

Management of post-COVID-19 conditions

Report in support of the management tools for post-COVID-19 conditions

Une production de l'Institut national
d'excellence en santé
et en services sociaux (INESSS)

SUMMARY

Management of post-COVID-19 conditions - Report in support of the management tools for post-COVID-19 conditions

Introduction

Some people who contract COVID-19 experience one or more symptoms that last for several weeks to several months after infection. Given the number of people who have contracted the virus and the still-active transmission of the infection, a significant number of people may be grappling with a post-COVID-19 condition. This could put an additional strain on Québec's health-care system.

The Ministère de la Santé et des Services sociaux (MSSS) asked the Institut national d'excellence en santé et en services sociaux (INESSS) to create, for front-line professionals, a tool to assist them in the clinical management of post-COVID-19 conditions. The first version of the tool was published in July 2021. This tool has been updated as knowledge has advanced. Also, four additional information sheets have been created on the following topics: post-exertional malaise and fatigue, neurological manifestations, cardiopulmonary manifestations, and altered smell and taste.

Methodology

Publications containing information, positions or clinical recommendations were systematically reviewed. Literature searches were conducted in several databases. A manual literature search was conducted as well. The bibliographies of the selected publications were scanned for additional items. Documents selection, methodological quality assessment and data extraction were done independently by two scientific professionals. The clinical recommendations developed stem from an evaluation of the information, positions and recommendations in the literature, the perspectives of stakeholders, and contextual information specific to Québec.

Results

Post-COVID-19 conditions encompass a wide range of physical and mental manifestations present at least 12 weeks after infection with SARS-CoV-2. The scientific evidence regarding the signs and symptoms, the epidemiological and etiological aspects, the risk factors for developing a post-COVID condition, diagnosis and treatment is limited. Furthermore, the clinical presentation of these conditions is very heterogeneous. In addition to the fact that they can affect more than one system, the clinical manifestations are variable and fluctuate over time.

There are currently no diagnostic criteria for post-COVID-19 conditions. Furthermore, no scale for measuring the signs and symptoms has been fully validated in this context, and there is no specific analysis or investigation for these conditions. Therefore, the assessment of the medical condition should be aimed at evaluating whether it is due to

complications or sequelae of the acute phase of COVID-19 or to an exacerbation or worsening of an existing comorbidity, and at ruling out conditions unrelated to COVID-19. Inquiring about post-exertional malaise during the history is also important, as it requires an adjustment to management that is outside the usual methods of clinical practice.

Furthermore, there is no specific treatment for post-COVID-19 conditions. Therapeutic management should therefore be symptom-based and tailored to the individual's needs. The goals of this management should be to reduce the frequency and severity of the clinical manifestations, to support their optimal management and that of energy, to promote a safe return to the individual's activities, and to refer them to specialized resources, if necessary.

Lastly, the type and frequency of the follow-up appointments should be based on the patient's status, and the follow-up should enable the clinician to evaluate changes in the signs and symptoms and to reassess the possible causes of the condition.

Conclusion

The creation of the tool and the additional information sheets on the management of post-COVID-19 conditions is based on clinical practice recommendations, which were supplemented with the perspectives of the different stakeholders and with contextual elements. While not a substitute for clinical judgment, the recommendations should contribute to the sound management of patients with post-COVID-19 conditions. Lastly, as knowledge on the subject evolves, we will be able to update and upgrade the information and recommendations proposed in this report, in the clinical management tool and on the additional information sheets.

*Institut national
d'excellence en santé
et en services sociaux*

Québec 

Siège social

2535, boulevard Laurier, 5^e étage
Québec (Québec) G1V 4M3
418 643-1339

Bureau de Montréal

2021, avenue Union, 12^e étage, bureau 1200
Montréal (Québec) H3A 2S9
514 873-2563

inesss.qc.ca

