

Long COVID prevalent in U.S. adults with prior COVID-19 infection

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Nearly 15 percent of U.S. adults with a prior positive COVID-19 test

reported current symptoms of long COVID, according to a study published online Oct. 27 in *JAMA Network Open*.

Roy H. Perlis, M.D., from Massachusetts General Hospital in Boston, and colleagues estimated the prevalence of and sociodemographic factors associated with long COVID. Analysis included data from participants in eight waves of an internet survey (Feb. 5, 2021, to July 6, 2022; 16,091 U.S. adults reporting test-confirmed COVID-19 illness at least two months prior).

The researchers found that 14.7 percent of respondents reported continued COVID-19 symptoms more than two months after acute illness, which represents 13.9 percent of those who tested positive for COVID-19, or 1.7 percent of all U.S. adults. Older age per decade above 40 years (adjusted odds ratio [OR], 1.15) and female gender (adjusted OR, 1.91) were associated with greater risk of long COVID. In contrast, individuals with a [graduate education](#) versus [high school](#) or less (adjusted OR, 0.67) and urban versus rural residence (adjusted OR, 0.74) were less likely to report long COVID. Long COVID was less likely with infection during periods when the epsilon variant (OR, 0.81) or the omicron variant (OR, 0.77) predominated. Risk for long COVID was also diminished with completion of the primary vaccination series prior to acute illness (OR, 0.72).

"This study suggests that long COVID is prevalent and that the risk varies among individual subgroups in the United States; vaccination may reduce this risk," the authors write.

More information: [Abstract/Full Text](#)

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