## **EDITORIAL**

## Rehabilitation of post-Covid-19 syndrome – once again a call for action!

Dear Reader of Journal of Rehabilitation Medicine, since our editorial in April this year (1), rehabilitation of Covid-19 patients and especially post-ICU syndrome (PICS) has been highlighted in scientific literature and in the media (2-4). Many clinical PRM departments in Europe closed down parts of their regular activities to care for Covid-19 patients. A PubMed search on rehabilitation and Covid-19 in the last week of November gets 1,573 hits. Covid-19 rehabilitation is mostly directed towards patients suffering from moderate to severe sequelae of Covid-19. It is obvious that this is of the highest importance at this stage and will be for the coming months, as we are now at the top of the second wave of Covid -19 and will encounter many patients in need of acute and subacute rehabilitation.

However, during the summer and autumn, there has been a growing number of patients with long-term symptoms after covid infection, called "long hauler" symptoms of Covid-19 or post-covid syndrome (5–7). These patients either have symptoms from different organs that have been affected by the SARS-CoV 2 virus or symptoms without any injury to the organs. In the latter group, the most common symptoms are fatigue, seen in more than half of patients, and cognitive dysfunction, seen in one-third of patients (7).

In our experience, long-lasting symptoms are seen not only in patients hospitalized for Covid-19 but also in patients cared for at home. These patients are most often middle-aged and there is a majority of women (Borg K, 2020, personal communication). The symptoms lead to disturbances of social life at home and at work, i.e. they have disturbances of activity and participation. The persistent fatigue after Covid-19 has been reported not to be related to the severity of the disease, or to routine markers of inflammation and cell turnover, or pro-inflammatory molecules (8). However, pre-existing depression and anxiety are over-represented (8).

One may ask how many of these patients there are, and for how long they will have symptoms? The

experiences from SARS and MERS show that the symptoms of central nervous disturbances may last for years after a coronavirus infection (9). However, at this moment no one knows how long the symptoms will last, although for many patients it will be long enough to be an obstacle to going back to work.

Rehabilitation after Covid-19 constitutes a challenge and there is a need at this moment to realise that there will be a large number of patients, not necessarily treated in hospital, with different symptoms after Covid-19 requiring rehabilitation medicine. Many of these patients will require rehabilitation not only for motor dysfunction, but also for cognitive dysfunction. Last, but not least, there will be a need for vocational rehabilitation.

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With best wishes for 2021, and sincere hope that it will be a better year than 2020! Stockholm and Rotterdam January 2021 Kristian Borg and Henk Stam Editors-in-Chief of Journal of Rehabilitation Medicine