

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



МАТЕРІАЛИ

**104-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького персоналу
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ
06, 08, 13 лютого 2023 року**

Конференція внесена до Реєстру заходів безперервного професійного розвитку,
які проводитимуться у 2023 році №5500074

Чернівці – 2023

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LONG COVID AND ITS FREQUENCY
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Introduction. Coronavirus disease is dangerous not only in its severe course, the rapid increase in morbidity among the population, the emergence of new strains, but also in its consequences. Long COVID-signs and symptoms that occur after coronavirus disease cannot be explained by any diagnosis. This condition can last for 12 weeks or longer after recovery. The problem remains large-scale and has been repeatedly discussed at the WHO meetings. Therefore, the problem of long COVID and its impact on life quality is quite relevant both now and in the future.

The aim of the study was to investigate the frequency and nature of subsequent changes in patients with COVID-19. Further follow-up of such patients may prevent the development of severer complications.

Material and methods. The study selected patients who had COVID-19, moderate - severe. Age group for the study 25 - 45 years, without concomitant pathology, as these are able-bodied people and their state of health has a direct impact on their future ability to work. A total of 50 people took part in the study. All patients who had recovered continued to be monitored by their family physician during 3-6 months after the recovery and a negative PCR test.

Results. Based on supervision, our own examinations, surveys, consultations of specialists, records in the electronic card of patients, we analyzed and found that in 40%, regardless of age and gender, symptoms and conditions appeared that had not occurred before COVID - 19.

The main symptoms were found: memory impairment (40%): during the survey, patients noted impaired memory and reproduction. Quite often, patients indicated that they could not remember the names or titles of the elementary things. General weakness (50%): patients reported a constant feeling of general weakness, feelings of malaise that had not been related to their physical activity. Decreased ability to work (60%): patients noted that their ability to work had decreased. This was manifested by a decrease in the amount of work performed; the need to take short breaks more often. Depressive disorders (25%): it was established on the basis of patients' complaints, and also consultations of the psychiatrist and records in medical documentation. Decreased attention (25%): patients complained of decreased concentration, frequent distractions at work. Headaches (30%): patients complain of a constant headache, mainly in the temporal areas. No organic changes were detected during the examination by a neurologist, as well as dopplerography of the vessels of the head and neck and computed tomography. Sleep disturbances (20%) were manifested in the form of sleep disturbances, as well as frequent awakenings in the middle of the night. Fatigue (60%): regardless the type of activity (physical or mental), a constant feeling of fatigue, which intensifies in the afternoon. Shortness of breath (15%). Patients underwent fluorographic examination, spirometry in which no organic changes were detected. This group was consulted by related specialists (pulmonologist / cardiologist), who found no organic changes. It should be noted that during the study, none of the patients noted only one symptom, in general there was the symptom complex of 3 or more symptoms.

Conclusions. According to the results of our study, 40% of patients, after recovery, have long COVID, which is expressed by various symptoms. This has an impact not only on their ability to work, but also on some lives in general. Patients with long COVID should be under the supervision of a family doctor, as well as doctors of a narrow profile for at least 6 months after the recovery and receive maintenance therapy. Long COVID, requires further study in detail, both its course and methods of diagnosis and treatment, and of course, prevention.