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## **INFORMATION 10.08.2020. D.Carnes**

## Post COVID-19: Recovery and immunity

At a glance: more information on the BMJ website:

https://bestpractice.bmj.com/topics/en-gb/3000168/prognosis

## **Post-infection immunity**

Limited data available suggest that recovery from COVID-19 might confer immunity against reinfection. There are data to suggest that asymptomatic people may have a weaker immune response to infection; however, this is yet to be confirmed.

## Post COVID-19 Recovery

The course of the disease may be protracted, with ever-changing symptoms and periods of feeling better interspersed with periods of relapse in some patients (similar to a post-viral fatigue syndrome), even in those with mild disease.

Prolonged illness can also occur among young adults with no underlying comorbidities. In a survey study of symptomatic adults, 35% had not returned to their usual state of health 2 to 3 weeks after testing. Among those aged 18 to 34 years with no underlying chronic medical conditions, 20% had not returned to their usual state of health.

Nearly 90% of discharged patients who recover from COVID-19 reported persistence of at least one symptom 2 months later. Only 12.6% of patients had no related symptoms, 32% had one or two symptoms, and 55% had three or more symptoms. No patients had signs or symptoms of acute illness. The most common persistent symptoms were fatigue, dyspnea, arthralgia, and chest pain.

Patients who are discharged from hospital may have immediate and longer-term health needs including physical (e.g., pulmonary and cardiac rehabilitation, tracheostomy wounds, pressure ulcers, dysphagia, chronic cough, fatigue, neuropathy, muscular weakness, long-term risk of chronic respiratory disorders), psychological and neuropsychological (e.g., delirium, cognitive impairment, post-traumatic stress disorder, anxiety, depression), and social (e.g., impaired activities of daily living).