

Statement from the Australian Physiotherapy Association on Long Covid

APA Position

The Australian Physiotherapy Association (APA) believes that all Australians deserve equal access to safe, high-quality, evidence-based care.

Increasing clarity on the prevalence and incidence of Long Covid globally has seen its status shift from a contested health concern to a fully recognised public health problem.

The condition is now embedded in global policy through new guidelines released by the World Health Organization in January 2022, stating that all patients should have access to follow-up care in case of Long Covid.¹ Despite this certainty, health systems locally have lagged behind in ensuring impacted Australians are supported in their recovery. We know the number of patients with Long Covid will almost certainly rise becoming a significant public health and service challenge over the coming months.

Planning for Long Covid recovery and rehabilitation is a national health priority. Encouraging new models of collaboration and publicly funded access to treatment will be key so that patients have unencumbered access to the multidisciplinary health care they need. A recovery and rehabilitation pathway is now long overdue and we call on the Federal Government to act to ensure the health system is funded and structured to adapt and be flexible to the longer term effects of the pandemic.

Preamble

The lasting health impacts from coronavirus SARS-CoV-2 (COVID-19), known as Long Covid, are not yet fully understood or even consistently recognised.

Long Covid is still an 'umbrella' term denoting conditions and symptoms that, at this stage, are to a certain extent being defined by patient experiences.

Some people will continue to experience health problems long after contracting COVID-19. Although the data is still emerging, it is estimated that between 10 to 30 per cent of people will continue to have symptoms from COVID-19 for up to 12 weeks or longer after their acute infection.

We do not yet know how long symptoms of Long Covid will last.

We also do not know how many people will experience Long Covid, but one estimate puts the number at 400,000 Australians at mid-2022.





Policy discussion

In considering the future implications on managing the health aspects of Long Covid, we need to move fast to advance pathways to COVID recovery.

The APA's position is that those who have Long Covid will significantly benefit from access to multidisciplinary health care delivered by a co-ordinated health system properly structured and financially equipped to adjust and be flexible to the longer term effects of the coronavirus.

Physiotherapy rehabilitation treatment is, and will continue to be, essential to the recovery of hundreds of thousands of Australians afflicted by COVID-19.

The role of physiotherapists in collaborative COVID-19 and Long Covid care will be specifically needed as Australia manages rehabilitation and the various phases of the coronavirus and its variants. The consequences of increased patient demands for rehabilitation will likely be experienced by those on waitlists for surgical procedures, and in regional, remote and rural areas. Already, in remote and regional Australia, COVID-19 has placed considerable stress on an already stretched health system.

As the strain on our health workforce is likely to continue, governments are urged to engage with physiotherapists and use this highly skilled workforce to ensure Australians are receiving the best quality health services in rehabilitation and managing the myriad effects of the coronavirus.

From what we are seeing, both here and overseas, the evidence is clear that many people will require ongoing access to integrated health care, which must include physiotherapists. It is inconsistent, but physiotherapists are already integrated as part of the management of Long Covid in acute care facilities such as intensive care units (ICUs), emergency departments and high acuity respiratory wards; and also in outpatient care.

Given the multi-system nature of Long Covid a holistic multidisciplinary approach is needed to optimise patient recovery.

Multidisciplinary and integrated team based care is already a well-established pathway for treating many chronic conditions - the same approach to diagnosis, treatment, recovery, rehabilitation, prevention, ongoing monitoring and health management must be initiated for Long Covid. However, this requires major reforms to Medicare and the cumbersome referral systems and barriers to access and continuity of care.

Long Covid should be recognised as a distinct disease entity to acute COVID-19.

Recommendations

The APA recommends that Federal, State & Territory governments, as funders of the health system:

- 1. Recognise Long Covid as a distinct medical condition that requires the appropriate Medicare funded access to treatment.
- 2. Recognise that the role of physiotherapists during the coronavirus pandemic has been vital and that physiotherapists are delivering vital health services in rehabilitation during the acute phase of COVID-19.
- 3. Establish a national Long Covid tracking system and data collection to better understand the extent of this condition.
- 4. Fund MBS and PBS benefits that adequately support patients living with Long Covid and other safety net measures to reduce out-of-pocket costs associated with treating COVID-related conditions.



- 5. Provide patients with funded Long Covid access to physiotherapists as part of a multidisciplinary care team.
- 6. Expand Long Covid treatment and rehabilitation services and specialised clinics, and support regional and remote outreach clinics to help those unable to access existing services.
- 7. Engage with the highly trained physiotherapy profession in the critical strategic planning and delivery of Long Covid health services.
- 8. Explore new models of integrated care for those affected by COVID at the state level, including with the Primary Health Networks (PHNs) and Local Hospital Networks (LHNs).
- Fund integrated care clinics to include qualified physiotherapists who play a vital role in treating patients with conditions affecting the heart and lungs, and specialise in chronic respiratory and other long-term conditions.
- 10. Urgently plan and invest in multi-system integrated-team health care that include specialist therapies to successfully transition patients from acute to post-acute care, and support them through their rehabilitation.

Background

The role of physiotherapy

The World Health Organization (WHO) defines post-acute sequelae of COVID-19 (Long Covid) as "[a] condition that occurs in individuals with a history of probable or confirmed SARS CoV-2 infection, usually 3 months from the onset of COVID-19 with symptoms that last for at least 2 months and cannot be explained by an alternative diagnosis."

Individuals with Long Covid report a range of symptoms, which can include but is not limited to: fatigue, muscle aches and joint pain, shortness of breath, respiratory issues, chest pain, dizziness, palpitations, cognitive impairment, and anxiety/depression.

Long Covid can affect anyone. Severity of the acute infection of COVID-19 is not a predictor for developing Long Covid.

We are still learning about the condition and what is effective against it, however, there is a clear, defined role for physiotherapy. As research findings become available, our approach may adapt and evolve. Data systems and research will need to be prioritised to better understand and fully capture and chart the disease course nationally. There is also an urgent need to advance new education and training programs, and develop Standards with a focus on the interdisciplinary rehabilitation of patients with Long Covid.

Physiotherapists will be key to managing this, and some of the longer term conditions and rehabilitation pathways. Our profession offer Long Covid patients tailored, individualised treatments; they have qualifications and experience with chronic disease management, assisting in fatigue management, pacing, individualised activity management, pain management, strength/control improvements and productivity advice.

Cardio-respiratory physiotherapists, who treat patients with conditions affecting the heart and lungs, and specialise in chronic respiratory and other long-term conditions, will be central to rehabilitation and recovery programs. Rehabilitation programs can also help ease fatigue and improve the mood of people with ongoing COVID-19 symptoms.



Pathway planning and delivery

Across the world, physiotherapists working within multidisciplinary teams are supporting patients to recover their mobility, and assist them pace through their fatigue.

However, the coronavirus pandemic has brought to the fore barriers to appropriate care that adversely impact on patient care and make the patient journey more time consuming and expensive. Long Covid is one reason why fundamental reform is urgently needed to provide a way forward to overcome the barriers to team-based care.

As Australia tries to manage this pandemic, we know that other viruses may follow, and our health system must facilitate essential care and patient access to physiotherapy services beyond current and very limited MBS chronic disease items.

It takes a team

Multidisciplinary collaboration will be essential to provide integrated care for patients presenting with post-recovery symptoms and co-morbidities following COVID infection. Similar in approach to other chronic conditions, a fully funded multidisciplinary integrated care pathway response will be required.

The APA wants MBS and PBS benefits that adequately support patients living with Long Covid and other safety net measures to reduce out-of-pocket costs. We want the systemic barriers around public funding and delivery models to be resolved at a national health system level.

We also want to see PHNs properly funded to support innovative models of integrated care beyond general practice.

Workforce factors

Physiotherapy must be funded to support patients throughout the patient journey, from admission through to rehabilitation, and across a range of settings, in hospitals and acute settings, in the home, and in the community.

The APA anticipates an impact on demand and supply of physiotherapists as a direct consequence of the ongoing pandemic. Workforce supply (and possible shortages) may have broader consequences on increased patient need for rehabilitation. In addition, there may be impacts in relation to access in the context of already diminished resources in rural and regional Australia.

Workforce strategies across all aspects of the Australian health care system must also recognise the impact of Long Covid and the epidemic. With fewer overseas-trained physiotherapists arriving through the Priority Migration Skilled Occupation List (PMSOL) due to pandemic restrictions, it is likely demand for Long Covid physiotherapy services will place additional demands on an already over-extended workforce.



Long-COVID | Rehabilitation pathway planning

PATHWAY PLANNING AND DELIVERY

Physiotherapy combined with robust mental health support will be vital to recovery.



The multi-system impact of Long COVID means that **teamwork** will be important. Evidence-based Standards must be developed.

A multitude of long-term symptoms have emerged and the list is growing. The more common effects of Long COVID

symptoms include:

Fatigue Breathlessness Muscle weakness Chest tightness Cognitive dysfunction Physiotherapists are involved with COVID-19 care throughout the patient journey, from

admission through

to rehabilitation.

Physiotherapy-led rehabilitation may be particular to individual symptoms or require integrated, multidisciplinary care drawing on a range of health services.

Conclusion

We cannot afford to repeat past mistakes in recognising and managing diseases and illness that cause fatigue and other loss of physical functions.

All governments must act collectively to support those with Long Covid symptoms access the ongoing care they need.

Multidisciplinary teams which include physiotherapists will be critical to how Australia manages and emerges from this particular pandemic – and how we are prepared for future such health emergencies.

The Medicare system must be flexible and able to rapidly respond with new MBS items and funding to properly help the millions of Australians and Australian residents affected by Long Covid.

World Health Organization. (2021) *Interim Guidance. COVID-19 Clinical management: Living guidance, 25 January 2021.* Available at: https://www.who.int/publications/i/item/WHO-2019-nCoV-clinical-2021-2

