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Signature:

Mahitha Murali

Date

Long Term Health and Economic Impacts Faced By COVID-19 Patients After Discharge from
Inpatient Health Care Facilities

By

MAHITHA MURALI

Master of Public Health
Hubert Department of Global Health
Rollins School of Public Health
Emory University

Dr. Mohammed Ali, MD, MSc, MBA
Committee Chair
Department of Global Health
Rollins School of Public Health

Dr. Miranda Moore, PhD
Committee Member
Emory University School of Medicine
Emory University

Dr. James O'Keefe, MD
Committee Member
Emory University School of Medicine
Emory University

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Committee Member

An abstract submitted to the Faculty of the Hubert Department of Global Health
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Abstract

The coronavirus disease 2019 (COVID-19) pandemic has resulted in long-term symptoms experienced by patients several months post discharge from their initial hospitalization for COVID-19 treatment. The prevalence and risk factors for persistent symptoms as well as patients' costs of care are not fully known for patients who experienced COVID-related inpatient care. The goal of the research is to gather new information to improve long-term patient care for patients who have had a COVID-19 diagnosis and have been admitted to an inpatient facility in Atlanta, Georgia more than 6 months ago, and to understand the long-term consequences faced by these patients. Participants discharged from Emory University Hospitals for COVID-19 were contacted to complete a self-administered survey about long-term symptoms, hospitalization, costs of care, and their quality of life >6months post discharge. Bivariate and multivariable analyses were performed to evaluate associations between participant demographics and persistent symptoms. Two hundred and ten participants provided responses to the survey, of which 91 patients (36.99%) had reported experiencing at least 1 persistent symptom, a median of 10 months post-discharge, and 155 individuals (63.01%) did not have ongoing symptoms. The median age was 54 (range 21-95), and 110 (52.38%) participants were Black. The median length of stay was 5 days (mean=9.86, range=0,100) for their hospitalization. For overall health at present compared to before covid, 111 participants (46.44%) reported feeling about the same, whereas 27.2% mentioned that their thinking and memory are worse after COVID-19, which did not vary by presence of "long" COVID-19. Common symptoms associated with reports of worse physical health included fatigue (n= 48, 53.33%) and shortness of breath with activity (n=46, 51.1%). Following those symptoms, joint pain (n= 32, 35.56%), muscle aches (n= 29, 32.22%), weakness (n= 28, 31.11%), and back pain (n= 23, 25.56%) were most prevalent in the study population. In this cohort study of COVID-19–related long-term symptoms, physical and psychosocial symptoms highlighted the impacts on complete recovery months after diagnosis. Early identification of these symptoms could help prepare patients for long-term symptoms several months post discharge after being hospitalized for COVID-19.

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