



EVIDENCE SYNTHESIS
IRELAND



Cochrane
Ireland

Evidence Synthesis Ireland Fellowship Scheme Review Identification Form

Review Centre/Group Mentor

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Review title

What is the evidence on the effectiveness of **non pharmacological interventions** aimed at the management and treatment of long COVID?

Review type and methods

Systematic review of clinical effectiveness

Review information

The Health Service Executive requested this review and the end users will be medical professionals. The review will be supported by HIQA's COVID-19 Expert Advisory Group, which includes a wide range of clinical experts and patient representatives.

Review details

The National Institute for Health and Care Excellence (NICE) define long COVID as signs and symptoms of COVID-19 that continue or develop after the acute phase of the disease. It includes both ongoing symptomatic COVID-19 (from 4 to 12 weeks) and post-COVID-19 syndrome (12 weeks or more). Long COVID is known by several names (for example, post-acute COVID-19, post-acute sequelae of SARS CoV-2 infection, long-term effects of COVID, and chronic COVID). This research question for this review is the fourth research question in a programme of work currently being undertaken by the HIQA COVID-19 Evidence Synthesis Team. The other research questions being undertaken are:

- Research question 1: What clinical guidelines and or models of care are currently available for the diagnosis and management of long COVID internationally? ([protocol](#))
- Research question 2: What is the epidemiology and clinical burden of long COVID internationally?
- Research question 3: Among those who have had a SARS-CoV-2 infection, what are the associations between risk/mitigation factors and development of long COVID?

The aim of this fourth research question is to undertake an international review of **non-pharmacological interventions** to manage and treat long COVID and determine the effectiveness of those interventions.

The research question will be formulated using the PICOS (population, intervention, comparator, study design) framework; the current draft version is presented in Table 1.

Table 1: PICO for research question 4

Population(s)	Individuals of any age: <ul style="list-style-type: none"> ▪ with a history of probable or confirmed SARS-CoV-2 ▪ and meet the criteria for long COVID (as defined in the NICE guidelines*).
Intervention(s)	Any non pharmacological interventions delivered at an individual-level aimed at the management or treatment of long COVID.
Comparator(s)	Placebo, no intervention or head-to-head comparison with alternative included intervention(s).
Outcome(s)	Primary outcome is reduction in long COVID symptoms, such as: <ul style="list-style-type: none"> ▪ cough ▪ fatigue ▪ breathlessness ▪ muscle and joint pain ▪ sleep problems ▪ loss of smell or taste ▪ low mood and depression ▪ anxiety ▪ brain fog Secondary outcomes are safety outcomes such as serious adverse events.
Study design(s)	The following studies will be included: <ul style="list-style-type: none"> ▪ randomised controlled trials (RCTs), non-RCTs and cohort studies using population-based registries or data ▪ systematic reviews and meta-analyses will be screened for eligible studies The following studies will be excluded: <ul style="list-style-type: none"> ▪ ongoing trials without published results ▪ trials that did not reach any study endpoint ▪ other observational studies such as case-control, case series and cross-sectional studies.

*Long COVID is commonly used to describe signs and symptoms that continue or develop after acute COVID-19. It includes both ongoing symptomatic COVID-19 (from 4 to 12 weeks) and post-COVID-19 syndrome (12 weeks or more).

As the COVID-19 pandemic continues, Ireland may face significant challenges with managing potentially larger numbers of individuals with long COVID. This review will inform decision-making in Ireland regarding the management and treatment of long COVID.

Review current status

This review has not started yet.

Specific/desirable requirements for Fellow

Familiarity with reading and appraising clinical literature would be desirable.

Estimated start and completion dates

It is estimated that this review will take 15 weeks, starting the week commencing 5 December 2022 and finishing the week commencing 27 March 2023.