

Last updated: 25 April 2021		
Symptom class	Common post COVID symptoms^a	Management strategies to consider
Neurological	Fatigue <i>Exercise intolerance and post-exertional malaise not alleviated by rest or sleep are typical</i>	Short term: ^{b,c} Manage as per recommendations for CFS/ME: ^{d,e} <ul style="list-style-type: none"> • Offer advice on improving quality of rest, energy conservation, relaxation training and pacing techniques • Consider CBT to address negative beliefs
	Sleep disturbance and unrefreshing sleep	Long-term: ^c Offer support for gradual increase in activities. Continue to manage as per recommendations for CFS/ME ^d Offer advice on sleep hygiene
Psychological	Anxiety, depression, mood swings	Screen patients for the emergence of psychological symptoms in the usual way Consider referral for counselling or further psychiatric evaluation as appropriate ^b
Other relevant conditions to consider when caring for patients following acute COVID-19 illness:		
COVID-related	Respiratory (shortness of breath, cough), thromboembolic, cardiovascular (breathlessness, chest pain)	
Non-COVID-related	Diabetes, thyroid dysfunction	

CBT, cognitive behavioural therapy ; CFS/ME, chronic fatigue syndrome/myalgic encephalitis.

a National COVID-19 Clinical Evidence Taskforce. Caring for people with COVID-19. Available at: <https://covid19evidence.net.au/>. Accessed April 2021

b Greenhalgh T, et al. BMJ 2020;370:m3026. Available at: <https://www.bmj.com/content/bmj/370/bmj.m3026.full.pdf>. Accessed April 2021.

c Gaber et al. Prog Neurol Psych 2021 ;25 :36-9. Available at : <https://wchh.onlinelibrary.wiley.com/doi/10.1002/pnp.698>. Accessed April 2021.

d CDC. Myalgic encephalomyelitis/chronic fatigue syndrome. Available at: <https://www.cdc.gov/me-cfs/treatment/index.html>. Accessed April 2021.

e The ME Association. Management. Available at: <https://meassociation.org.uk/about-what-is-mecfs/management/>. Accessed April 2021.

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