

Functional Recovery of Individuals with COVID-19 Admitted to Inpatient Rehabilitation: A Cohort Study

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BACKGROUND & GOALS

There is minimal information on the typical functional recovery of individuals with COVID-19 admitted to inpatient rehabilitation facilities (IRFs) and the factors that may predict rehabilitation trajectories. This study characterizes the clinical course of these individuals in inpatient rehabilitation, including encountered complications and identifying patient-specific socioeconomic and medical factors that may be related to functional improvement.



DESIGN

Demographics						
	Number (%)	Estimated Final Number				
Site						
Shirley Ryan AbilityLab	61 (46%)	130				
Marianjoy Rehab Hospital	10 (8%)	50				
Alexian Brothers Rehab Hospital	63 (47%)	62				
Total	134	220-250				
Age						
Mean	64.4					
Standard Deviation	13.3					
Min	23					
Max	92					
Sex						
Male	52	39.1%				
Female	81	60.9%				
Race						
White	36	40.9%				
Black	27	30.7%				
Native American	1	1.1%				
Asian	5	5.7%				
Hispanic	19	21.6%				
Primary language						
English	91	76.5%				
Spanish	15	12.6%				
Other	13	0.1%				
Insured						
Yes	132	99.2%				
No	1	0.8%				
Table 1: Demographics						

This study is a multi-center retrospective chart review of adult subjects (age ≥18) who were initially hospitalized in acute care for COVID-19 systemic infection and subsequently admitted to an IRF. The primary outcome was change in Functional Independence Measures (FIM) and Quality Indicator (QI) scores from admission to discharge from inpatient rehabilitation. The relationship between patient-specific factors and FIM/QI scores was assessed using regression analysis.

	nisto			
		# of Subjects	% of Subjects with Positive History	Prevalence in US General Population
	Diabetes	45	54%	10.5%
	Hypertension	61	73%	45.4%
	Coronary Artery Disease	16	20%	6.7%
	Chronic Obstructive Pulmonary Disease	2	2%	6.2%
	Chronic Kidney Disease	22	27%	15%
	Pulmonary Hypertension	0	0%	
Medical	Asthma	8	10%	
INICALA	Hyperlipidemia/ dyslipidemia	50	60%	53%
	Neurologic disorder	7	8%	
	Pregnancy	0	0%	
	Immunosuppressed	4	5%	
	Coagulopathy	3	4%	
	Active cancer (at date of diagnosis of COVID-19)	4	5%	
Surgical	Lobectomy (lung)	0	0%	
	Depression	13	43%	
	Anxiety	10	40%	
Psychiatric	Bipolar	2	9%	
	Schizophrenia ADHD	0	0% 0%	
	Former smoker	11	50%	
	Current smoker (prior to COVID hospitalization)	0	0%	
	Marijuana	2	10%	
Substance	eCigarrettes / Vaping	0	0%	
	Alcohol use disorder	3	14%	
	IVDU (active or historic)	0	0%	
	Opiate use disorder	0	0%	
Other	Family member with COVID	4	21%	
	Healthcare	10	42%	
Occupation	Non-healthcare	4	17%	
	Unemployed	10 listorical Fa	42%	

RESULTS

Patients with COVID-19 (n=134) admitted to IRF had a mean age of 64.4 years (±13.3); 60.9% female; 40.9% white, 30.7% black, 21.6% Hispanic. These individuals had significant co-morbidities including hypertension (73%), diabetes (54%), chronic kidney disease (27%), coronary artery disease (20%). The most common complications during inpatient rehabilitation were urinary tract infection (8.21%), new/increased oxygen uses a country of the common companies of the common services of the country of t

Functional Scores at Admission and Discharge								
		Mean Admission Score	Mean Discharge Score	Percent Increase	p (paired t-test)			ercent Increase from Admission Discharge in 735 non-COVID-19 Patients at Shirley Ryan
	Eating	4.52	5.73	27%	<0.0001	.44 to -0.99	116	28%
	Oral Hygiene	4.03	5.63	40%	<0.0001	.79 to .42	123	40%
	Shower, bathe self	2.88	4.6	60%	<0.0001	-2.07 to .38	83	67%
	Upper body dressing	3.03	5.33	76%	<0.0001	-2.52 to -2.08	120	80%
	Lower body dressing	2.33	4.82	107%	< 0.0001	-2.73 to -2.24	121	106%
	Footwear on/off	2.02	4.73	134%	< 0.0001	-3.02 to -2.40	120	136%
	Toileting hygiene	2.37	4.74	100%	<0.0001	-2.65 to -2.10	117	90%
Quality Indicators (QI)	Chair, bed to chair transfer	2.72	5.16	90%	<0.0001	-2.64 to -2.23	115	83%
	Toilet transfer	3.01	5.14	71%	< 0.0001	-2.39 to .87	85	63%
	Tub/shower transfer	3.13	6.72	115%	0.0673	-7.46 to 0.27	32	Data not available
	Walk 10 feet	2.88	5.34	85%	<0.0001	-2.79 to -2.14	64	57%
	Walk 50 feet w/ turns	3.12	5.39	73%	<0.0001	-2.67 to .87	33	41%
	Wheel 150 feet	3.36	4.55	35%	0.1336	-2.79 to 0.43	11	77%
	Wheel 50 feet with turns	3.15	4.85	54%	<0.0001	-2.36 to .04	20	60%
	4 steps	2.79	5.18	86%	<0.0001	-3.04 to .75	38	25%
	Total (composite) QI	45.34	77.91	72%				62%
Functional Independence Measures (FIM)	Comprehension	5.54	6.18	12%	<0.0001	-0.83 to -0.43	68	
	Expression	5.5	6.12	11%	<0.0001	-0.88 to -0.35	68	
	Social interaction	5.54	6.13	11%	<0.0001	-0.87 to -0.33	67	
	Problem solving	4.76	5.62	18%	<0.0001	.08 to -0.62	68	
	Memory	4.88	5.59	15%	<0.0001	-0.96 to -0.46	59	Data not available
	Bowel % of continence	81.61	88.69	9%	0.076	-14.90 to 0.75	109	and the special sections
	Bladder % of continence	84.87	92.27	9%	0.0038	-12.36 to -2.45	106	
	Total (composite) FIM	26.22	29.64	13%				
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System	Complication	# Affected	% Affected	Additional Details	
	Paloy	2	1.49%	R radial pales, CN IV paley	
	Seigures	1	0.75%	Breakthrough, in setting of epillepsy	
	Headache		0.75%		
Neuro	Tinnitus	1	0.75%		
Neuro	L foot paraethesia		0.75%		
	Encephalogathy	1	0.75%	1 viral, 1 secondary to UTI	
	Seasons	,	1.49%	1 presumed due to UTI	
	Stroke	ő	0.00%		
	New or increased 02 requirement	4	2.99%		
	New Respiratory Failure	2	1.49%		
Respiratory	COPD exacerbation		0.00%		
	Asthma exacerbation	0	0.00%		
	Mucus plugging	0	0.00%		
	Orthostatic hypotension	7	5.22%		
	Anhythmias	5	3.72%	4 sinus tachycardia, 1 sinus bradycardia	
	Check gain	4	2.99%		
				1 acute-on-chronic lymphedema, 1 peripheral	
Cardiac &	Edema	3	2.24%	1 scute-on-chronic synghedema, 1 perspheral edema. 1 volume overload	
Vascular				SURFIN, A VALUE OF LAND	
	DVT or extension of pre-existing DVT	3	2.24%	2 new DVT, 1 extension of pre-existing DVT	
	Meeding	1	0.75%		
	PE	0	0.00%		
	MI	0	0.00%		
	New urinary incontinence Diarrhea	2	1.49% 0.75%		
			0.75%		
Gastrointestinal	Billary colic Transaminitis	1	0.75%	Secondary to statin	
		1		ancompany or trains	
	Possible distal esophageal stricture	1	0.75%		
	Requires new indwelling uninary	,			
Renal &	catheter or intermittent	2	1.49%		
Genitourinary	catheterization Hematuria		1.49%		
Gentournary	AVI	1	0.75%		
	Epdidymitis		0.75%		
	New depression or adjustment	3	2.26%	1 depression, 2 adjustment disorder	
	disorder			Largerman, 2 augustinens unsaran	
Psychiatric	New Anxiety	2	1.49%		
	New episade of SI	1	0.75%	In patient with baseline depression	
	HT1	11	9.71%		
	Osteomyelitis sacrum	2	1.49%	1 unstageable, 1 suspected	
	Sepsis	1	0.75%		
Infectious	Shingles	1	0.75%		
	C difficile	1	0.75%		
	Viral pneumonia	0	0.00%		
	Racterial pneumonia	0	0.00%		
Endocrine	Increased insulin requirement or hyperphysemia	2	1.49%		
	New pressure injury New cash	3	2.24% 1.49%		
Dermatologic	New rash Folicultis		0.75%		
	Crusted pustule on L foot	1	0.75%		
	Olecranon burnitis	1	0.75%		
MSK	TMI dydunction	1	0.75%		
	Hypomagnesemia	1	0.75%		
Electrolytes	Hyperkalemia	1	0.75%		
	Hypokalemia	1	0.75%		
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Table 4: Complications during acute inpatient rehabilitation course, by organ system					







CONCLUSIONS

- Individuals with COVID-19 make significant functional gains in inpatient rehabilitation. Although these patients generally have significant co-morbidities, these do not appear to impact their overall recovery in rehabilitation.
- Further analysis is on-going to assess other laboratory and disease-related markers that may be related to outcome, with a cohort of approximately 250 subjects so far.

REFERENCES