

# Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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## “COVID-19 Can Cause Prolonged Fatigue in Mild Cases”

We have seen a spike of COVID-19 in our area but fortunately it appears to be of a mild variety. Many patients report mild headaches, muscle aches and low-grade fever. They seem to recover in a few days, but some are experiencing severe fatigue, which can last for long periods. Overwhelming fatigue, palpitations, muscle aches, pins and needles, and many more symptoms are being reported as after-effects of the virus. Around 10 percent of the 3.9 million people contributing to the COVID-19 Symptom study app have effects lasting more than four weeks. If one percent of the 290,000 or so people who have had COVID-19 in the UK remain under the weather at three months, this will mean thousands of people are unable to return to work. They will probably have complex needs that the NHS is ill-prepared to address. Chronic fatigue – classified as fatigue lasting more than six weeks – is recognized in many different clinical settings, from cancer treatment to inflammatory arthritis. It can be disabling. COVID-19 is not the only cause of chronic fatigue. Prolonged fatigue is well recognized after other viral infections such as the Epstein-Barr virus, which causes infectious mononucleosis (also known as glandular fever). Treating chronic fatigue is difficult and frequently ineffective. For most viral infections there is no specific treatment, and because COVID-19 is so new, we do not yet know how to manage post-COVID fatigue. Detailed mechanistic insight is, for the most part, lacking. Previously we have tried to treat the underlying disease responsible for the chronic fatigue. But a previous study has given us some insight. When a chemical called interferon-alpha was given to people as a treatment for hepatitis C, it generated a flu-like illness in many patients and post-viral fatigue in a few. Researchers found that baseline levels of two molecules in the body that promote inflammation – interleukin-6 and interleukin-10 – predicted people's subsequent development of chronic fatigue. These same pro-inflammatory molecules are seen in the “cytokine storm” of severely ill COVID-19 patients. Investigators are sending out questionnaires to the volunteer adult twins on our database, many of whom were included previously in immune system studies long before the coronavirus epidemic. Guidance for patients in managing chronic fatigue and how to conserve energy is also now available. The important thing to stress is that taking out a gym membership and pushing exercise is the wrong thing to do and can set people back considerably. Small efforts – mental or physical – should be followed by rest. Return to work should be a gradual and progressive process. Learning to pace activities is very much the order of the day.

In the America that I love, we must be aware of the long-term effects of COVID-19.

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