

For the Patient

The full report is titled “Long COVID: A proposed hypothesis-driven model of viral persistence for the pathophysiology of the syndrome” by Danilo Buonsenso, Michele Piazza, Attilio L. Boner, and Joseph A. Bellanti. The report appears in the May–June 2022 volume 43, issue 3 of *Allergy Asthma Proceedings* (volume 43, pages 187–193).

For the Patient is provided to physicians so that the patients can better understand the language of modern medicine.

For the Patient is written by the editors (Bellanti, JA and Settignano, RA) and provided to practitioners so that patients can better understand the usefulness of new information resulting from medical research.

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The long COVID syndrome: A challenging burden for the patient

After infection with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the majority of patients generally show complete recovery within 3–4 weeks but as many as 30% continue to have symptoms and lingering effects for several months or longer, and develop medical complications of a condition called the long COVID syndrome. The disorder, which has been described in all age groups, but somewhat less in children, has a higher prevalence in women and is characterized by fatigue, shortness of breath, cough, and chest pain, and additional symptoms that include problems with thought processes, difficulty concentrating, forgetfulness, and depression, and symptoms that involve other organ systems, which include joint and muscle pain, rapid heartbeat, and fever. Although the precise cause of the condition is unknown, a recent report by Buoncuore from the Department of Woman and Child Health, in Rome, Italy, together with colleagues from other academic centers in Italy and the United States put forth a model based on the persistence of the SARS-CoV-2, which they propose triggers cells of the immune system to release products called cytokines that promote inflammation responsible for the symptoms of the condition.

Why Did the Researchers Do This Particular Study?

The authors conducted this research to review the problem at hand and to encourage research directed at the development of improved diagnostic and therapeutic procedures for the condition.

Who or What Was Studied?

The report was divided into three main sections: (1) the clinical aspects of the long COVID syndrome, (2) a hypothesis passed on virus persistence, and (3) a discussion of how a better understanding of the syndrome can lead to improved diagnostic and therapeutic applications.

How Was the Study Done?

The authors reviewed the published literature that describes clinical and immunologic host responses in acute COVID-19 infection and the long COVID syndrome, together with their own clinical and research expertise.

What Were the Limitations of the Study?

Although the authors put forth a reasonable model based on published reports that support their hypothesis, more research will be required to fill in the knowledge gaps that currently exist.

What Are the Implications of the Study?

The long COVID syndrome is an umbrella term for physical and mental health consequences that are present for 4 or more weeks after SARS-CoV-2 infection experienced by some patients. Although an understanding of the condition remains incomplete, guidance for health-care professionals and patients will likely change over time as new evidence evolves. Patients are encouraged by the U.S. Centers for Disease Control and Prevention to set achievable goals through shared decision-making and to approach treatment by focusing on specific symptoms and to develop a comprehensive management plan that focuses on improving physical, mental, and social well-being. □