



Royal College of
General Practitioners

Long COVID survey summary and topline tables

Fieldwork from August 27 to September 8 2020

Method

- Self-selecting UK sample of RCGP members via direct email
- Online survey
- 300 responses

1. Approximately how many patients are you currently looking after that have had COVID-19 symptoms for the following duration?

No. of patients	Any	0	1-2	3-5	6-10	11-20	21-30	31-40	50+	Average no. of patients per GP
Less than 2 weeks	37%	63%	21%	7%	7%	2%	0.0%	0.4%	0.4%	2
From 2 to 6 weeks	42%	57%	23%	11%	4%	1%	0.5%	1%	0.5%	2
From 6 to 12 weeks	53%	47%	29%	15%	6%	1%	1%	0.0%	0.0%	2
More than 12 weeks	67%	33%	36%	21%	5%	4%	0.4%	1%	0.4%	3

76% of GPs are treating at least one patient with COVID symptoms.

2. Do you have a long-COVID clinic you can refer to?

	%
Yes	23%
No	77%

3. Are your patients prevented from being referred to your long-COVID clinic because of a negative test?

	%
Yes	5%
No	20%
Not applicable	75%

4. Approximately how many patients would you estimate you are currently looking after because of indirect health impacts of COVID-19? This might include patients who postponed treatment during lockdown, that have suffered economic or isolation consequences, or who are waiting for referrals to secondary care.

	%
0	9%
1 to 4	8%
5-9	6%
10-19	16%
20-29	13%
30-39	8%
40-49	8%
50-59	8%
60-69	1%
70-79	1%
80-89	1%
90-99	0%
100+	21%

5. Which of the following symptoms are your patients experiencing long-COVID presenting with?

	Always	Most of the time	Sometimes	Occasionally	Rarely	Never
Fatigue	37%	47%	9%	2%	1%	5%
Muscle pains and weakness	11%	34%	27%	16%	4%	8%
Depression and mental health conditions	11%	33%	32%	11%	4%	10%
Shortness of breath	9%	34%	38%	9%	3%	7%
Neuro-cognitive difficulties	4%	12%	30%	17%	20%	19%
Cough	3%	22%	37%	15%	14%	9%
Headaches	3%	15%	37%	19%	11%	15%
Chest pain	2%	15%	43%	14%	13%	12%
Dizziness	2%	14%	36%	21%	12%	15%
Ongoing loss of sense of smell and/or taste	1%	14%	39%	17%	16%	13%
Low grade fever	1%	10%	27%	14%	26%	23%
Palpitations	1%	7%	34%	16%	24%	19%
Gastrointestinal upset	1%	6%	34%	21%	20%	18%
Metabolic disruption (such as poor control of diabetes)	1%	1%	18%	17%	27%	36%
Cardiac symptoms	0%	5%	28%	17%	25%	25%
PoTS	0%	4%	21%	14%	24%	37%
Rashes	0%	2%	17%	15%	35%	31%
Thromboembolic conditions	0%	1%	19%	18%	31%	31%

6. Which of the following treatments have you used with the patients you're looking after with long-COVD and how effective would you say they have been?

	Very effective	Quite effective	Not very effective	Not at all effective	Inconclusive at this stage	I have not used this	Net very/quite effective
Listening and empathy	21%	52%	12%	0%	7%	8%	73%
Rest and relaxation	11%	44%	16%	2%	16%	11%	55%
Gradual increase in exercise, if tolerated	10%	44%	14%	2%	17%	13%	54%
Improving general health - diet, smoking, alcohol, caffeine etc	10%	33%	20%	4%	18%	15%	43%
Antibiotics for secondary infection	10%	34%	20%	3%	8%	24%	45%
Social prescribing	7%	31%	21%	1%	8%	31%	38%
Treating symptoms, such as treating fever with paracetamol	7%	35%	24%	2%	9%	23%	42%
Treating specific complications	6%	35%	22%	1%	13%	23%	41%
Daily pulse oximetry	4%	15%	14%	5%	8%	53%	19%
Optimising control of other long-term conditions	4%	32%	27%	2%	17%	18%	35%

7. Do you currently have access to the diagnostics you require to treat long-COVID, such as Echocardiograms, CT scans and tilt tests?

	Yes, and access is generally good	Yes, but access is generally good for some, poor for others	Yes, but access is generally poor	No	Don't know
On referral to secondary care	17%	26%	26%	14%	16%
In the community	7%	17%control	11%	50%	14%

8. How confident would you say you feel treating patients with long-COVID symptoms at the moment?

	%
Extremely confident	1%
Very confident	6%
Somewhat confident	28%
Not very confident	51%
Not at all confident	14%

9. Which of the following do you need in order to ensure you can treat long-COVID effectively?

	%
More PPE	20%
More guidance on how to treat long-COVID symptoms	81%
More research into effective treatment for long-COVID	75%

10. Treating COVID and long COVID is likely to bring more appointments to general practice, and many GPs have already told us of their expectations of rising appointments to treat patients for indirect impacts too, such as those who avoided treatment during the pandemic, those who have been socially isolated for long periods and those who have suffered negative economic consequences. How likely to do you think it is that your practice will require more staff **resource** in the following roles to ensure you can meet patient demand from direct and indirect health impacts of COVID-19?

	Very likely	Quite likely	Not very likely	Not likely at all	Don't know	Net Very/quite likely
Mental health therapists	54%	35%	3%	3%	5%	89%
Nurses	39%	33%	18%	5%	5%	73%
Physiotherapists	34%	41%	13%	3%	8%	75%
Social prescribers	34%	41%	11%	4%	9%	75%
Clinical pharmacists	25%	35%	23%	7%	9%	60%
Health coaches	25%	33%	18%	6%	18%	58%
Dieticians	16%	22%	35%	11%	16%	39%

About you

Region

East of England	10%
East Midlands	6%
London	11%
North East and Yorkshire	9%
North West	13%
South East	15%
South West	8%
West Midlands	12%
Northern Ireland	3%
Scotland	11%
Wales	3%

GP type

GP Partner	57%
Salaried GP	25%
Locum GP	8%
GP Registrar/trainee	11%

Gender

Male	35%
Female	62%
Other	0.4%
Prefer not to say	2.6%

Age

18-24	0.00%
25-34	9%
35-44	22%
45-54	41%
55-64	24%
65+	3%

Ethnicity

White	72%
Black - African/Caribbean/British	4%
Asian/Asian British	18%
Mixed/Multiple Ethnicity	3%
Other	3%