

Press Release

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### **SAFE Glen Cove Coalition: Questions Raised About Long COVID-19**

Two years ago, the first wave of the COVID-19 pandemic hit the US with unprecedented intensity. Thanks to advances in diagnosis, treatment and vaccination, is unlikely to recur. A recent article in the New York Times discusses an overview of the pandemic and the recent research data collected that is helping to understand the breadth and scope of the virus. For scientists it is crucial to revisit and rethink what happened by examining data that was collected to try to better understand both the immediate and the long-term effects COVID-19 has on the body.

One crucial piece of information came from autopsy reports that demonstrated how the virus affects various organs in the body. Because so many deaths were due to respiratory failure researchers expected to find progressive pneumonia with lung destruction as the cause. However, researchers discovered something entirely different: blood clots in the lungs (also referred to as pulmonary emboli). Furthermore, they found countless additional smaller clots in many other organs as well. Researchers utilized the vast databases of the US Department of Veterans Affairs (VA) to examine more than 150,000 people who had survived COVID-19 infections and compared them with millions of people in the VA database who were similar in age, sex and other features but who did not develop COVID-19.

Importantly, they looked at overall health not just in the immediate aftermath of the infection, but an entire year after COVID-19. (The researchers estimated the "post-COVID year" timeframe among those not actually infected using statistical methods.) Investigators included COVID-19 survivors who were never hospitalized (131,612 people), in addition to those who recovered after staying in the intensive care unit (5,388 people) or regular hospital ward (16,760 people).

The results are clear and very significant: Compared with similar people who had not been infected with SARS-CoV-2, those who recovered from infection had many more blood clots, heart problems and strokes. The extent of the differences across the 20 different cardiovascular conditions. The data will assist those trying to understand Long COVID-19 and can help direct prevention and treatment decisions for those with active COVID-19 as well as those who survived the disease and will also contribute to an improved understanding of the very complicated phenomenon of clotting and anti-clotting that goes on in the body daily.

Researchers note that the VA study does have important limitations. It involves people infected in 2020 who are at least a year post-infection; these people likely had the initial "wild" strain of SARS-CoV-2 or perhaps the Alpha variant, which dominated in late 2020. Not enough time has passed to know if similar long-term dysfunctions of the blood vessels and heart also will occur among survivors of Delta or Omicron variant infections. And the study cannot predict the health impact of Covid-19 two and three and 10 years after recovery.

It is unknown how long the cardiovascular abnormalities will persist or if they will resolve at all. Advising this very large group of people who recovered from COVID-19 and may have lingering health issues is challenging. Should each find a cardiologist? A blood clotting specialist? Will long-term COVID-19 management become a new subspecialty similar to the not-so-long-ago emergence of the AIDS specialist?

Researchers maintain it is altogether uncertain what comes next, but the fact that almost 80 million Americans have been infected makes a cohesive plan for their health care a necessity. Experts will draw up basic guidelines to help patients know the best path forward. Though, once again similar to the field of AIDS medicine, much will be done by trial and error as some people will be followed too intensely and others not intensely enough. Over time, a crisp and simple "if this, then that" sensible approach will likely emerge. With an elevated risk of heart disease, stroke and blood clots as a possible long-term effect of COVID-19 -- conditions that can be chronic and slowly debilitating, hopefully this research will compel those unvaccinated to do so.

To learn more about the SAFE Glen Cove Coalition please follow us on [www.facebook.com/safeglencovecoalition](https://www.facebook.com/safeglencovecoalition) or visit SAFE's website to learn more about the COVID-19 Epidemic and its correlation to increased mental illness, alcohol and substance use in youth and adults and resources to cope please visit [www.safeglencove.org](http://www.safeglencove.org).