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Introduction

- Following a COVID-19 infection, numerous patients have reported over 200 persistent and disabling symptoms such as mobility issues, fatigue, brain fog, etc.
- There is a paucity of randomized controlled trials (RCT) focusing on rehabilitation for individuals with long COVID.
- Our team has completed an RCT on virtual physical rehabilitation in individuals living with long COVID. Considering the wide array of symptoms in these individuals and their varying paths to recovery, there has been ongoing debate regarding the significance of exercise in managing this condition. Thus, comprehending participants' satisfaction and experience with the program is crucial.

Objectives:

To explore the satisfaction and experience of individuals living with long COVID with an 8-week virtual rehabilitation program consisting of exercise and education components.

Methods

Data extracted from a prospective, multicentered, assessor-blind RCT which includes people living with long COVID in the provinces of Quebec and Ontario. After screening 132 individuals were considered in the RCT.



After the 8-week program, participants in the intervention group received a Remote electronic data capture (REDCap) link for a satisfaction survey containing 15 questions assessing the program's importance, their satisfaction, experience on a 5-point Likert scale, along with an open comments section.

Participant Satisfaction with a Virtual Rehabilitation Program in Long COVID

Results

Control group (n=67)

generic instructions guiding participants on how to manage their symptoms and safely engage in physical activity.

Goal setting and breathing management Dealing with physical fatigue, post-exertional malaise, energy conservation techniques Posture training and injury prevention Dealing with cough (coughing techniques) Sleep hygiene, dealing with brain fog, mental

Dealing with stress and anxiety. Impact of information on post-traumatic stress disorder Review of goal setting and improving social outlook (return to work, social isolation and

Drop-outs in control group (n=1)

Among the 61 individuals who completed the rehabilitation program, 57 participants filled the satisfaction survey.

SATISFACTION SURVEY					
Questions	Response rate % (n)				
Offering this rehabilitation program or people living with COVID-19 is a:	Bad idea 5 % (3)	2% (1)	Neutral 7% (4)	28% (16)	Good idea 58% (33)
The rehabilitation program for people iving with COVID-19 was: (level of challenge/ skill/ effort)	Too easy 2% (1)	5% (3)	Just the right difficulty 72% (41)	16% (9)	Too difficul 5 % (3)
	Too simple 0%	9% (5)	Just the right difficulty 79% (45)	12% (7)	Too comple 0%
found the rehabilitation program for people living with COVID-19 to be: (interconnectedness/ multiplicity)	Useless 5 % (3)	2% (1)	Neutral 16% (9)	28% (16)	Helpful 49% (28)
	Annoying 2% (1)	2% (1)	Neutral 16% (9)	26% (5)	Pleasing 54% (31)

	Response rate % (n)				
Questions	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
My family and/or friends liked that I participated in the rehabilitation program.	56% (32)	23% (13)	17% (10)	2% (1)	2% (1)
The exercises provided in the program were relevant to me.	49% (28)	33% (19)	9% (5)	9% (5)	0
I see the need for this virtual rehabilitation program in my life.	51% (29)	31% (18)	9% (5)	4% (2)	5% (3)
I think I benefited from this exercise program.	49% (28)	33% (19)	10% (6)	4% (2)	4% (2)
I felt confident to perform all exercises without assistance.	61% (35)	21% (12)	7% (4)	9% (5)	2% (1)
It was easy to learn how to perform the exercises.	61% (35)	30% (17)	4% (2)	5% (3)	0
It was easy to connect with the kinesiologists via Zoom.	79% (45)	16% (9)	2% (1)	3% (2)	0
I wouldn't have been able to participate in the program if I didn't have a family member helping me during the sessions.	2% (1)	0	82% (47)*	2% (1)	14% (8)
I would recommend this virtual rehabilitation program to others.	58% (33)	25% (14)	12% (7)	0	5% (3)
The length of the program was good.	33% (9)	37% (21)	12% (7)	9% (5)	9% (5)
The number of exercises was good.	40% (23)	39% (22)	11% (6)	7% (4)	3% (2)
I intend to continue to do the exercises even after the program has finished.	42% (24)	39% (22)	11% (6)	5% (3)	3% (2)

*No family member was needed to help participants

Long-COVID satisfaction survey		
Response Rate (n)	93.4 % (57)	
Sex		
Male (n)	30% (17)	
Female (n)	70% (40)	

About the program		'extremely helpfu		
	Killesiologist	'kinesiologist too		
	Examinan	'exercises that cha		
	Exercises	'The program ma		
	Ducquom	'my intervention		
	Program setting	'I think it's a good		
	8	condition.'		
Impact on Health Education		'objectify my ab myself more real		
		'Over the course		
		'I've even been at moments that pro		
		'understanding of of taking into acc		
		'Small attainable		
Recomme	end to others	'I'd highly recom		

respondents (7%) found the program not suitable.

Kinesiologist	'The kinesiologist was very	
Exercises	'After most sessions I was up	
	'My independent sessions for	
	'Physical activity is not reco	
Program setting	'There was a non-negligible	
	'It would have been easier if would be scheduled, which of the participant'	
	'There was a non-negligible	
	'I wasn't able to recover from	
Impact on Health	'Now I'm back to running an	

Sı	uggestions
•	Longer p
•	Multidise

Most of the participants were highly satisfied with the virtual rehabilitation program. Further adaptations are required for those facing symptom exacerbation post-sessions.

Partners

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Positive comments

I, dynamic, versatile, and cheerful kinesiologist'

ok the time to explain the benefit of each exercise for my situation'

nallenged me without pushing me beyond my limits'

ade me feel alive again

with the Kin greatly helped me out of a PEM and worked me back to an appropriate sity and duration'

d idea to take us through a reconditioning program that's ADAPTED to our personal

lities a little more and to feel less guilty about what I wasn't managing to do, to set listic goals and to have more self-confidence by feeling supported

of the program, I felt a weekly improvement.'

ble to go on light mountain hikes again.... my exercise periods have become energizir ovide a better balance with the other energy-consuming elements of my daily life.

Thow to integrate activities gradually and dose them very gently, and of the importance count all the activities and demands of daily life in order to manage my energy.

goals, knowing the signs of when to stop pushing and learning to help my breathing. mend this program for people with a long Covid'

• Eight individuals (14%) commented negatively on how the program affected their symptoms. Four

Negative comments

difficult to understand and used a lot of English words'

inable to be productive later in the day.

or the most part gave me PEMs which I need to avoid.

ommended for people with long COVID'

cognitive load to adding this program to my weekly routine.

f the 8-week study would have allowed for periods of recovery where appointments would have allowed to adapt the frequency of the appointments based on the response

cognitive load to adding this program to my weekly routine.'

m the soreness and pains in between the appointments'

nd long walks. But cognitively I still have enormous difficulty.³

s given by the participants:

program to allow for extended recovery periods ciplinary approach

Conclusion











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