

# The Evelina Multi-Disciplinary Post Covid Service

## “Finding light at the end of a very Long Covid tunnel”



**Evelina  
London**

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Evelina London Children’s Hospital**

With thanks and acknowledgments to:

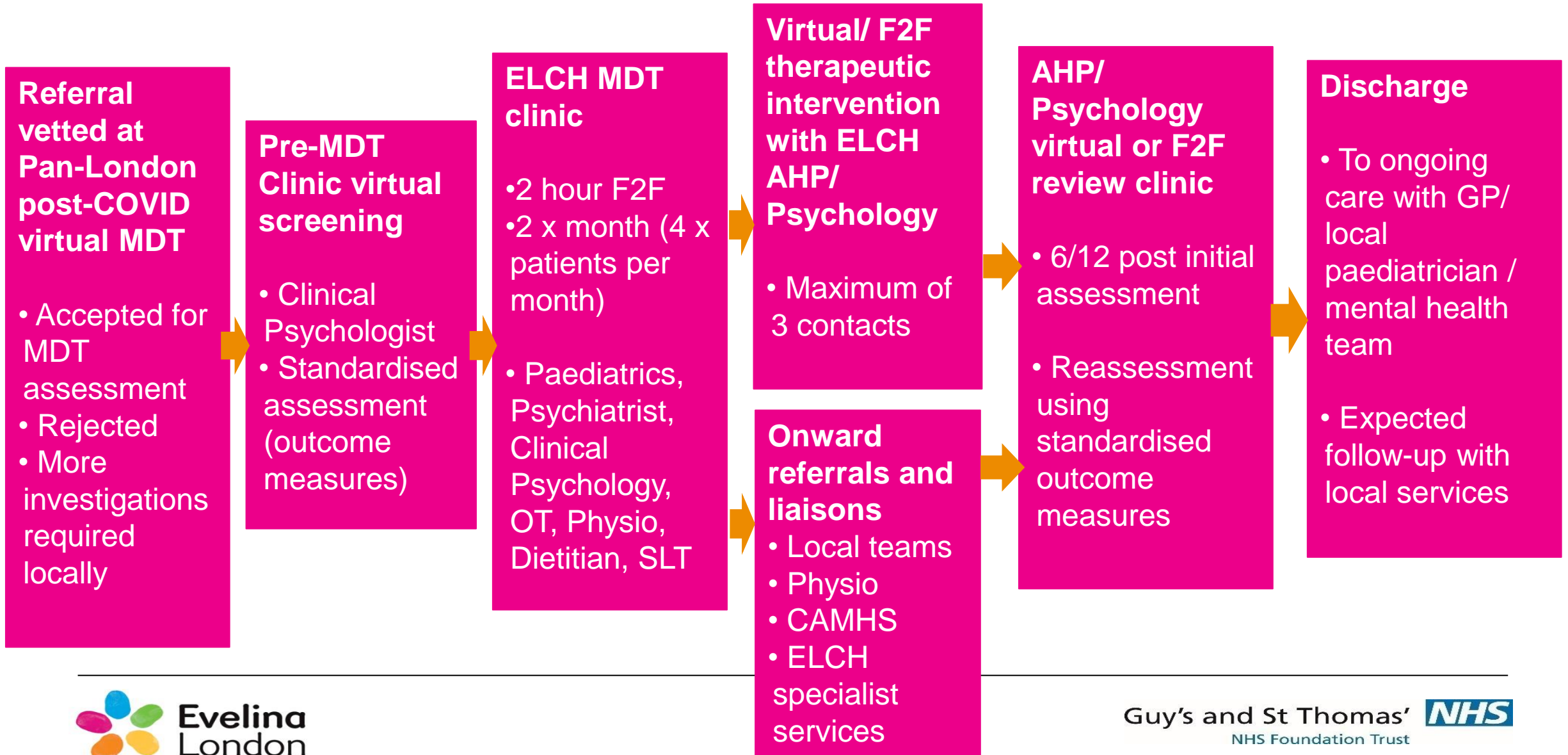
Faye Knight, Lead Physiotherapist, Post Covid

Julia Hopkins, Senior Paediatric Dietitian, Post Covid

Vicki Ford, Clinical Psychologist, Post Covid

Dr Ben Baig, Consultant Psychiatrist, Post Covid

# MDT assessment and intervention pathway



# Aims of the Pan London Post Covid Service



Make a diagnosis,  
Identify  
complications and  
rule out other  
differentials



Manage symptoms  
and comorbidities  
holistically

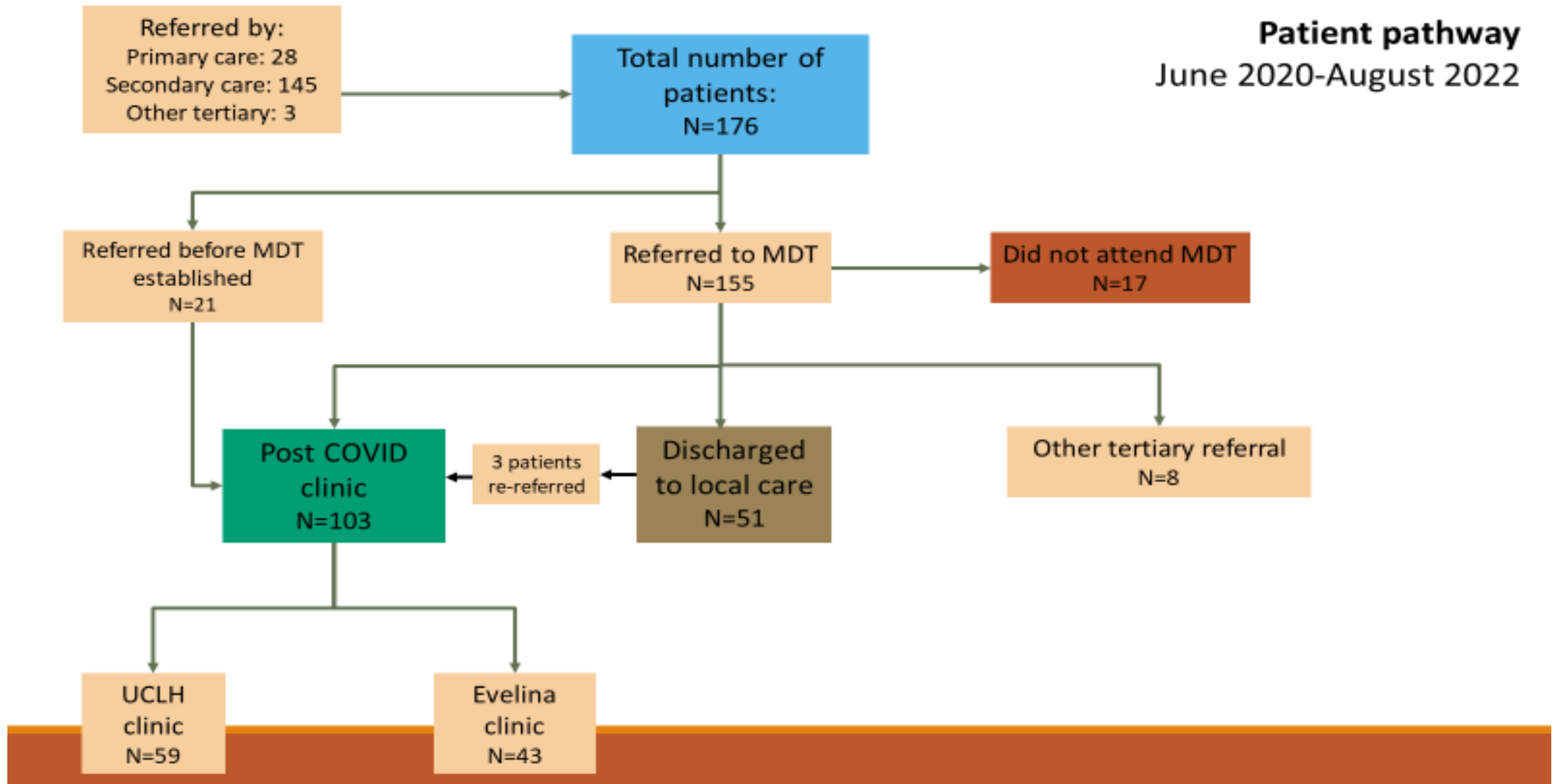


Provide  
information,  
supported self-  
management and  
rehabilitation



Deliver a locally  
driven  
personalized  
recovery

# Patient pathway June 2020-August 2022

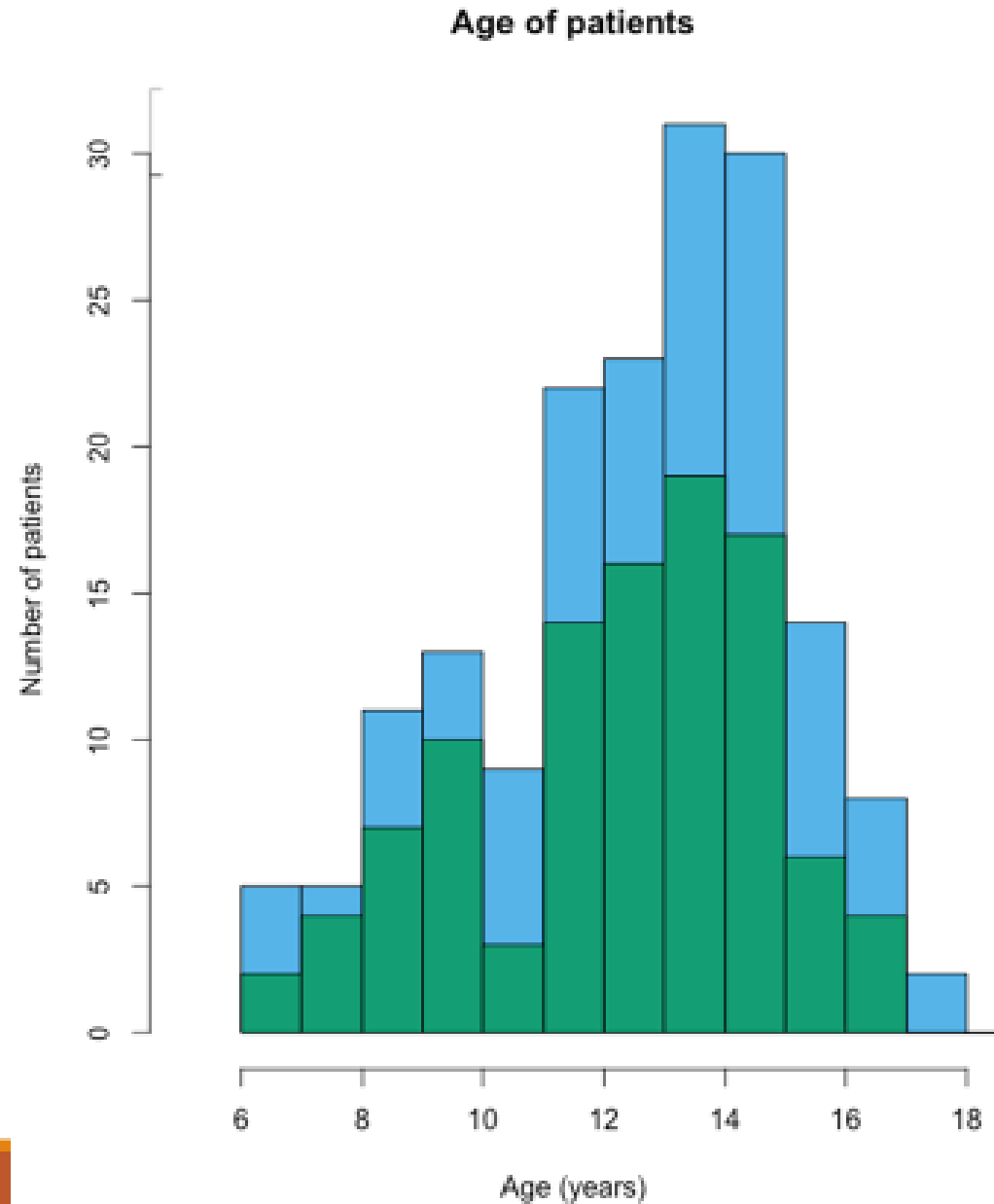


# Results

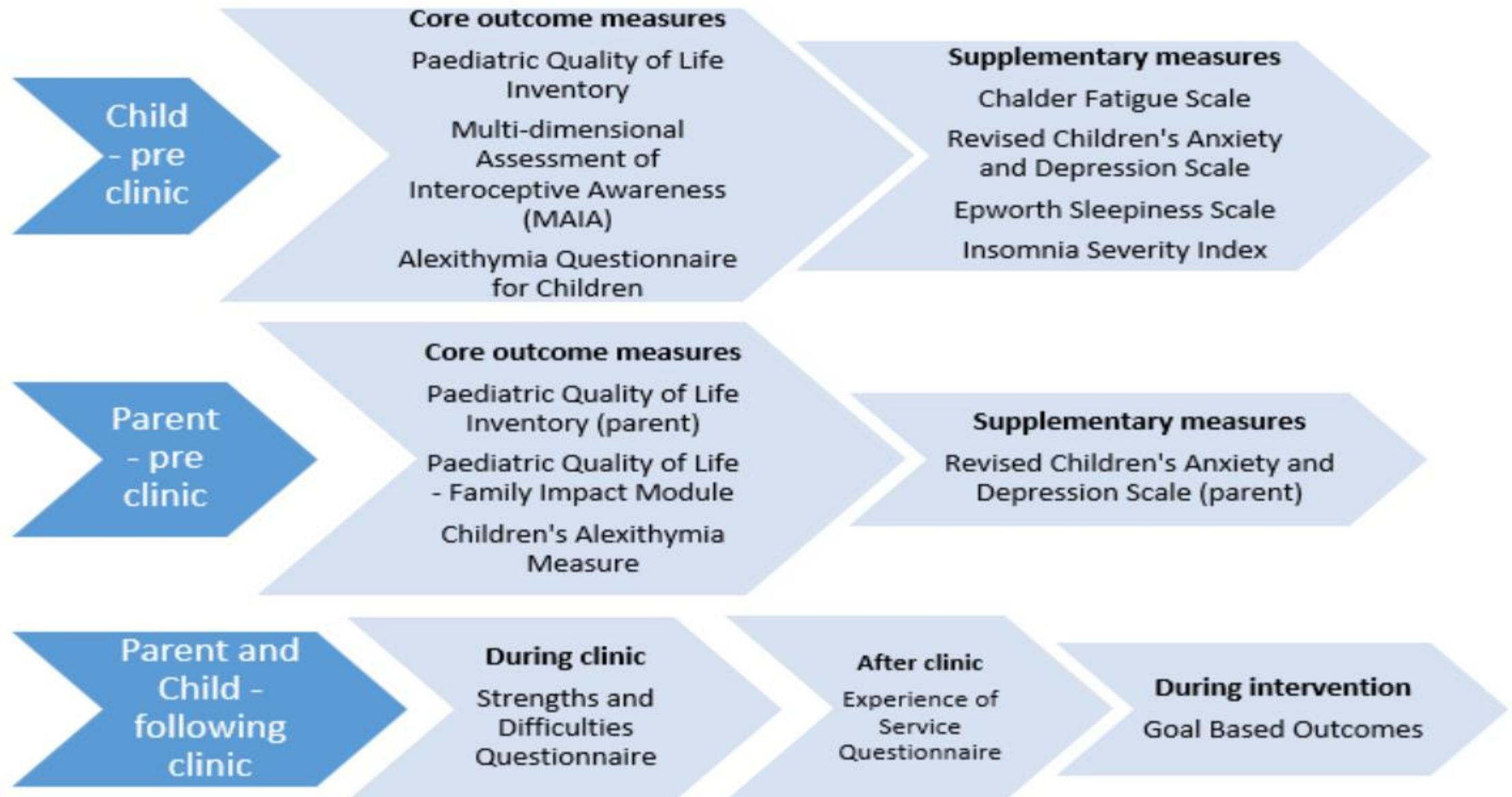
## Demographics

- 176 patients (107 female)
- Mean age 14 years
- Range 6-18 years

All patients  
Seen in clinic



# Pre-clinic assessment (remote)



# Evelina London Multidisciplinary assessment clinic

- Current symptoms and functional challenges
- History of Covid-19 illness and any premorbid conditions /difficulties
- Current family situation and any relevant family illness / difficulties
- Interests, priorities, previous activity, what brings joy?
- Current daily routine:
  - including mealtimes and nutrition
  - activities, school, screen time
  - wake / sleep times, naps
- Post exertional malaise / symptom relapses / boom and bust cycles
- Experiences of prior Post-Covid assessment and intervention or support
- What are their hopes for MDT assessment and any subsequent input? Also what would not be helpful from our team?

# Evelina London MDT Assessment clinic structure

40 mins – young person and parents seen together for introductions, initial history taking, discussion re: expectations of assessment

30 mins – young person seen by paediatrician, physiotherapist/ OT and psychologist to complete physical exam incl. height / weight, SA02, BP, 2 min walk test if able, Sit-to-stand if applicable. **This enables us to spend time 1:1 with the young person to ensure their voice is heard during the assessment**

Parents spend time with psychiatrist, OT and dietitian to gather further history and to ensure they have time to speak freely without the young person present – impact of illness on the family



# Evelina London MDT Assessment clinic structure (cont.)

15 mins – Family have a break (complete any outstanding measures), MDT formulation and intervention planning

20 mins – share formulation, plan for any intervention/ liaison with family, confirm diagnosis of Post-Covid Syndrome if clinically appropriate

10 mins – young person and parent complete post clinic service evaluation (CHI-ESQ)

# Rehabilitation and intervention (2 sessions)

- Activity management (return to meaningful activity), incl. routines
- Sleep management
- Support around education and school – team around the child (TAC)
- Support with mood and emotional well-being
- Support with diet/ nutrition
- Setback management
- Parent coaching
- + Role specific rehab from different disciplines
  - e.g. specific physio exercises, advice re. pain or autonomic issues, returning to physical activity, breathing pattern retraining, motivation for activity, goal setting

# What have we learnt?

- Long Covid (Post Acute Covid-19 Syndrome) = a physical condition characterised [in CYP] by symptoms of fatigue, brain fog, post-exertional malaise lasting more than 12 weeks after an acute covid infection. Common symptoms can also include loss of taste, smell, change in diet, heart palpitations, breathlessness, pain in joints, headaches, stomach pain, low mood, increased anxiety
- Noted anecdotal treatments include antihistamines, anticoagulants, hyperbaric oxygen, low dose naltrexone, beta-blockers – yet to be trialled in children
- CYP with Post-COVID present in complex ways and with multi-dimensional and different priorities for intervention
- To listen to individual stories, validate concerns and be reassuring with robust diagnosis.
- The intensity of support/ input required is high

# What have we learnt? (cont.)

- Referrals to local therapists can be difficult; with limited funding/ resources or pathways for Post-COVID
- We need to continue to provide accessible resources for professionals, parents and children of different ages (e.g. webinars), ideally in co-production with CYP
- Joint working with colleagues in community health and educational settings is essential
- The importance of “delight” (i.e. an activity or moment that brings you pleasure and makes all your hard work/ challenges more worthwhile).
- We are all learning together – it is a voyage of discovery!
- Best empirical evidence from Evelina Long Covid service Multidisciplinary team show significant improvement in over 50% of patients

# What have we seen? The emerging considerations (in Evelina London's Cohort)

## 1. The role of Mental Health services in Post Covid-19 Persistent Symptoms

- **34% known to local CAMHS prior to long-covid clinic – existing mental health diagnoses of depression, ADHD, Eating disorders**
- Aim to identify and treat obvious mental health conditions which explain some or all of the symptoms, e.g.
  - Fatigue/low energy/brain fog – may be seen in depression
  - Breathing difficulties may be signs of primary anxiety illness

# What have we seen? The emerging considerations (in Evelina London's Cohort) #2

## 2. Why do up to 40% of children presenting to the long-covid clinic possibly have Autistic Spectrum Disorder?

- Pre-morbid diagnosis (14/49; 28.5% at ELCH) (17% at UCLH)
- Awaiting assessment (3/49)
- Traits and strong family history – presenting in clinic with ASD features (3/49)
- Total = 39%
- Female to Male Ratio = 2:1

UK prevalence of  
Autistic Spectrum  
Disorder - 1/100

Male: Female  
Ratio 4:1

Is Autism over represented in children  
with Long Covid?

Is Autism over represented in children  
with severe long Covid?

# What have we seen? The emerging considerations (in Evelina London's Cohort) #3

## 3. Pre-existing medical conditions

- Many other “functional” conditions prior to Long Covid – FND, non epileptic seizures, IBS, chronic pain, chronic fatigue
- Children may be different due to
  - Milder primary illness
  - Fewer pre existing medical conditions
  - Family medical history
  - Covid experience in the family

# What have we seen? The emerging considerations (in Evelina London's Cohort) #4

## 4. The times we lived through [pandemic, lockdown, new-norms] . . . and the aftermath!

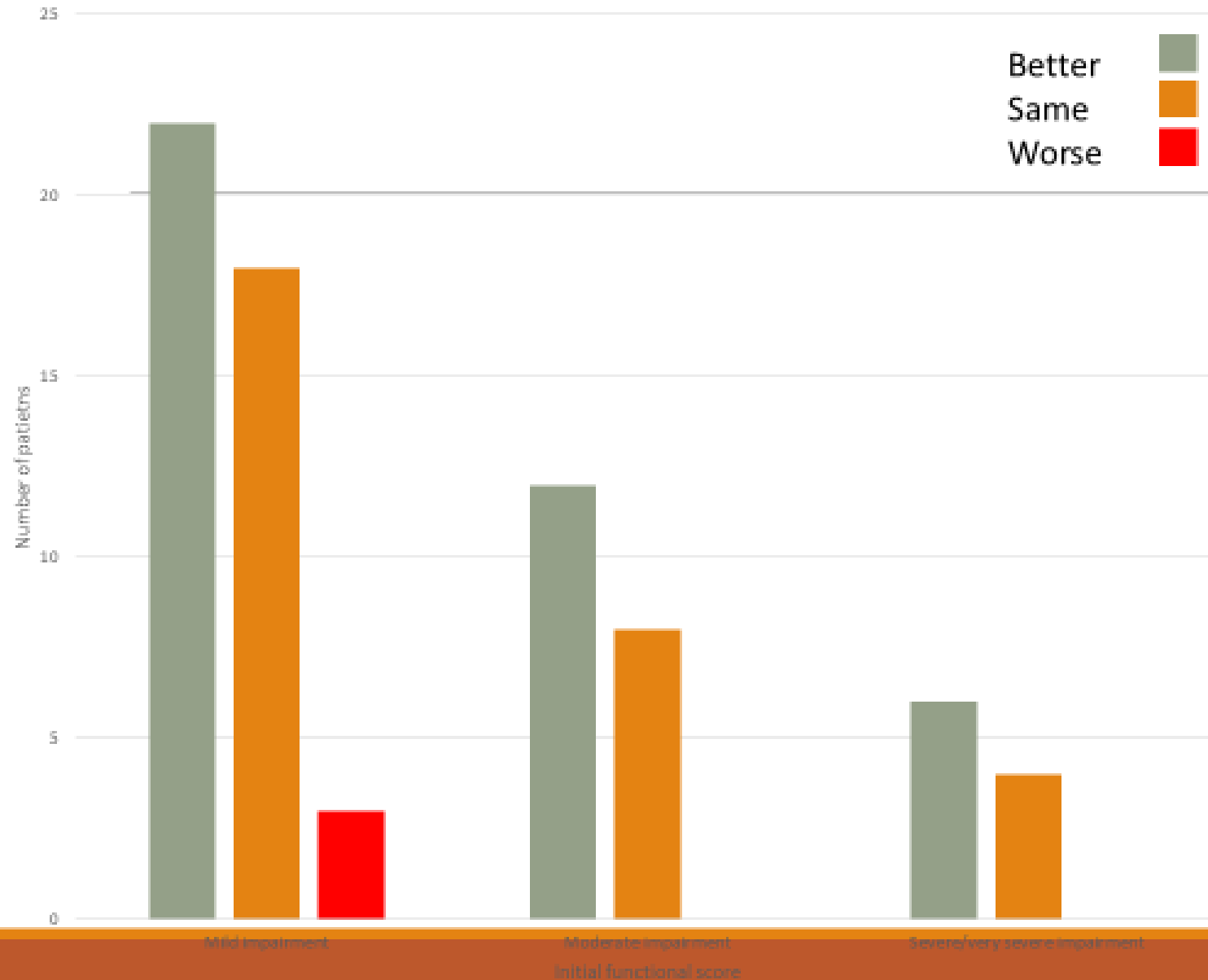
- Significant social adversity – bullying, parental separation, housing
- Impact on young people – development, socialisation, routines, diet, sleep
- Impact on families – social, financial
- Impact on education – to examine or not to examine, transition, finance, home-schooling
- Impact on the world
- A new “norm” and the transition back
- Loss/ delay of skills
- Fear of illness – the mask legacy



# Outcomes

Best empirical evidence from Evelina Long Covid service Multidisciplinary team, including Occupational therapy, Physiotherapy, Dietician, Psychology and Psychiatrist, shows “significant” improvement in over 50% of patients assessed in clinic (June 2020 – August 2022)

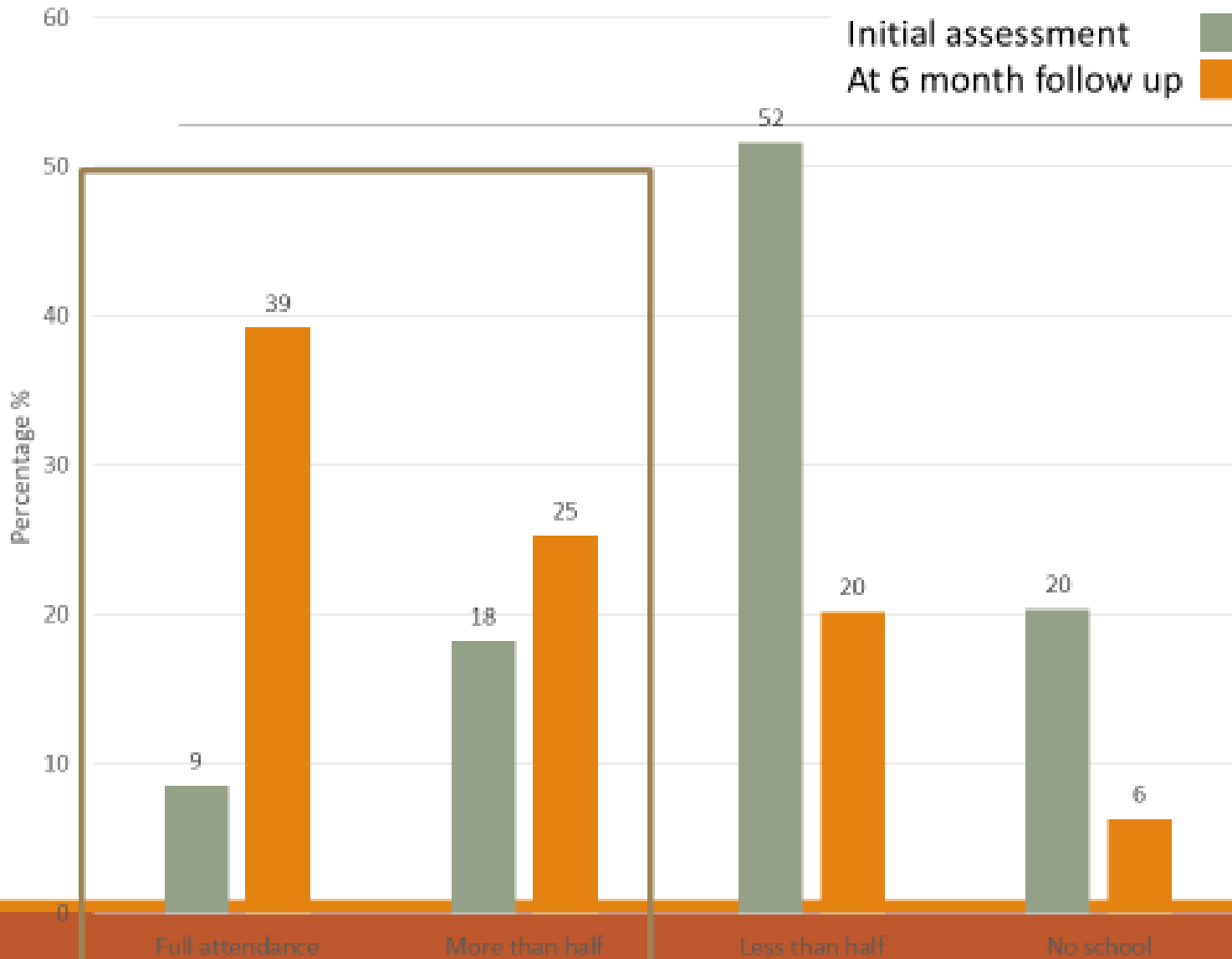
Bar graph to show change in functional score across 6 months



## Outcomes: Functional impact score

56% had improved by at least one category

Bar graph to show school attendance at initial assessment and at 6 month follow up



# Outcomes: School Attendance

27% of patients attending school more than half the time at initial assessment

Search here..



### Children and young people with COVID

The time it takes for someone to get better from COVID varies from person to person. Some children and young people continue to experience symptoms after their acute COVID infection. The term 'long COVID' is commonly used to describe signs and symptoms that continue or develop after an acute COVID infection for over 4 weeks, that cannot be explained by an alternative medical diagnosis.

In this section, you will find information and guidance on some of the different symptoms of long COVID tailored for



**Managing daily activities**



**Eating well**



**Sleeping well**



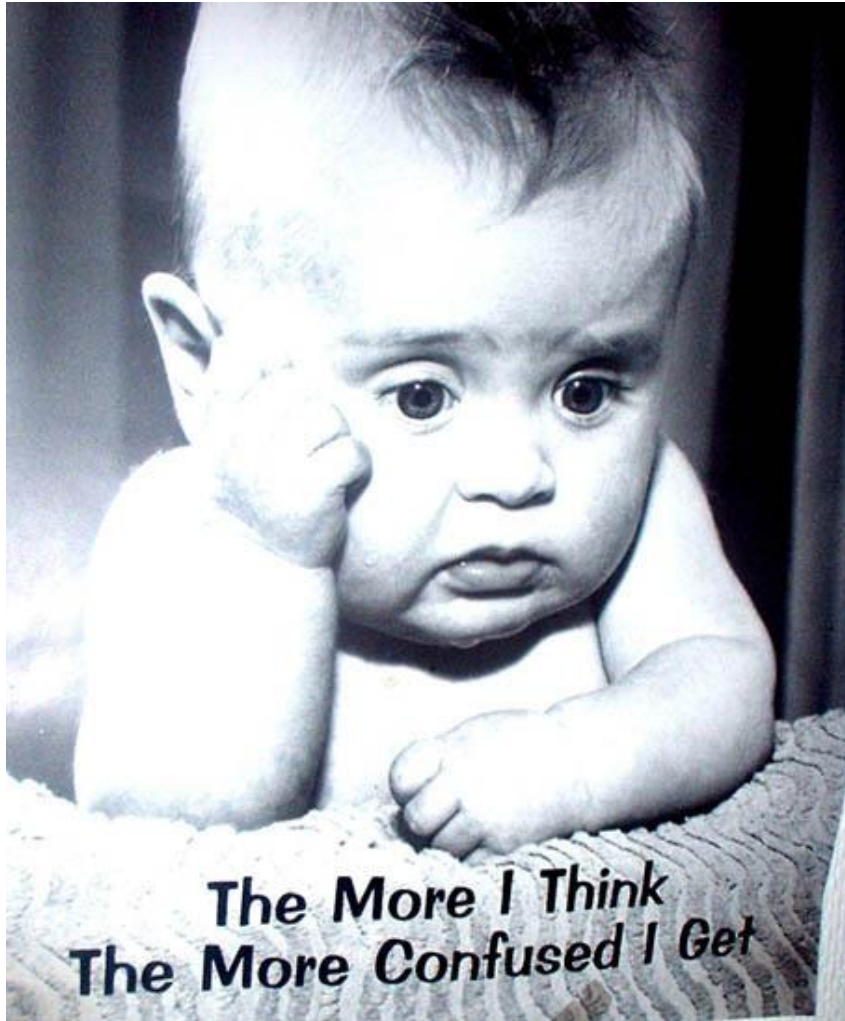
**Returning to education for pupils and students**



**Returning to education for parents and carers**



**Managing emotions and feelings**



Any Questions?