

## Long Covid Fact Sheet

### Most recent data:

- **2 million** people are estimated to have Long Covid for at least 4 weeks in England and Scotland: 3.3% of the population ([ONS data](#) published 25/04/2024)
- **30.6% or 732,000** have been unwell for at least 3 years
- Estimated **1 million** have had symptoms two years or more
- Approximately **87%** were reported as symptomatic for **12 weeks or longer**
- **1.5 million** people or 74.7% have symptoms adversely affecting their lives
- **381,000 (19.2%)** are severely limited in their ability to undertake their day-to-day activities - **this is larger than the entire population of Nottingham or Leicester**
- **111,800** children aged 3-17 affected by Long Covid - **an 80% increase on 2023 figures**

### Health Service and workforce

- The percentage of healthcare workers who had long covid for over **12 months** is estimated at **3.26%** ([ONS](#) - March 2023)
- A 2023 [BMA survey](#) of 600 doctors dealing with the after effects of Covid showed **1 in 5 of respondents were unable to work** and almost half are no longer able to work full-time
- [Estimates](#) suggest that **1.82m working days** were **lost by healthcare workers** with Long Covid between March 2020 and September 2021
- Lack of mandated mask wearing in healthcare settings presents a barrier for staff and patients engaging with services who want/need to avoid infection. [Reinfection](#) presents a risk to those with Long Covid in terms of exacerbating symptoms
- [Excess healthcare costs](#) for each person with Long Covid compared to those unaffected is estimated to be **more than £2000 per year**. This translates to more than £4bn per year cost to the NHS - **4% of its entire budget or £20bn over the next 5 years**. For reference, the NHS spends £10bn a year on [diabetes](#) and £7.4bn on [cardiovascular disease](#)
- The University of Birmingham published a modelling study that estimated that Long Covid [primary care consultations alone could cost over £23 million each year](#)

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### Case Studies

1. **Nurse:** working in ITU caught Covid and became very ill with Long Covid. Initially her employers were supportive and allowed her to work from home. However she then faced prejudice and insistence that her work had to be done at her workplace.. She has now left the NHS to work from home.
2. **GP:** caught Covid on the frontline in April 2020. Initially she managed to continue working, but later collapsed and now has cognitive dysfunction and severe fatigue. The Covid vaccine caused loss of sensation and power from waist down and she is now in a wheelchair. She has lost her job, and was not supported in her bid to keep her licence to practise, where she faced the hurdle of two exams of two hours each.
3. **Hospital consultant:** caught Covid working on the frontline and subsequently developed Long Covid. His family life broke down, he lost his housing, and is now living with his parents miles away. He would have been able to continue to work if he had been offered support to work 2-3 hours a day, building up

very gradually. Instead he is unemployed and on benefits, rejected by the NHS due to being unable to work at previous levels.

### UK wider workforce issues

- The percentage of the workforce impacted by Long Covid longer than 12 weeks estimated by [ONS](#) (2023) is between **5.47%** (Social care) and **2.36%** (agriculture)
- [Economic modelling](#) suggests Long Covid will cost the economy **£1.5bn/year** if numbers remain at around 2 million
- [An Economist report published in April 2024](#) estimated that in the UK, Long Covid could result in lost work hours with a value **equal to 0.5% GDP** this year.
  - An estimated **251.8m work hours** will be lost in 2024
  - Nearly  $\frac{2}{3}$  of these lost work hours are from those who have left the workforce, but over  $\frac{1}{3}$  are from those who have reduced their hours or continued working the same schedule after infection but need to take time off sick
- Lack of availability of support
  - There is a lack of awareness of Long Covid in the workplace and that it may be [classified as a disability](#). As a result, people with Long Covid **struggle to stay in work** without reasonable adjustments.
  - A [survey by the TUC](#) showed that roughly **half of the respondents** were not given the support/changes they needed to either continue in work or return to work.

### Education issues

- Although measures to prevent the spread of SARS-CoV-2 in schools have been shown to be [effective](#) in preventing transmission, children were not considered 'at risk' from Covid-19 and so mitigations to protect them in the UK have not been prioritised.
- Children with Long Covid [report](#) feeling 'overlooked and neglected', and consider that they have been failed by education services
- Long Covid severity and prevalence in children is frequently [underestimated](#)
- This [study](#) found that for children and young people with Long Covid, attending school is 'extremely difficult'. School responses were reported to be mixed and hampered by a lack of awareness of Long Covid among healthcare and education professionals.

### Equality Issues

- Lack of recognition of Long Covid's impact leads to disparities in workplace support. Difficulty in [qualifying for financial aid PIP](#) highlights systemic barriers.
- Poor public health messaging fosters [misinformation and under-recognition](#), affecting support.
- [Disbelief by some GPs](#) results in inconsistent diagnosis and treatment, hindering healthcare access. Limited booster vaccine access increases risks for Long Covid sufferers.
- Long Covid's economic burden disproportionately affects people on low incomes. Children and young people with Long Covid need targeted support in education and social development. Women, ethnic minorities, and people on low incomes face exacerbated [health and socioeconomic inequalities](#).

See also: [House of Commons Research Briefing on Long Covid](#)

## Long Covid: Recommendations

- 1) Allow for revalidation, and review registration rules to **enable affected NHS staff & GPs to stay in the workforce**. For those affected, support working from home, flexibility, reduced hours; environments that benefit those with Long Covid but also a wider range of disabilities.
- 2) Review the **benefits** system to enable those with fluctuating symptoms to work a few hours a week without losing essential support. This could avoid significant financial hardship and encourage people to attempt a gradual return to their jobs.
- 3) Invest in **research** for Long Covid: most public grants were allocated in 2021 and very little since. We are calling for at least **£80 million/year**. Research will lead to the development of treatments to help get people get their lives back
- 4) Make **public indoor spaces** – especially healthcare facilities - safer especially for those who need to avoid reinfection. Improvements to **ventilation**, and the use of air filtration and effective **masks** will reduce the transmission of Covid and other pathogens and cut sick leave
- 5) **Public messaging** on current infection rates and information about how people can help protect themselves will also help bring down prevalence of airborne diseases such as Covid

## Long Covid SOS

A charity run by volunteers, all with lived experience of Long Covid, Long Covid SOS was established in July 2020 in response to the growing number of people who were not recovering from a Covid infection. Since that time, the organisation has become a registered charity and works with many UK and worldwide institutions to further their aims of recognition, research and rehabilitation for people living with Long Covid. The charity is currently focussing on representing the Long Covid community at the UK Covid Inquiry and providing evidence-based information to professionals and the public.

