

Vocational Rehabilitation for Patients with Post COVID-19

Improvement on Quality of Life, Physical Function and Return to Work



S.C.M. Oberink^{a,b}, J. Nachtegaal^a, M. Oudshoorn^a, C.A.M. van Bennekom^{a,c}
^a Heliomare Research and Development, Heliomare Rehabilitation Center, Wijk aan Zee; ^b Vrije Universiteit Amsterdam, Medische Faculteit, Amsterdam; ^c Department of Occupational and Public Health, Amsterdam University Medical Center, Amsterdam



Introduction

- Four out of five post COVID-19 patients were on parttime or fulltime sick leave as of March 2023. Evidence-based guidelines for post COVID-19 are lacking, especially for vocational rehabilitation.
- Purpose of this study was to assess if a Vocational Rehabilitation (VR) program improves quality of life, physical functioning, and return to work for post COVID-19 patients.

Methods

Participants

- A total of 91 post COVID-19 patients who were referred to Heliomare rehabilitation center and finished the VR program.

Outcome measures

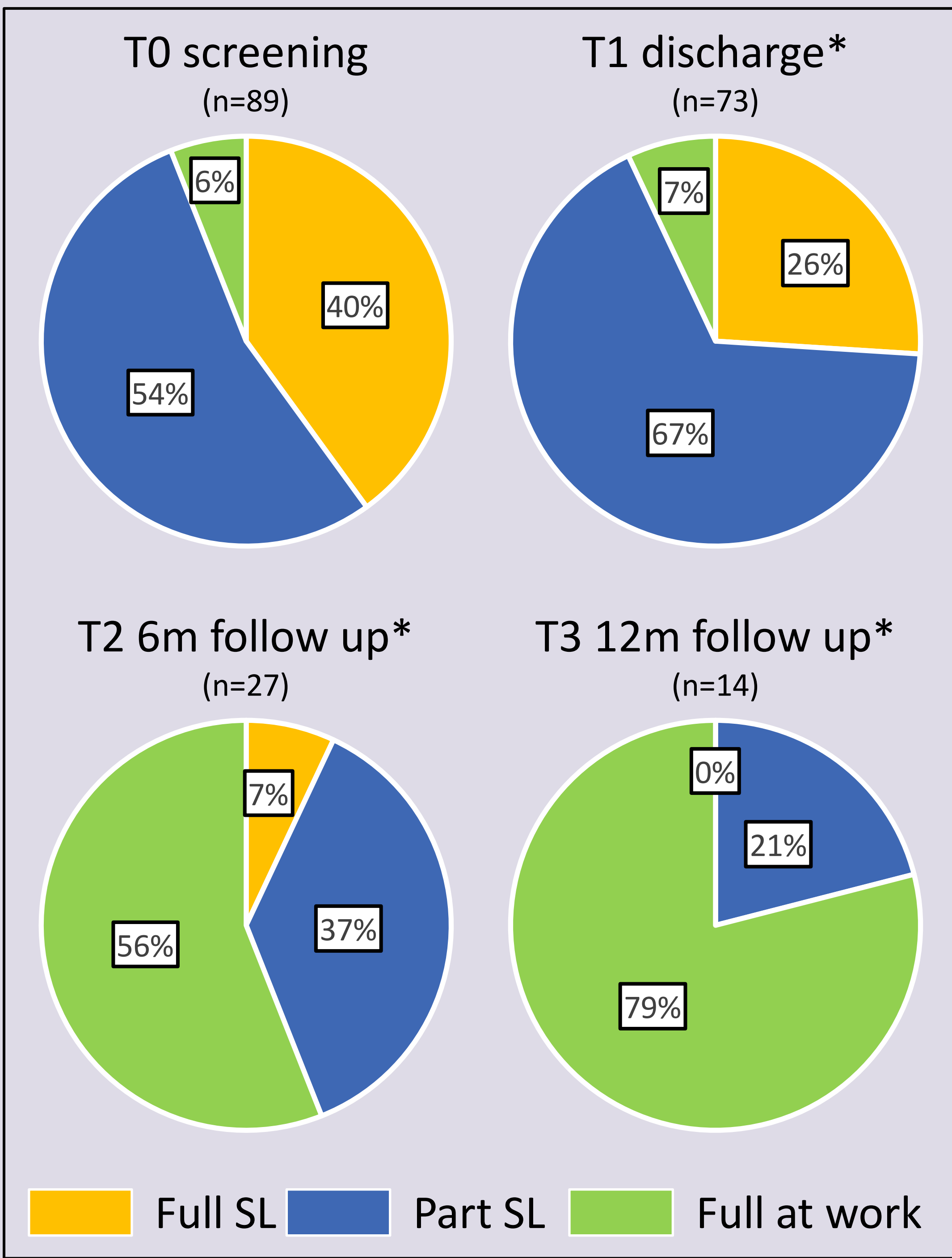
- Patient reported questionnaires were filled in at screening (T0), discharge (T1), 6 months follow-up (T2) and 12 months follow-up (T3).
- Outcomes: quality of life (EQ5D), pain (PDI & NRS), physical functioning (RAND-PF), perceived effect of treatment (GPE), health related productivity loss (iPCQ) & work ability (WAI).

Characteristics of participants

| Characteristics | VR (n=91) |
|-----------------------|-------------|
| Age | 48.7 (10.1) |
| Sex (female %) | 64.8 |
| BMI | 27.9 (6.2) |
| Hospitalized (yes %) | 14.3 |
| ICU (yes %) | 3.3 |
| Work Sector (%) | |
| Health and wellbeing | 31.5 |
| Education | 20.2 |
| Commercial service | 15.7 |
| Public sector | 14.6 |
| Industry | 11.2 |
| Construction industry | 2.2 |
| Other | 4.5 |

Values are presented as mean (SD) or number (%) of patients
BMI= body mass index;
ICU= Intensive Care Unit

Results on work participation



SL: Sick leave,
*: Significant difference ($p < 0.05$) between time point compared to screening (T0)

Results on quality of life, physical functioning & work ability

| | T0 | T1 | T2 | T3 | |
|---------------------------|-------------|--------------|--------------|--------------|---------|
| | mean (SD) | mean (SD) | mean (SD) | mean (SD) | p value |
| EQ5D (0-1) | | | | | |
| T0 vs T1 (n=61) | 0.64 ± 0.23 | 0.76 ± 0.19* | | | <0.001 |
| T0 vs T2 (n=22) | 0.71 ± 0.18 | | 0.82 ± 0.16* | | 0.032 |
| T0 vs T3 (n=9) | 0.61 ± 0.25 | | | 0.78 ± 0.16 | 0.069 |
| RAND-PF (0-100) | | | | | |
| T0 vs T1 (n=71) | 60.0 ± 19.6 | 71.5 ± 21.0* | | | <0.001 |
| % hours working | | | | | |
| T0 vs T1 (n=68) | 31.5 ± 31.0 | 35.5 ± 32.1 | | | 0.224 |
| T0 vs T2 (n=26) | 39.7 ± 37.0 | | 79.6 ± 32.5* | | <0.001 |
| T0 vs T3 (n=14) | 31.3 ± 36.0 | | | 91.1 ± 20.4* | <0.001 |
| General WAI (0-10) | | | | | |
| T0 vs T1 (n=70) | 3.2 ± 2.2 | 4.9 ± 2.5* | | | <0.001 |
| T0 vs T2 (n=27) | 3.5 ± 2.4 | | 5.9 ± 2.4* | | <0.001 |
| T0 vs T3 (n=14) | 3.1 ± 1.9 | | | 7.4 ± 1.2* | <0.001 |

WAI: Work Ability Index, T0: screening, T1: discharge, T2: 6 months follow-up, T3: 12 months follow-up
*: Significant difference ($p < 0.05$) between time point compared to screening (T0)

Conclusions

The VR program improved QoL, physical functioning, and return to work for post COVID-19 patients for at least a period of 6-months follow-up. Due to insufficient data from the 12-months follow-up, conclusions regarding sustained recovery should be taken with precaution.

Contact

Sophie Oberink and Janneke Nachtegaal | A Heliomare R&D, Relweg 51, 1949 EC Wijk aan Zee, Netherlands
| E s.c.m.oberink@student.vu.nl and j.nachtegaal@heliomare.nl | www.heliomare.nl/RandD