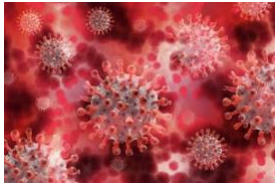


[Long Covid and Mental Health](#)

By Dr. Kristen Allott, ND, L.Ac.



It has been a challenging two years, with consequences for all of us! At various times, or perhaps throughout, we've each experienced physical, emotional, mental, and social stresses as we navigated the impacts of the pandemic. We may know people recovering from the virus and have a diagnosis of Long Covid. We may also know people who are struggling with extreme fatigue. This fatigue could be from fighting the virus or from, quite frankly, the consequences of the last two years of chaos.

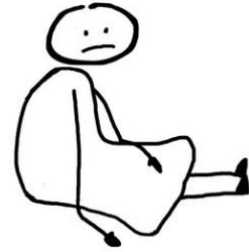
Long Covid is caused by lingering symptoms after being infected by one of the variants of the SARS-CoV-2 virus. However, I have also seen people who have just felt fatigued since the pandemic began - perhaps due to the infection or may be caused by other challenges that came with the pandemic.

In this article, I'm not going to sort out the causes of this fatigue, primarily because it's a combination of many things: infection, isolation, lack of routine, lack of social support, malnutrition, financial stress, increased substance and internet use, lack of movement, irregular sleep hours, historic trauma, and response to the vaccination, all layered alongside the trauma of living during a pandemic. (I want to be clear that I am in support of the vaccine, and some people have had adverse reactions to it, as with any medication)

What I want to discuss in this blog is what labs we should advocate for when there is fatigue and unresolved physical symptoms, including those on the CDC common symptoms list for Long COVID.

- Difficulty breathing or shortness of breath
- Cough
- Chest or stomach pain
- Diarrhea
- Dizziness on standing (lightheadedness)
- Change in smell or taste
- Mood changes
- Changes in menstrual period cycles
- Tiredness or fatigue
- Symptoms that get worse after physical or mental activities (also known as post-exertional malaise)
- Fast-beating or pounding heart (also known as heart palpitations)
- Difficulty thinking or concentrating (sometimes referred to as "brain fog")
- Headache
- Joint or muscle pain
- Pins-and-needles feeling
- Sleep problems
- Fever
- Rash

One of the things I find striking about the above list is how common these were in my patients even before COVID. When somebody is experiencing tiredness and/or fatigue, it can easily lead to depression, and - likewise - depression can lead to tiredness and fatigue. (For the geeks out there, a common cytokine, Interleukin 6, is known to contribute to both depression and fatigue). Fatigue can cause and be caused by a whole host of other physiological, hormonal, and neurological problems. These disruptions can be caused by stress, trauma, lack of adequate nutrition, poor sleep, and the lack of movement—most of these were disrupted during the last two years.



As we move out of the acute phase of the Covid pandemic, I have some concerns that the physical fatigue caused during the last two years will just be diagnosed as a mental health condition. Not having enough physical laboratory diagnoses isn't a new problem, it's just likely going to be exaggerated in this (almost) post-pandemic phase.

Additionally, we need to recognize that most medical professionals have also experienced additional trauma from the pandemic. It's in our own best interest to help them as much as possible to understand that we are not at our best and that we want to align with them to be curious to why we are fatigued.

If you're experiencing extreme fatigue, or supporting someone dealing with fatigue and depression, and/or anxiety, it's helpful to start differentiating these symptoms before you meet with your healthcare provider. The [PROMIS Profile](#), from [Health Measures](#), referenced on the CDC website, can be helpful to bring to the provider to start this conversation.

Next, we need to advocate for basic labs that are helpful in assessing fatigue, especially with accompanying depression. Here are some of the labs that the CDC and I both think are important to assess in this post COVID world:

Basic physiology testing: These tests are like checking the oil and gas level in your car.

- Complete Blood Count (CBC) looks at the functioning of red and white blood cells and platelets.
- Comprehensive Metabolic Panel (CMP) looks at electrolytes, liver function, and kidney function.
- Urinalysis looks at what your kidneys are excreting, and for urinary tract infections

Inflammation markers:

- C-Reactive Protein (CRP) is an inflammation marker. Inflammation needs to be low, and as it goes up, people experience fatigue and depression.
- Ferritin is an iron storage molecule that often seems to increase with a Covid infection and is considered an inflammation marker. However, Ferritin levels below 50 ug/ml can cause fatigue and depression in women.

Thyroid Function: TSH and T4. Thyroid hormone significantly impacts our energy levels. Hashimoto's thyroiditis is a common thyroid condition and can increase after high inflammation events such as covid.

Vitamin D: Low Vitamin D has been linked to worse outcomes with COVID respiratory viruses in general; it is linked to cancers and autoimmune conditions.

Autoimmune function tests: Stressful events can increase the likelihood of autoimmune disease. There is some concern that people post COVID will have more autoimmune diseases such as Celiac, Hashimoto's thyroiditis, Guillain-Barré syndrome, cold agglutinin syndrome (CAS), and autoimmune hemolytic anemia. Sometimes these conditions start slow and build over time. Catching the spike in antibodies against these early helps lower the damage they can do. Here are some tests to request depending on your symptoms:

- Antinuclear antibody, Thyroid antibody, Celiac Panel

My recommendation is to create a document before your appointment with your primary care provider. In the document include the following:

- The questions that you want to be addressed in the appointment
- List all your symptoms and the consequences of those symptoms on how you are living your life
- A timeline outlining when the symptoms started and what you have tried
- List all the supplements and medications that you are currently taking
- List what labs you would like to have done and why



This document will not only help you make the most of the small amount of time that you have with the provider, but it will help you communicate more clearly.

Be sure to ask the provider to add this document, as well as the PROMISE Profile, to your chart. Your medical chart is legally yours and you can add your own notes to the file.

[Here is a link to additional resources that discuss labs.](#)

If you use this material, [please let us know if it was helpful!](#)