVID-19 AS:

- Ongoing symptomatic COVID-19: signs and symptoms persisting for four to 12 weeks
- Post-COVID-19 syndrome: signs and symptoms of COVID-19 that continue greater than 12 weeks
- Long COVID is typically used to describe both of the above definitions.

Implications for Australian workplaces

Within the NICE Guidelines, it is clear a return to work is recommended, following long and persistent COVID-19 symptoms. There should be open communication between employers and their staff who have COVID-19. Ensuring the staff member feels supported is important. When the clinician certifies the staff member is fit for a return to work, the employers must develop a graded return to work plan. These plans are to be medically guided and adjusted accordingly, to ensure a safe and sustainable return to work.

[SEE FULL ARTICLE](#)

COVID Multidisciplinary outpatient rehabilitation of physical and neurological sequelae and persistent symptoms of COVID-19: a prospective, observational cohort study

BY **ALBU, S., ET AL.**

Disability and Rehabilitation, September 2021

The findings in a nutshell

Following a COVID-19 infection, most patients expect to make a recovery in weeks. However, there is growing evidence that some patients have persistent symptoms of fatigue, shortness of breath and cognitive impairment, months after infection.

The rapid development of Treatment Guidelines has occurred. This article's purpose is to evaluate the need for a multidisciplinary outpatient rehabilitation program to prevent or decrease the impact of long term COVID-19 symptoms.

After an 8-week rehabilitation program that involved; physical, cognitive, and respiratory rehabilitation protocols, the outcome demonstrated significant improvement in cognitive function. It also highlighted the need for specifically tailored multidisciplinary programs for post-COVID-19 patients.

Overview of the paper

An increasing body of evidence is identifying some patients post-COVID-19 will have ongoing and persistent symptoms. These symptoms include fatigue, shortness of breath (dyspnea), and cognitive impairments. Research demonstrates that most patients recover in a matter of weeks. However, there are approximately 15% of post-COVID-19 patients who experience symptoms for at least three months.

The rapid development of guidelines for treating long term COVID-19 symptoms has encouraged clinical screening of the patient and the development of a specifically tailored multidisciplinary program. General recommendations include interventions focusing on functional impairment, disability and return to life.

The authors of this article investigated COVID-19 patients with long-term symptoms and provided a rehabilitation program.

The researchers developed an 8-week program that included physical, cognitive and respiratory rehabilitation protocols. The results identified effective improvement in the patients' physical and respiratory measures, whilst there was also a significant improvement in the cognitive functions.

Implications for Australian workplaces

Over time COVID-19 will be better understood and treatment, vaccines and rehabilitation programs will continue to be optimised and improved.

With the current evidence we have on hand, we would suggest educating your staff, clients, or communities on the importance of post-COVID-19 rehabilitation. Having the awareness prior may assist with compliance to the rehabilitation program and prevent long term absences from the workplace.



[SEE FULL ARTICLE](#)

As we consider what COVID-19 might look like in 2022, it's important to remember the fight is not over, and the impacts of the virus will continue for some time. We are yet to see the long-term impact of long COVID, the ramifications of winter flare-ups, the possibility of more new variants, and the effect that COVID-19 will have in a post-pandemic workplace. Your challenges in managing the latest iteration of the pandemic are heavily influenced by your geography, the industry you are in and your interdependencies on other states and industries.

COMMON SIGNS AND SYMPTOMS THAT CAN CONTINUE AFTER PEOPLE FIRST BECOME INFECTED ARE:

- Tiredness
- Difficulty breathing
- Persistent cough
- Chest pain
- Joint pain
- Not enough energy to exercise
- Fever
- Headaches
- Memory problems and difficulty thinking clearly ('brain fog')
- Depression or anxiety.



Many long-term side effects from COVID-19 are still not known. Therefore, it is important that we do everything we can to protect us against COVID-19.

Long COVID workplace implications

Jo Broomhall explains what's next and available support

What are the challenges for our Australian workforce in 2022?

As vaccination rates rise and we see the relaxing of restrictions across Australia, employers and workers face challenges through returning to the office, vaccine requirements, increased travel and adapting to new work routines. Across our businesses customers are reaching out to us as the complexities of managing these challenges arise in the workforce, and the potential exposure risk increases as people begin to mix more at work and outside of the workplace. We are beginning to see clients referred to us for long COVID management, mental health support and claims management solutions.

How can businesses and individuals find help?

At MedHealth we have formed an expert panel of doctors and specialists across the country to provide opinions, advice and best practice guidance to workers, employers and claims managers. In addition to this, in partnership with Monash University we have developed a COVID specific rehab program which focuses on addressing the specific presenting barriers of an individual with long COVID. The program draws on the emerging evidence and literature and will be reviewed with Monash as more evidence about long COVID emerges from overseas and Australia.

STAYING ACROSS *what matters*

Our experts are engaging in regular reviews of journal articles and the latest research and thinking around COVID-19. This newsletter will come out regularly until a sharp focus on COVID is no longer as relevant. To ensure we cover the angles that matter most to you, please let us know your challenges in managing COVID-19 related change in your workforce.