



# Caring for the Long COVID Patient

July 13, 2022

MIGRANT CLINICIANS NETWORK

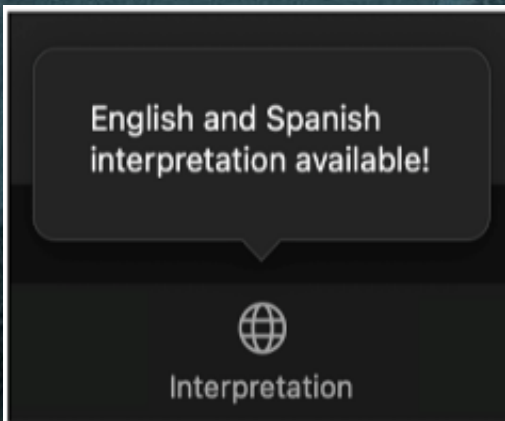
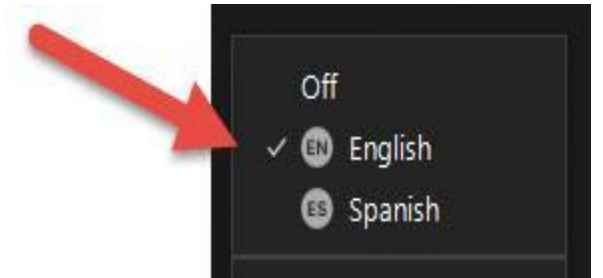


Laszlo Madaras, MD, MPH, Kaethe Weingarten, Ph.D, and Hannia Benitez  
Moderated by Amy K. Liebman, MPA, MA

## SIMULTANEOUS “INTERPRETATION” ZOOM

From your computer’s Zoom toolbar, click on the **Interpretation icon (globe icon)**. Select your desired language in the pop-up menu. This will be the language you hear during the presentation.

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## ***FUNCION DE “INTERPRETACION SIMULTANEA”***

*Desde su pantalla por computadora en la barra de herramientas, pulse en **el icono de Interpretación/que se ve como un mundo**, un menú aparecerá, seleccione el lenguaje en que quiere escuchar. Desde su teléfono pulse en más opciones y seleccione interpretación y elija el lenguaje que quiera escuchar.*

# Continuing Education

As an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation, MCN will offer nursing credit for this presentation. MCN has also received approval for continuing medical education credit by the American Academy of Family Physicians.



**In order to claim credit, attendees must submit the post session evaluation at the end of the presentation.**



## Conflict of Interest Disclosure

We have no real or perceived vested interests that relate to this presentation, nor do we have any relationships with pharmaceutical companies, biomedical device manufacturers and/or other corporations whose products or services are related to pertinent therapeutic areas.

## Declaración de ausencia de conflicto de interés

No tenemos interés alguno real o percibido relacionado con esta presentación, ni tenemos relación alguna con productos o compañías farmacéuticas, fabricantes de dispositivos biomédicos y/u otras corporaciones cuyos productos o servicios estén relacionados con áreas terapéuticas pertinentes.



MIGRANT CLINICIANS NETWORK



**A force for health justice**

**Somos una fuerza dedicada a  
la justicia en salud**

Our mission is to create practical solutions at the intersection of vulnerability, migration and health.

We envision a world based on health justice and equity, where migration is never an impediment to well-being.

# NRC-RIM and MCN

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The National Resource Center for Refugees, Immigrants, and Migrants (NRC-RIM) is funded by the U.S. Centers for Disease Control and Prevention and the International Organization for Migration to support state and local health departments working with refugee, immigrant, and migrant (RIM) communities that have been disproportionately affected by COVID -19.

Migrant Clinicians Network (MCN) is a partner of NRC-RIM.

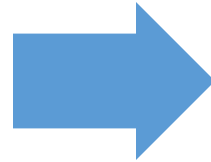






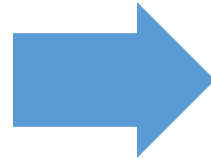
# What we knew then...and now

Early intubation



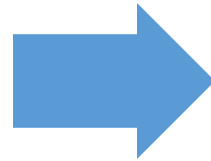
Avoid intubation

Early use of steroids



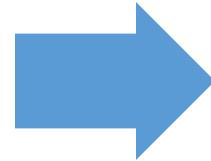
Steroids for hospitalized hypoxia

Happy hypoxics



Use O2 and BiPAP earlier

Convalescent Plasma use

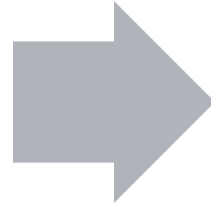


No longer using plasma



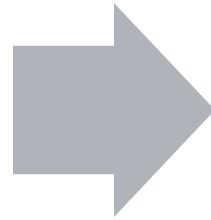
# What we knew then...and now

Vaccination to prevent covid cases



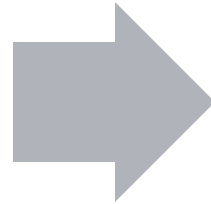
No prevention/less hospitalization and death

Respiratory

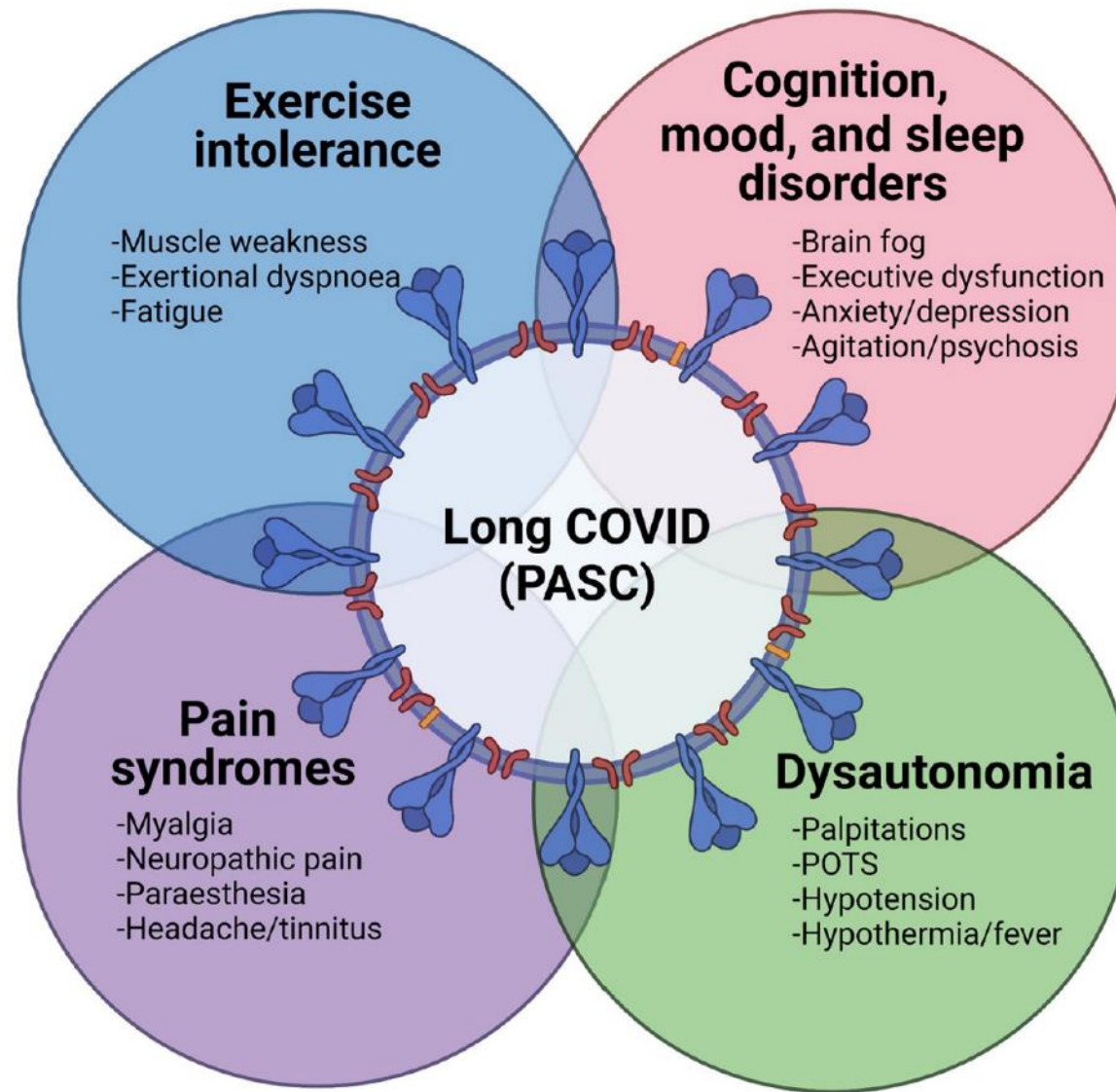


Respiratory, Gastrointestinal, Vascular

Covid-19 infection begin/end



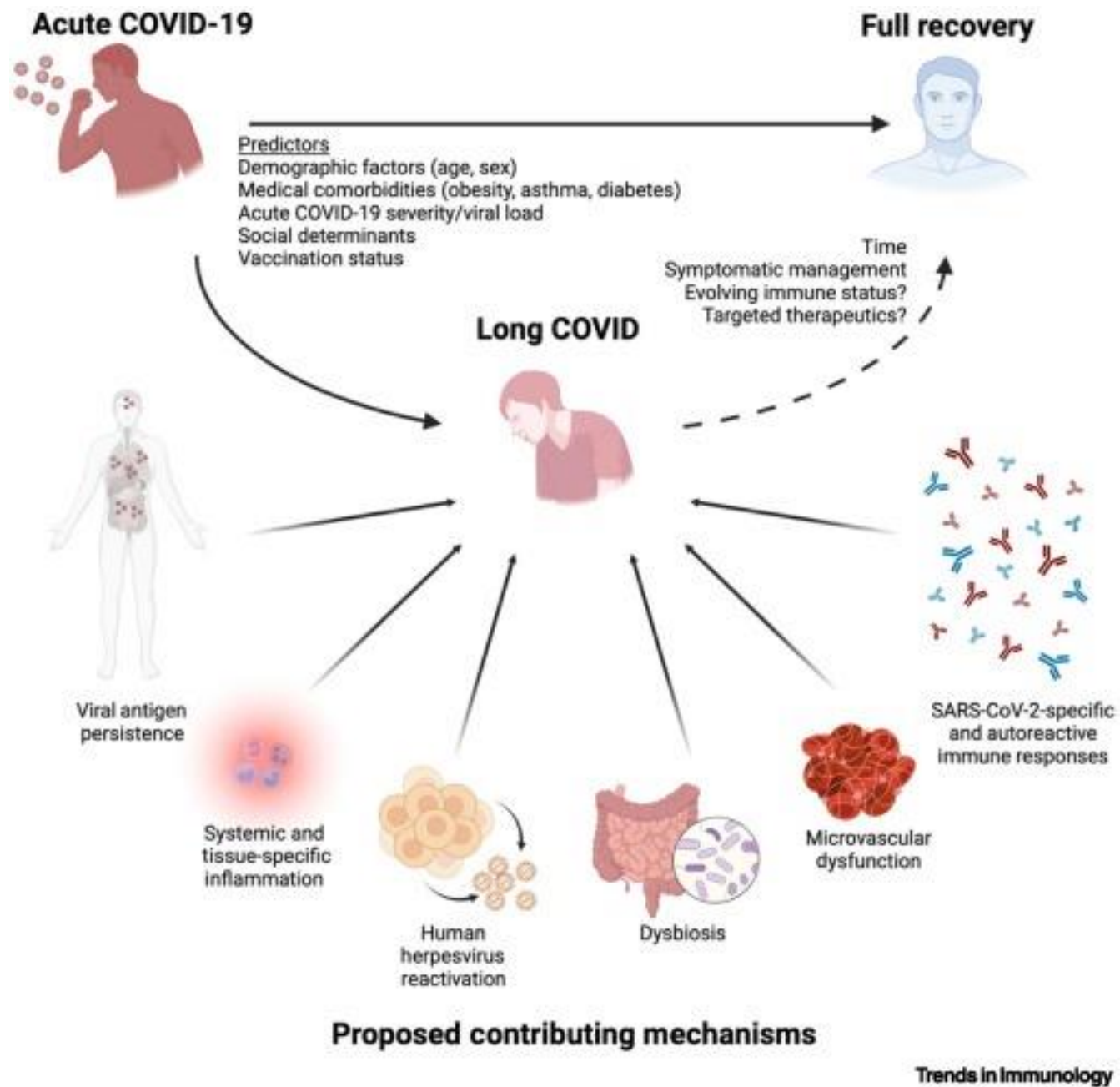
Long (haul) Covid



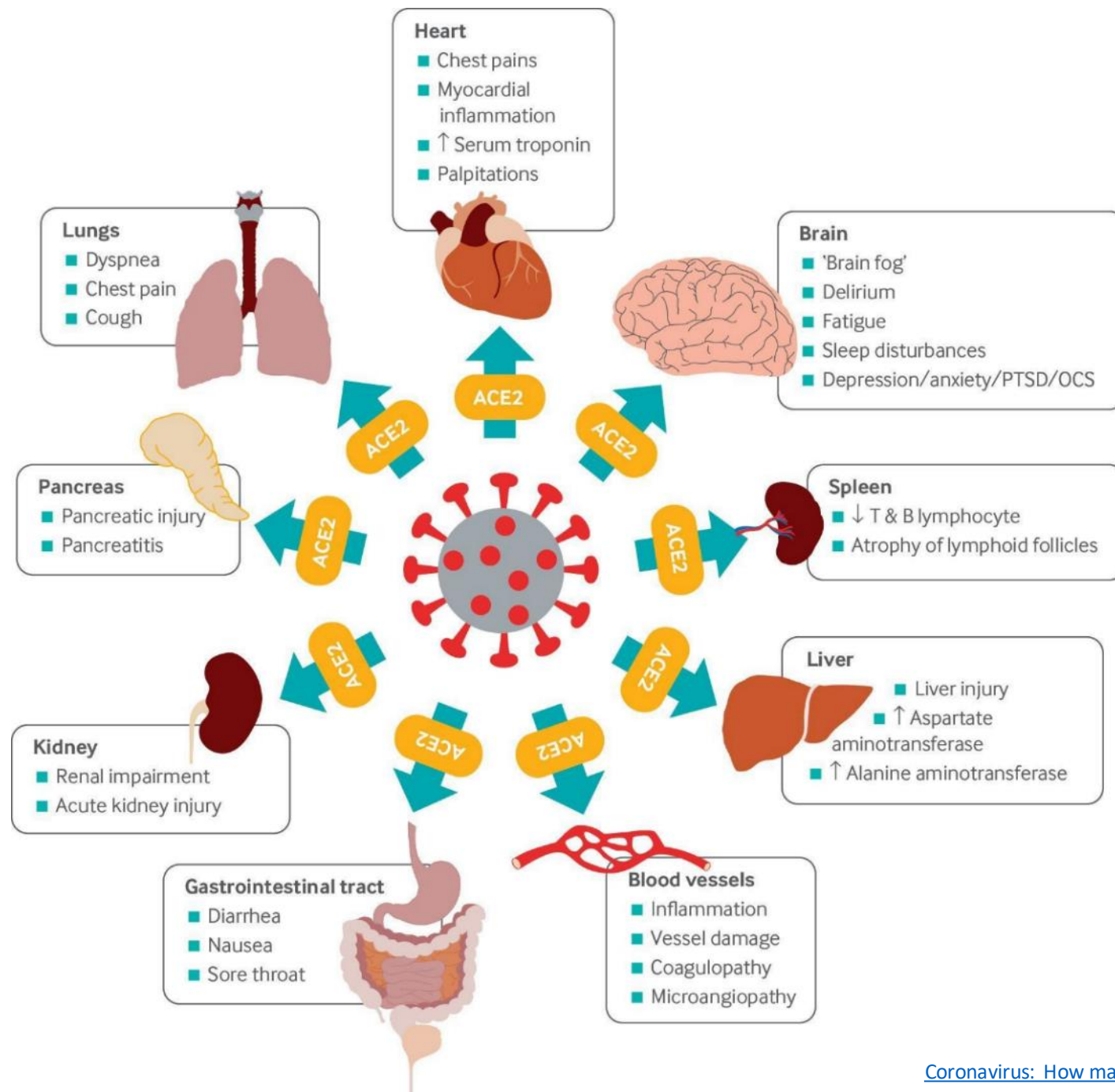
**FIGURE 3-1** Long COVID symptoms.

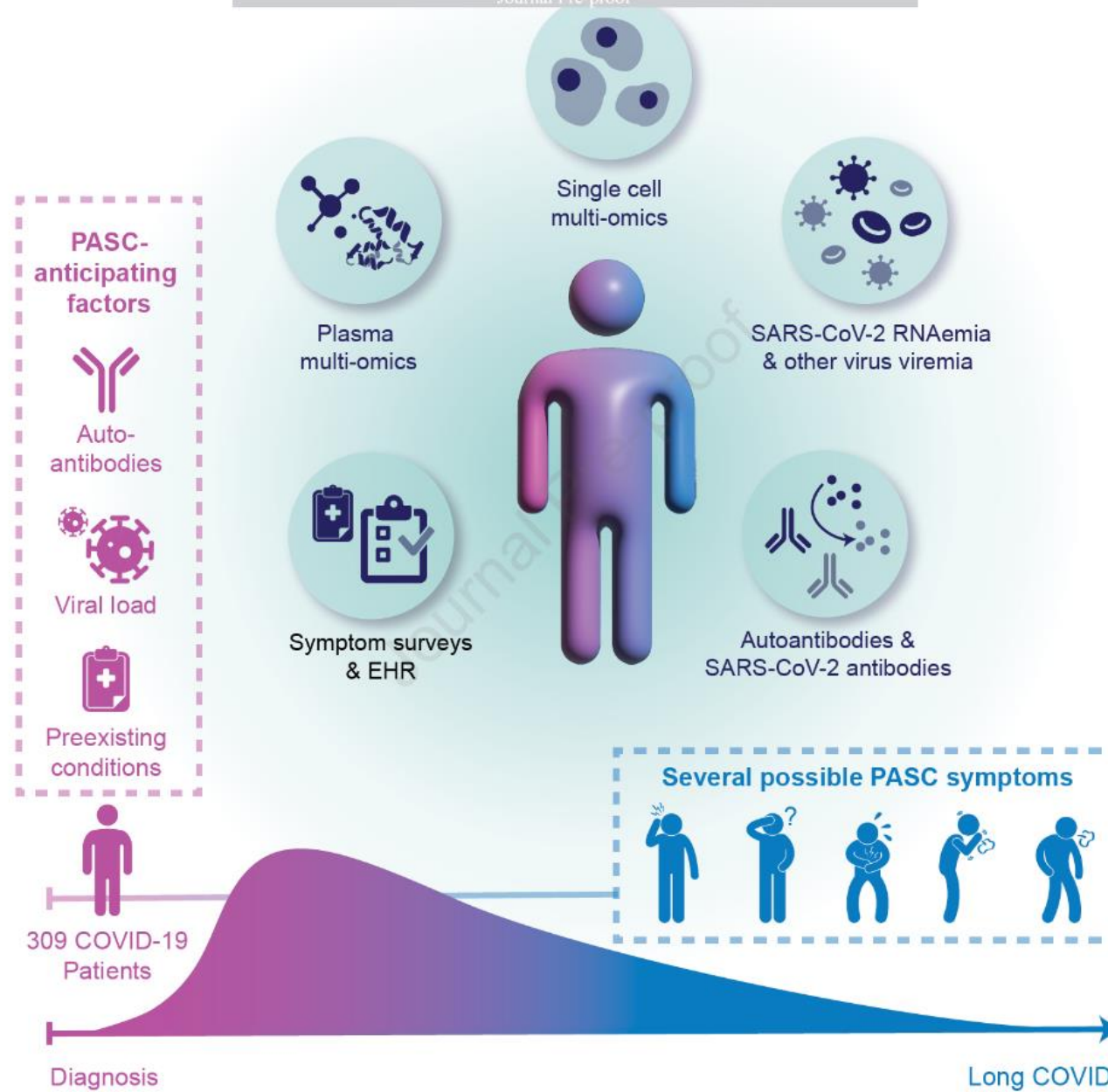
NOTE: POTS = postural orthostatic tachycardia syndrome.

SOURCE: Balcom et al., 2021, p. 3581, in Avi Nath presentation, March 21, 2022.





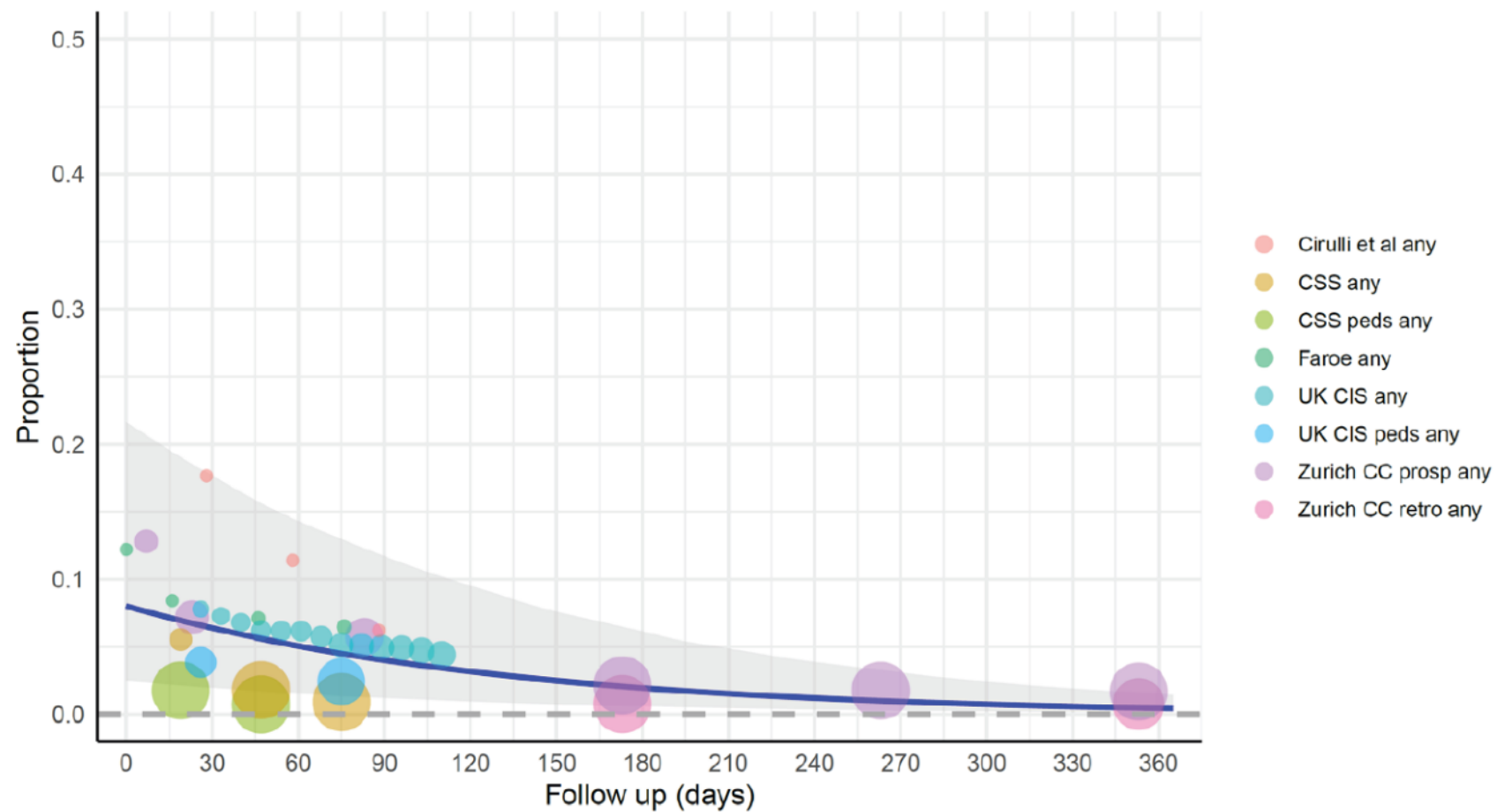




duration , mild/moderate COVID cases, all


median duration = 121.5 days from 3 months post-symptom onset

125.7 days from end of acute phase



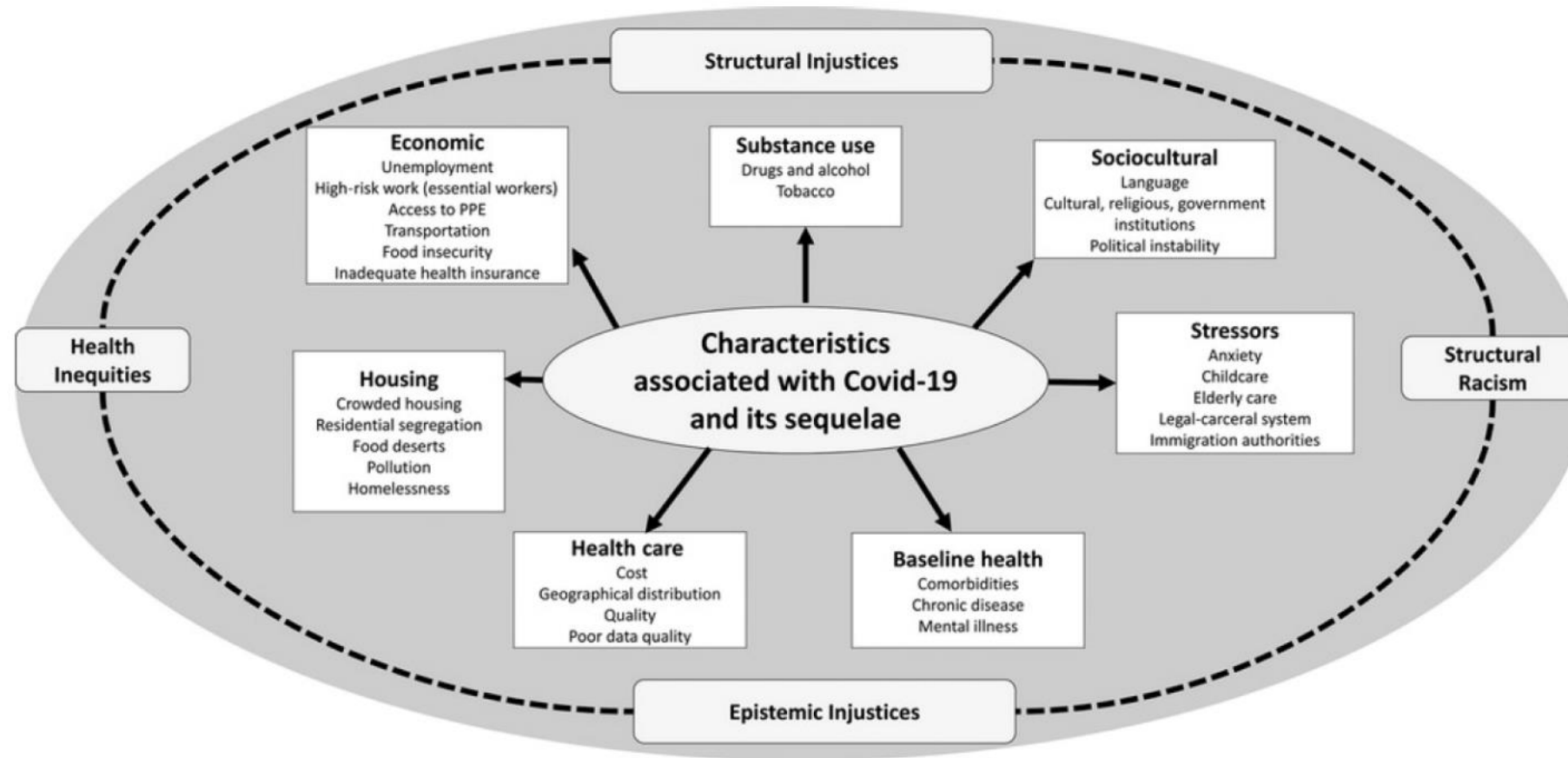
**FIGURE 2-4** Duration of Long COVID among community mild/moderate COVID cases.<sup>1</sup>





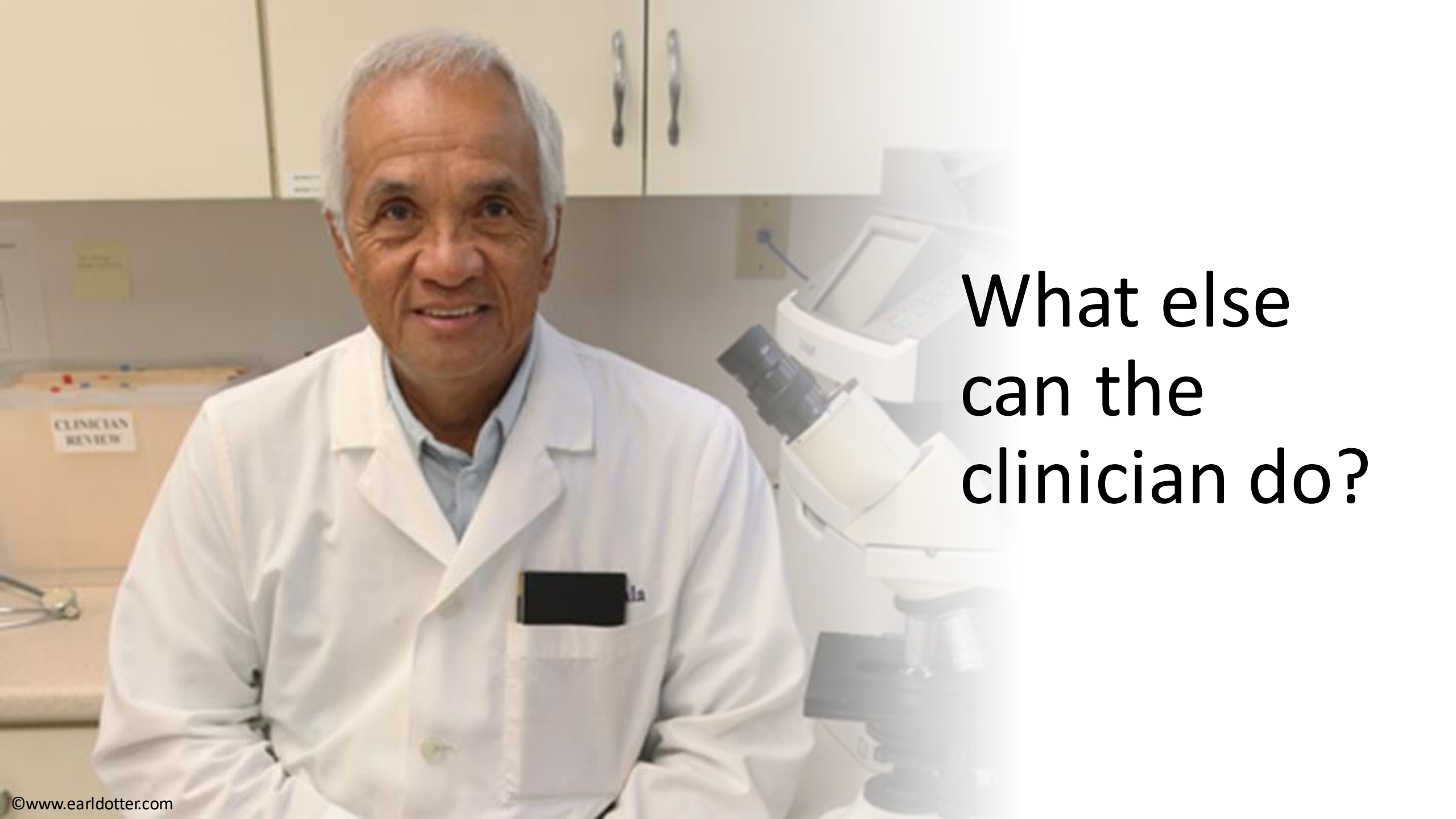
# What patients may experience...

- Acute covid is the first 3 weeks
- Post-acute covid is after 3 weeks
- Long covid is defined as beginning 3 months after acute infection
- There is no known endpoint
- Affects multiple organs
  - Lungs, persistent shortness of breath
  - Brain, headaches and brain fog, potential for stroke
  - Circulation, clots in the leg (DVT), lungs (pulmonary embolism)
  - Heart, myocarditis



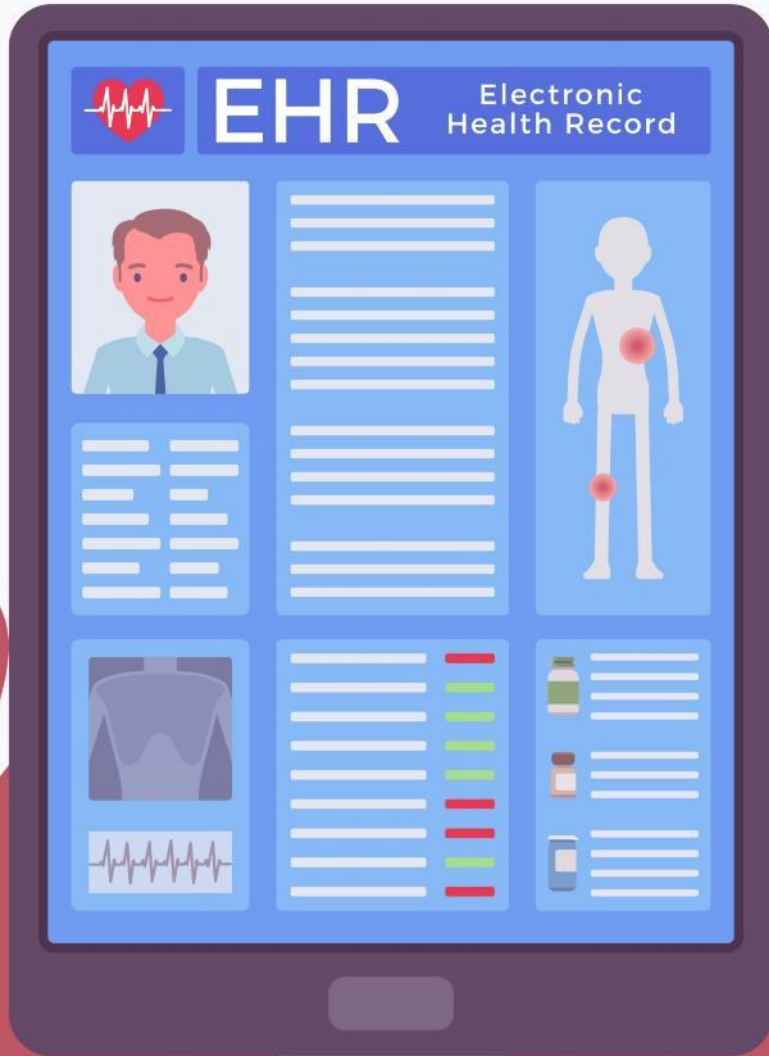
**FIGURE 6-3** Characteristics associated with COVID-19 and Long COVID.

SOURCE: Republished with permission of John Wiley & Sons, from Berger et al., 2021, p. 523, in Zackary Berger presentation, March 22, 2022.

A middle-aged man with grey hair, wearing a white lab coat over a light blue shirt, is smiling at the camera. He is standing in a clinical or laboratory setting. In the background, there are white cabinets, a wall with a power outlet, and a large, modern microscope. A sign on the wall to the left reads "CLINICIAN REVIEW".

What else  
can the  
clinician do?





# Chart Documentation Is Critical

- Thinking about the patient's future needs
- Is this work related?
- What documentation is needed to confirm a disability?

When is illness or injury work related?

Any injury or illness resulting from or sustained in the course of any occupation or employment.

More than 50% likely due to work

**USE THESE WORDS:**

- “More likely than not” due to work
- Work “most likely” cause of the condition
- “But for the work” the condition would not exist

# Worker Compensation

- Medical treatment for injured patient
  - Immediate
  - Long term
  - Access to Specialty Care
- Wages
- Return to Work
- Prevention - Hazard Control
- Public Health
  - Surveillance







We are going to look at the sequence of how Long Covid unfolds medically and then psychologically and interpersonally.

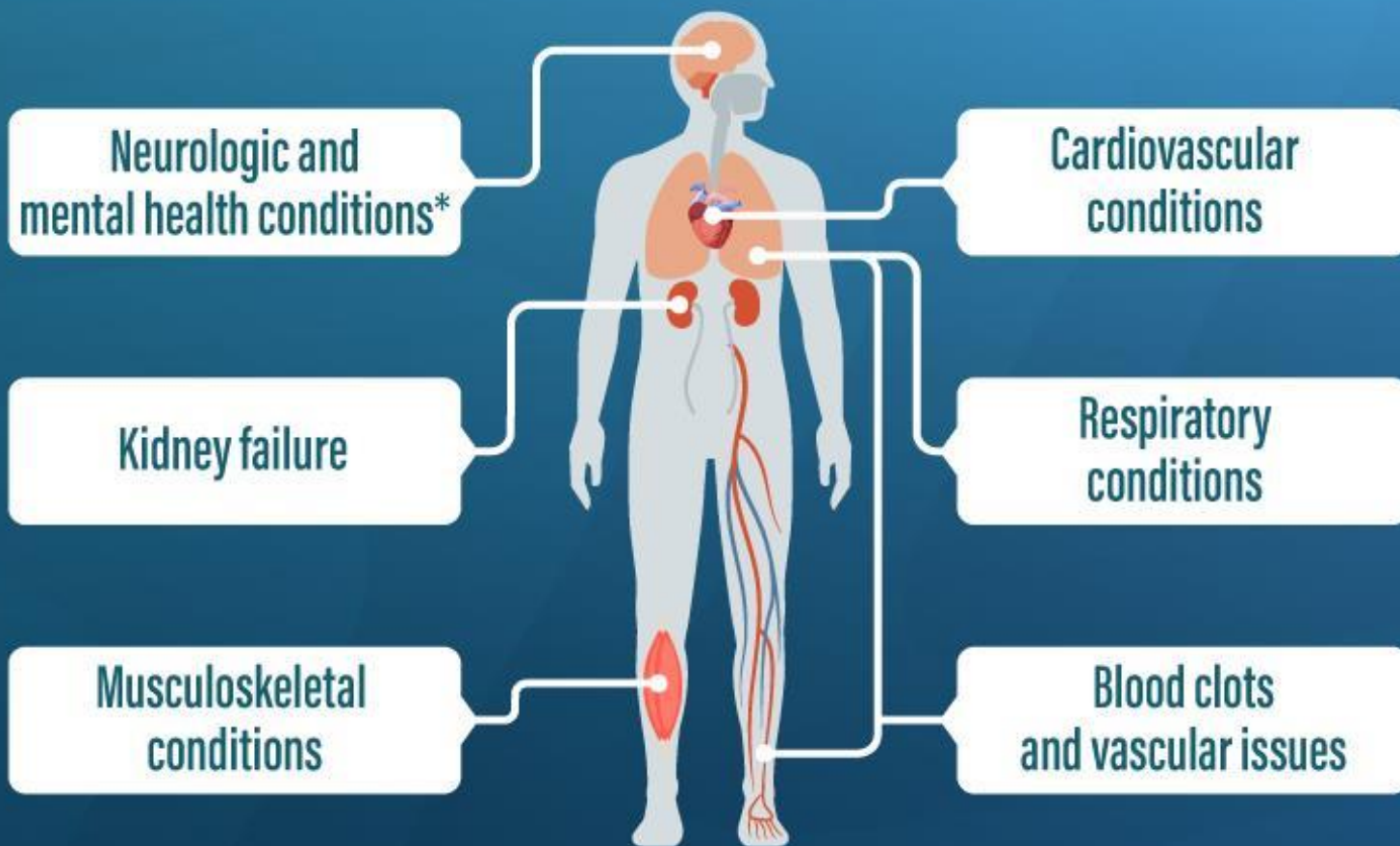


# The Long-Covid Scenario Unfolds

- ✓ Is the person truly sick and if so with what?
- ✓ Getting a Covid test: Where? PCR, Rapid. Finding them. Waiting for results
- ✓ What to do during the waiting time? Range: 15 mins to 48 hours
- ✓ If positive, can the person isolate? If an adult, decisions: ? go to work, ? tell employer, isolate, childcare/parental care,
- ✓ If child is positive: how do you isolate a child? Who takes care of the child?
- ✓ How to quickly learn what to do: monitor for serious illness, treat for comfort
- ✓ When to call PCP, when to go to urgent care, when to go to the ED
- ✓ What if the person has underlying medical issues? Which ones matter?
- ✓ Does the person qualify for a treatment?  
(<https://www.yalemedicine.org/news/covid-19-treatment-drugs>)
- ✓ Steps to get a treatment started within the first 5 days



Approximately  
**1 in 5 adults**  
ages 18+ have a  
health condition  
that might be related to  
their previous COVID-19  
illness, such as:



**Talk to your health care provider  
if you have symptoms after COVID-19**

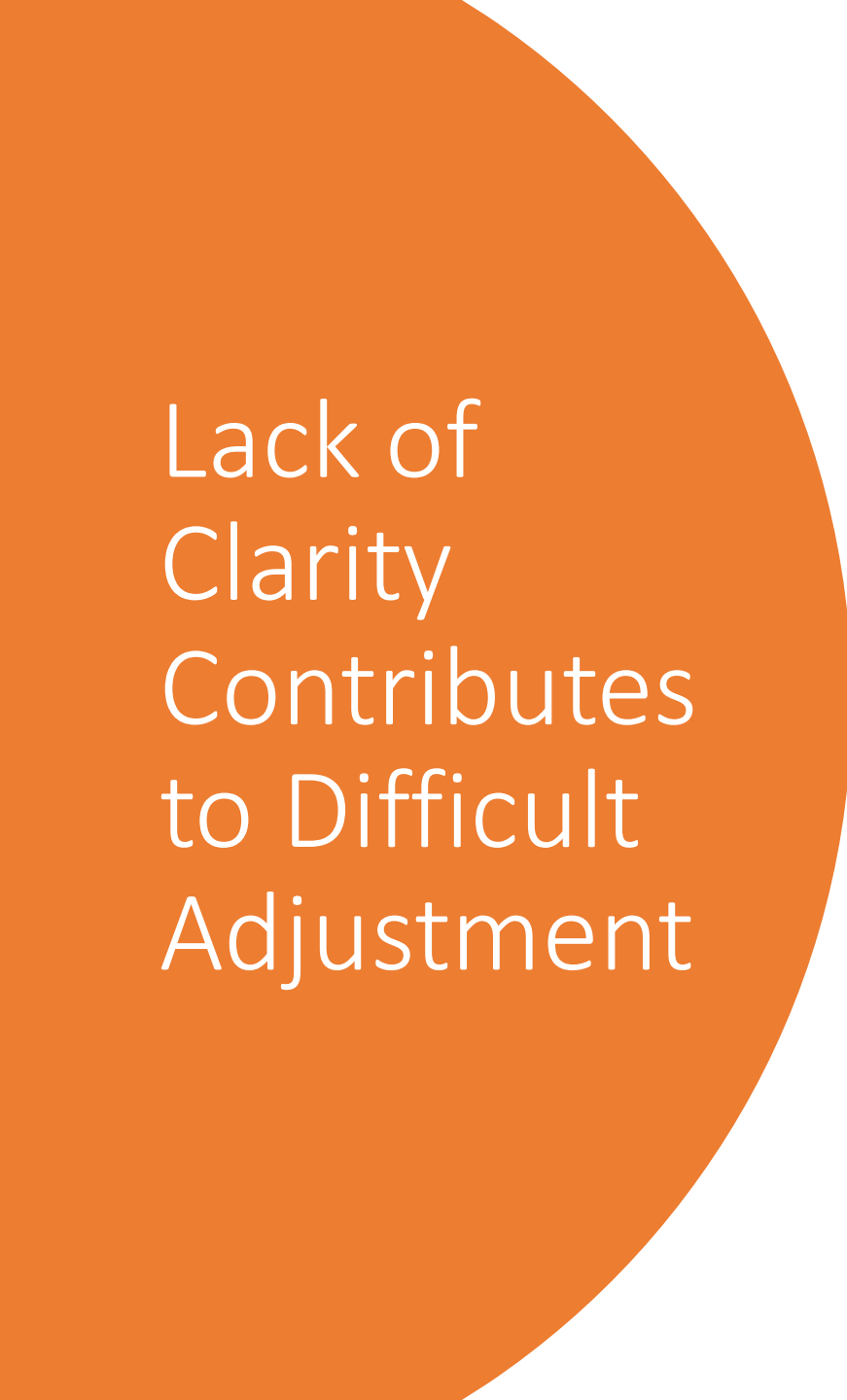


[bit.ly/MMWR7121](https://bit.ly/MMWR7121)

\* Adults aged 65 and older at increased risk

**MMWR**



A large orange circle on the left side of the slide, partially cut off by the edge.

## Lack of Clarity Contributes to Difficult Adjustment

No universal definition

Not many specialized services yet

Both health care workers and family members may greet a person's symptoms with skepticism or frustration due to no clear definitions and protocols established

Long wait times for service even if you live near a center

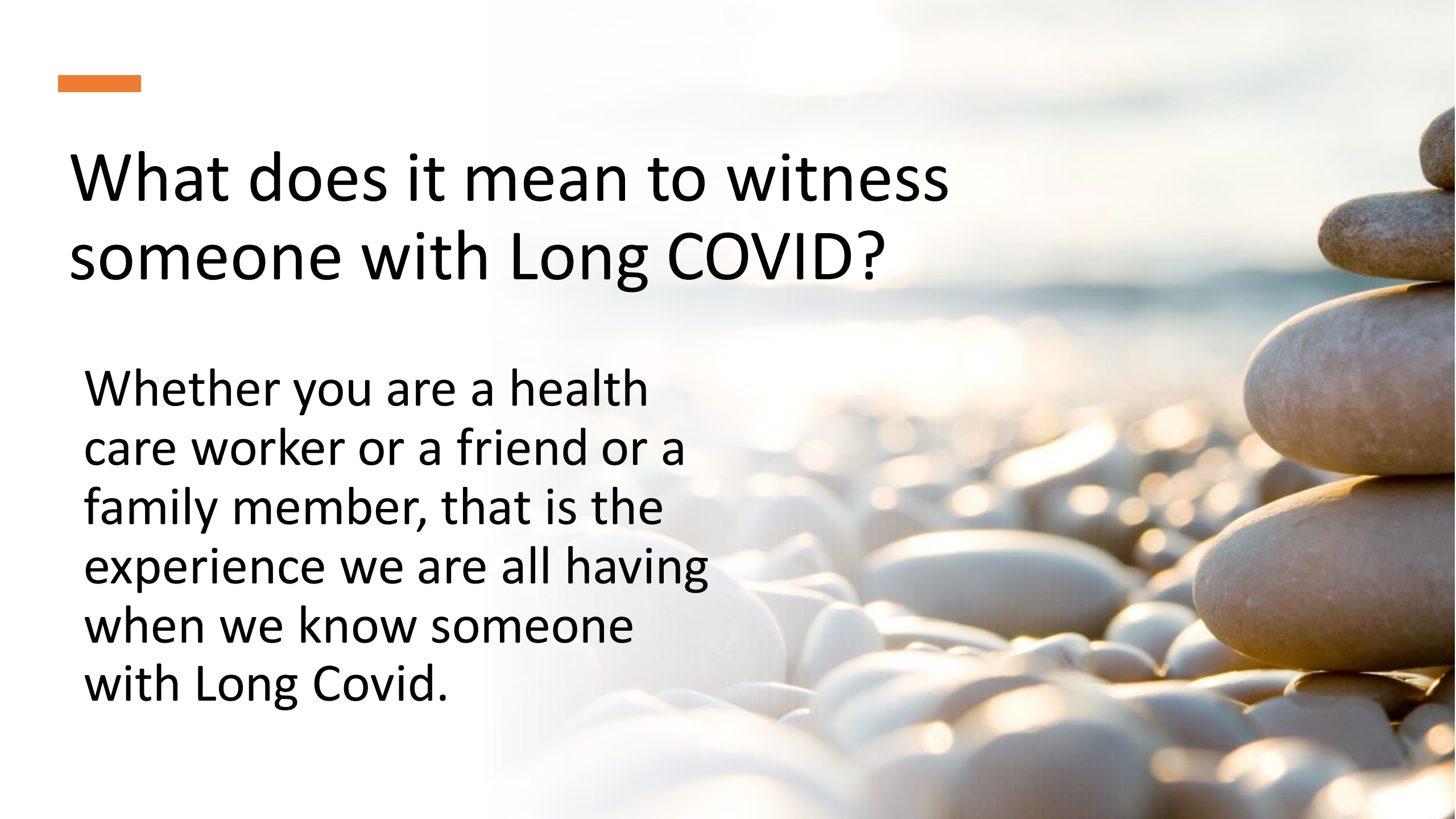
A series of four yellow curved dashes in the bottom right corner, forming a partial arc.

# Which family members can get COVID?

- Children
- Teens
- Adults
- Elders







# What does it mean to witness someone with Long COVID?

Whether you are a health care worker or a friend or a family member, that is the experience we are all having when we know someone with Long Covid.

# Witness Positions

	Aware	Unaware
Empowered	Attuned Thoughtful Helpful	Critical Hurtful Cruel
Disempowered	Confused Uncertain Inept	Withdrawn Passive Deny Opt out



# Caring for Someone with Covid- 19 or Long Covid?

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Medical course varies considerably

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They may have worries about work or family members or childcare or all of the above

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May feel mildly or very ill

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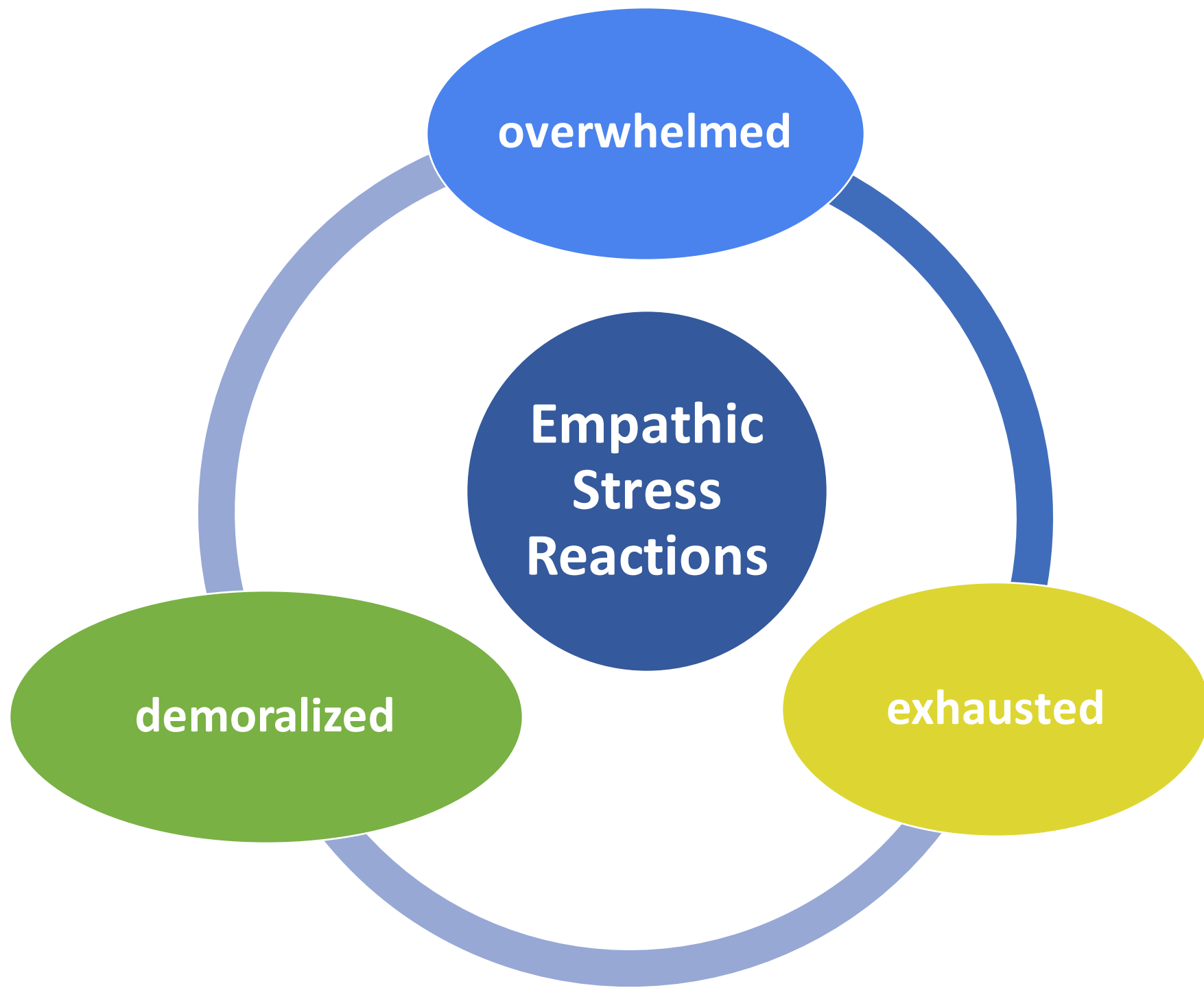
How to provide symptomatic relief?

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When to go to ED or the doctor?

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Does the person need to be hospitalized?





## In the ICU

If the person has been in the ICU, the patient AND the family members may develop post-traumatic stress syndrome (PTSD).

In the hospital; After the hospital; With Long Covid

I feel terrible! I'm not myself.      You should have; you shouldn't have.







# Mental Health Burden

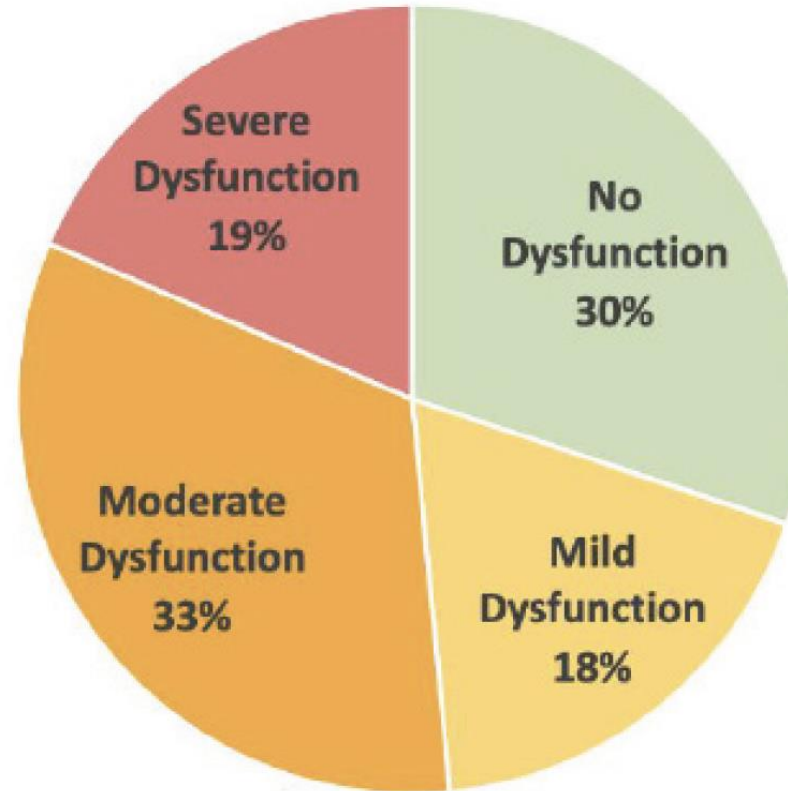
- sleep–wake disorders
- anxiety and fear-related disorders
- trauma- and stress-related disorders
- use of non-opioid and opioid analgesic drugs, antidepressant agents, sedatives and anti-anxiety medications.

Long Covid  
Symptoms as  
They Impact  
Family Life  
and Work  
Life

## Symptoms

- ✓ Brain Fog
- ✓ Fatigue
- ✓ Lack of Concentration
- ✓ Executive Functioning Decline
- ✓ Memory
- ✓ Difficulty Breathing
- ✓ Depression
- ✓ Anxiety





**FIGURE 5-2** Neuro QOL Cognitive Function scale scores among patients with post-acute COVID-19 infection.

SOURCE: Laura Tabacof presentation, March 22, 2022; unpublished data from the speaker.

# Self-Loss

People who live with a painful gap between who they have been and who they are now are living with self-loss.





# Ambiguous Loss

The person is there  
but they are not  
the person they  
used to be.



**SELF-  
LOSS**



**AMBIGUOUS  
LOSS**

**TWO SIDES OF A COIN**

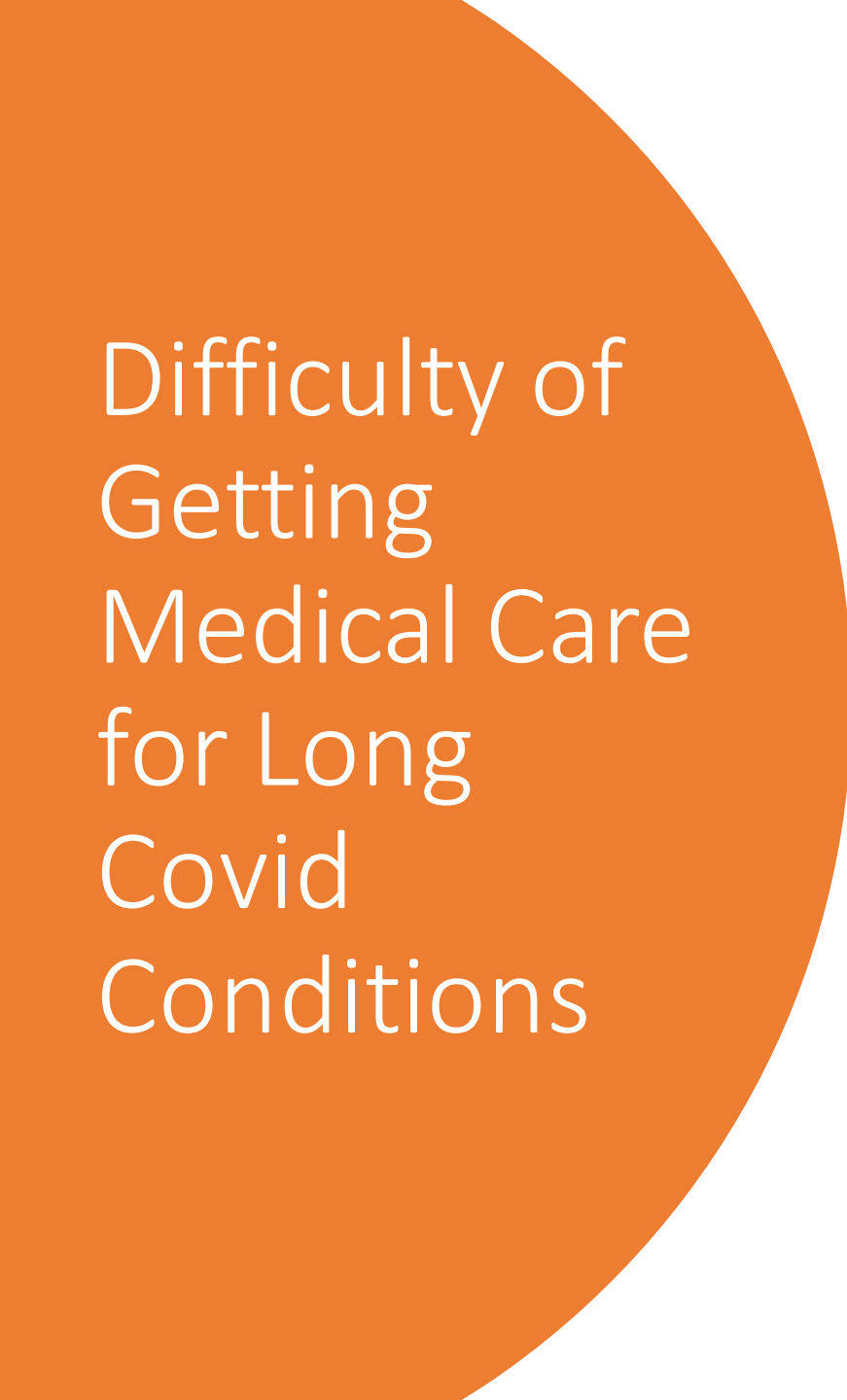


# Long-Term Questions

Will I be able to  
earn a living?

Will I be able to  
care for those who  
depend on me?





# Difficulty of Getting Medical Care for Long Covid Conditions

This requires a lot of work on the part of the patient or patient's family

Long Covid patients describe "Being a patient is a full-time job; being an advocate is overtime."

Anger, frustration, despair are added to the burdens





# What can we do?

Be a good listener

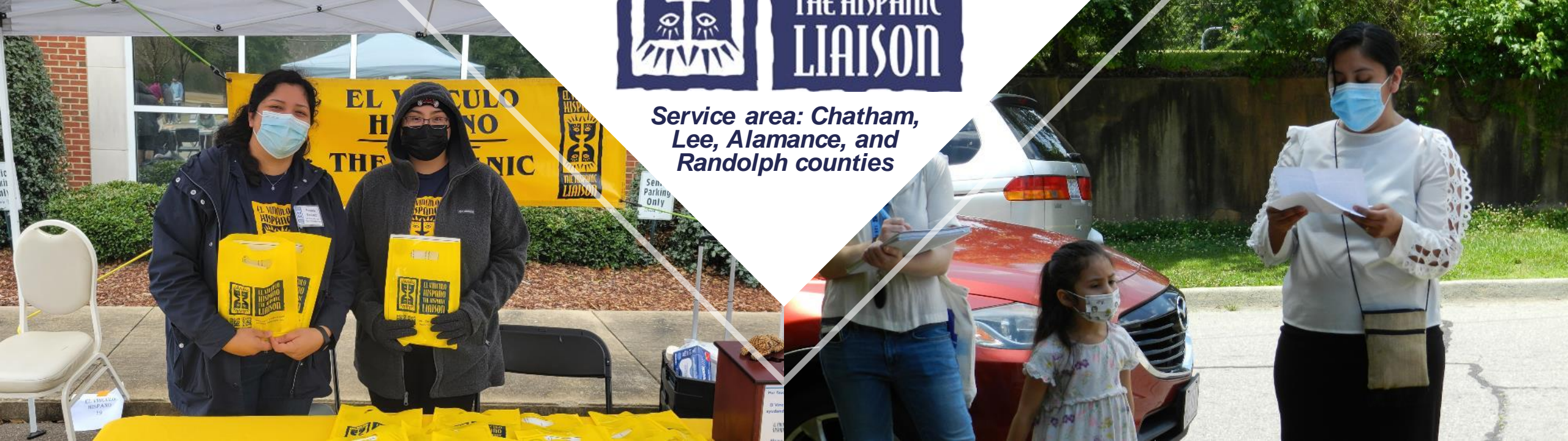
Make it a “we” not a “you” experience. “You are not alone. We are in this together.”

Be an advocate with the health care system

Remember that most people will get better



*Service area: Chatham,  
Lee, Alamance, and  
Randolph counties*





# OUR HISTORY

*El Vínculo Hispano | The Hispanic Liaison (EVH) was founded in 1995 by Latina immigrant to address the unmet needs of the growing Hispanic community in our region. EVH was one of the first Latino organizations to form in NC.*

*Over our 27 years, we have helped thousands of adults, youth and children adjust to life in the US, access the services they need, and affirm their rights. We also serve as a bridge between the Latino community and non-profits, local government and law enforcement agencies.*



## MISSION

*To foster intercultural understanding and empowering Hispanics to overcome the challenges they face and make their voices heard in the community.*

## VISION

*Community-centered and grounded in Hispanic culture.*

*We commit to being transparent and accountable to our community, volunteers, partners, donors, allies and supporters.*

## EQUITY

*We are committed to equity, diversity and inclusion.*

*We do not discriminate on the basis of race, color, national or ethnic origin, ancestry, age, religious beliefs, disability, sex, gender identity, or sexual orientation.*

# COMMUNITY SUPPORT & COVID-19 RESPONSE



**Individualized  
assistance**



**Problem Solving**



**Information & referrals**



**Non-partisan GOTV**



**Help to obtain important  
documents**



**Virtual immigration  
legal clinic**



**Community education &  
outreach**



**DACA scholarship  
fund**



# COVID-19 COMMUNITY RESPONSE



**Solidarity Fund**



**Vaccination & Testing Clinics**



**COVID-19 Information & Referrals**



**Lee County COVID-19 Collaborative**





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**Hannia Benitez, CHW**  
Deputy Director, Lee County  
The Hispanic Liason

# Thank you!

Please contact us if you have follow-up questions or need any of our resources. We are always happy to help!



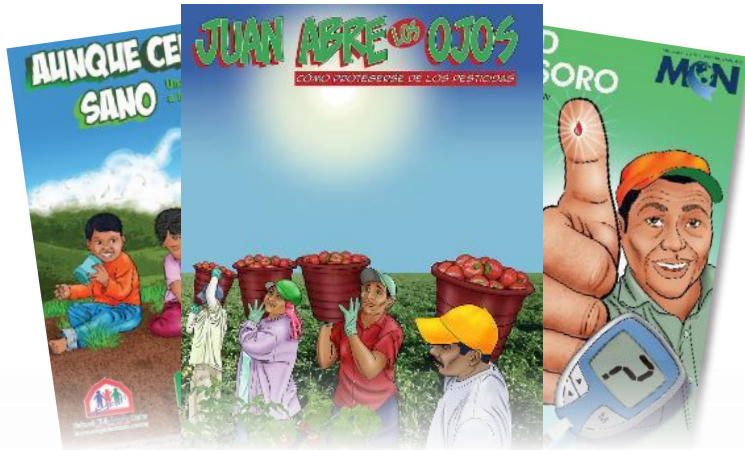
# Evaluation link and QR Code

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