## **EDITORIAL**

## **COVID-19- Long term consequence**

Though majority of peoples with COVID-19 recover completely within a few weeks but significant portion continue to experience symptoms after initial recovery. The specific term is reserved for those patients who persist for more than four weeks after diagnosed as COVID-19, where normally People's recovers within 2-6 weeks average in 2-3 weeks. This conditions has various names, including-long COVID, post-COVID syndrome, post-acute COVID-19 syndrome, post-acute sequelae of SARS-CoV-2 infection" (PASC), long haulers and others. WHO's case definition is as follows: "Post COVID-19 condition 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 and that last for at least 2 months and cannot be explained by an alternative diagnosis", though few months before this was interpreted as persistent symptoms or complications beyond 4 weeks from the onset of symptoms. Elderly peoples and people having serious medical conditions such as diabetes, immunodeficiency disorders, cancers or chronic diseases are at the risk of developing post COVID complications. Early reports showed fatigue, dyspnea, chest pain, cognitive disturbances, arthralgia and decline in quality of life as common symptoms. "Post-COVID Conditions" is an umbrella term for this vast range of health consequences experienced by patients that are present for more than four weeks after SARS-CoV-2 infection, even multiorgan effects or autoimmune conditions over a longer time. A meta analysis showed 80% of COVID-19 patients developed one or more long-term symptoms. The five most common symptoms were fatigue (58%), headache (44%), attention disorder (27%), hair loss (25%), and dyspnea (24%), with more than 50 long term complications. Few people, usually children suffers from multisystem inflammatory syndrome (MIS) during or immediately after a COVID-19 infection. Other common symptoms are cognitive impairment 'brain fog', amnesia, sleep disorder, palpitations and sore throat. Less common symptoms such as runny nose, sneezing, hoarseness, ear pain and rare, but important outcomes, including thoughts of self-harm and suicide, seizures, and bladder incontinence, were only reported by the ongoing symptomatic COVID-19 studies.

Also hair loss, hearing loss and tremors were reported in post-COVID-19 syndrome. So existing evidence suggests that people with long COVID experience significant reductions in quality of life. Treatment of post COVID-19 are currently limited as there is insufficient understanding of the mechanisms that underpin long COVID. So, aspects of management is symptomatic treatment, physical rehabilitation, underlying co-morbidities, mental health support and social support. Recent and future researches on all aspects of COVID-19 will bring the solution of treatment in acute as well as in long term consequences of this ailment. In conclusion, more integrated care models for support and management of patients of long COVID-19 is needed to improve clinical outcomes.

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