

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/covid-19-frontlines/assessing-the-long-term-impacts-of-covid-19/11843/>

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Assessing the Long-Term Impacts of COVID-19

Dr. Cooper:

There was a recent paper from Germany that described about 70% or 78% of patients with COVID-19 who had recovered had abnormalities on their cardiac MRI suggestive of either inflammation or scar. We don't know if those imaging features will translate into a higher rate of death or heart transplant or arrhythmias, but those people do need to be monitored because now the question is: Is there a risk? And this is relevant, of course, for athletes as well who may have fully recovered and feel pretty good and ready to go back to playing sports but should they have either advanced imaging or other less invasive studies, such as an EKG or MRI, EKG or echo, prior to clearance for sports participation?

What we know is that a substantial minority of those patients who have had COVID-19, when you do systematic MRI, have some abnormalities. These could be areas of scar, perhaps, or areas with more inflammation, like edema. However, the clinical consequences of those imaging findings have not yet been described in great detail. That's really important to have long-term follow-up in reasonably-sized populations. The markers that clinicians look for are ongoing or recurrent chest pain; sometimes exercise intolerance and fatigue can be a sign, early sign of heart failure, and that may trigger an EKG or troponin or even an echocardiogram.