

List of the 67 statements included in the CIBERPOSTCOVID eDelphi

\*These questions were originally in Spanish. The term “persistent COVID” was translated to “post COVID” in English.

## Domain 1

What term should we use?

- “Persistent COVID” is the name that I would use to refer to this health problem.
- “Long COVID” is the name that I would use to refer to this health problem.
- “Post COVID syndrome” is the name that I would use to refer to this health problem.
- “Post COVID symptoms” is the name that I would use to refer to this health problem.

## Domain 2

What are the characteristic features of “post COVID”?

- “Post COVID” is a set of symptoms that persist after acute COVID-19 infection
- “Post COVID” includes the persistence of a single symptom after acute COVID-19 infection
- The clinical manifestations and symptoms of “post COVID” are maintained after acute COVID-19 infection
- The clinical manifestations and symptoms of “post COVID” fluctuate after acute COVID-19 infection
- The clinical manifestations and symptoms of "post COVID" present as new symptoms that were not present during acute COVID-19 infection.
- “Post COVID” is a set of multi-organ symptoms not attributable to other causes
- "Post COVID" is considered when clinical manifestations and symptoms are present for at least 3 months (12 weeks) after acute COVID-19 infection.
- "Post COVID" is considered when clinical manifestations and symptoms are present for at least 6 months after acute COVID-19 infection.
- "Post COVID" is considered when clinical manifestations and symptoms are present for at least 12 months after acute COVID-19 infection.
- The definition of "post COVID" should include the impact on physical and psychological functions
- The definition of "post COVID" should include the impact on daily activities
- The definition of "post COVID" should include the impact on work

### Domain 3

What manifestations and symptoms should be borne in mind?

- "Post COVID" presents with systemic manifestations and symptoms such as fatigue, lack of energy and/or weakness, general malaise, sweating, or others such as fever, dizziness or tremors
- "Post COVID" presents with neurological and neuromuscular manifestations and symptoms such as distortion of smell and/or taste, headache, lack of reflexes or hearing loss
- "Post COVID" presents with neurocognitive manifestations and symptoms such as memory loss, difficulty concentrating, cognitive deficits, mental fog or confusion
- "Post COVID" presents with psychological and psychiatric manifestations and symptoms such as anxiety, depression or sleep disturbances
- "Post COVID" presents respiratory or cardiopulmonary manifestations and symptoms such as cough, sore throat, dyspnea, polypnea, chest pain or pressure, increased oxygen requirement, and others such as excess sputum
- "Post COVID" presents with musculoskeletal manifestations and symptoms such as joint pain, limited mobility, low tolerance of physical exercise or muscle pain
- "Post COVID" presents with gastrointestinal manifestations and symptoms such as abdominal and/or stomach pain, nausea and/or vomiting or others such as diarrhoea
- "Post COVID" presents with dermatological manifestations and symptoms such as hair loss or other skin signs
- "Post COVID" produces other manifestations or symptoms not specified above

### Domain 4

What factors might increase the predisposition or risk?

- Women are more predisposed to develop "post COVID" after acute COVID-19 infection.
- Middle-aged persons have an increased predisposition to develop "post COVID" following acute COVID-19 infection
- Persons infected with SARS-Cov-2 during the first wave (2020) have an increased predisposition to develop "post COVID"
- Persons with a greater burden of symptoms during the acute phase of COVID-19 have an increased predisposition to develop "post COVID"
- SARS-Cov-2 infected persons with hospital admission for this health problem have an increased predisposition to develop "post COVID"

- Persons infected with SARS-Cov-2 with ICU admission for this health problem have an increased predisposition to develop "post COVID"
- Persons with alterations in the immune system have an increased predisposition to develop "post COVID" following acute COVID-19 infection
- Persons with previous respiratory comorbidities have an increased predisposition to develop "post COVID" after acute COVID-19 infection
- Persons with previous neurological comorbidities have a greater predisposition to develop "post COVID" after acute COVID-19 infection
- Persons with prior psychological or psychiatric comorbidities have a greater predisposition to develop "post COVID" after acute COVID-19 infection
- Individuals with other prior comorbidities (not mentioned above) are more predisposed to develop "post COVID" after acute COVID-19 infection
- There is insufficient scientific evidence to establish which factors predispose to the development of "post COVID"

## Domain 5

### Impact on quality of life and daily activities

- "Post COVID" has an impact on the health-related quality of life of people living with this health problem
- "Post COVID" has an impact on the physical function of people living with this health problem
- "Post COVID" has an impact on the psychological function of people living with this health problem
- "Post COVID" limits the daily activity of people living with this health problem
- "Post COVID" limits the family and social activity of people living with this health problem
- "Post COVID" has an impact on work activity
- "Post COVID" has an impact on work activity and can lead to temporary sick leave

## Domain 6

### Can severity profiles be defined?

- The severity of "post COVID" is classified based on the functional impairment produced in patients by symptoms after the acute phase of COVID-19
- The severity of "post COVID" is established based on the set of manifestations and symptoms existing in patients after the acute phase of COVID-19

- The severity of "post COVID", understood as functional impairment, should be measured based on validated scales
- The severity of "post COVID" is independent of the severity of symptoms during acute SARS-Cov-2 infection

## Domain 7

How can its identification and diagnostic process be established?

- A diagnosis of "post COVID" requires a probable previous SARS-Cov-2 infection as recorded in the medical history/anamnesis
- A history of previous SARS-Cov-2 infection confirmed by laboratory testing is required to establish a diagnosis of "post COVID"
- To establish a diagnosis of "post COVID" it is necessary to rule out other health problems to which the referred symptomatology can be attributed
- To establish a diagnosis of "post COVID" it is necessary to know previous health problems of the patient
- It is necessary to distinguish the organ damage or sequelae produced by the acute SARS-Cov-2 infection from the symptoms attributable to "post COVID"
- Organ damage or sequelae produced by acute SARS-Cov-2 infection are part of the manifestations or symptoms of "post COVID"

## Domain 8

Is a different definition required for the paediatric population?

- A specific definition of "post COVID" is needed for the paediatric population
- The clinical manifestations and symptoms of "post COVID" differ between adult and paediatric populations
- Symptoms of "post COVID" in the paediatric population are less severe than in adult population
- Symptoms of "post COVID" in the paediatric population mainly affect cognitive functioning of children and adolescents
- Children and adolescents with previous allergic health problems are more predisposed to develop "post COVID"
- Children and adolescents with previous respiratory problems such as asthma are more predisposed to develop "post COVID"
- Girls are more predisposed than boys to develop "post COVID" in the paediatric population
- Adolescents are more predisposed to develop "post COVID" than children

## Domain 9

## Current challenges and progress in research and planning

- The definition of “post COVID” must be reviewed and refined as new information becomes available
- The clinical, biological and demographic profiles and characteristics of groups of patients with "post COVID" must be studied
- "Post COVID" requires recognition by the health system, as well as social and occupational support
- It is necessary to create specialized multidisciplinary units staffed by trained professionals for the correct approach "post COVID"
- It is necessary to involve patients and family members in the diagnostic process of "post COVID"