

## Weill Cornell Medicine



## Background

- Patients with acute SARS-CoV-2 infection can develop long-term symptoms known as PASC or "long COVID."<sup>1</sup>
- The World Health Organization outlines PASC as symptoms that last at least 2 months in individuals with a history of probable or confirmed SARS-CoV-2 infection. Symptoms may persist from acute COVID-19 illness or be new onset, occurring within 3 months of acute illness.<sup>2</sup>
- PASC can negatively impact psychosocial functioning<sup>3</sup> and involves neuropsychiatric symptoms such as anxiety, depression, and post-traumatic stress.<sup>4</sup>
- Group psychotherapies have successfully been applied in various medical illnesses to mitigate psychological burden.<sup>5</sup>
- To our knowledge, we present the first described group psychotherapy for patients with PASC.

## **Participant Trajectory**

### Screening

Participants were recruited via hospital referral networks and phone call screening.

Participants with greater impact on daily functioning, difficulty adapting to loss of function, and ongoing identity diffusion were interpreted to likely benefit from ongoing group psychotherapy.

#### First Meeting

At their first meeting, participants were asked to reflect on the course of their post-COVID recovery.

Common themes were highlighted by group facilitators in order to integrate individual experiences into the larger group identity and promote a sense of belonging.

The overall goal was to facilitate coping with a disruption to baseline functioning due to PASC.

Group members were periodically asked to evaluate their progress, set goals for the future, and take steps to accomplish these goals with the support of fellow group members.

# A Group Psychotherapy for Patients with Post-Acute Sequelae of COVID-19 (PASC)

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### Goal Setting

#### **Group Structure**

Open; 3-12 participants; supportive psychotherapy modality; Zoom.

#### **Inclusion Criteria**

Medium-high psychosocial baseline. Experiencing PASC with significant impact on functioning and wellbeing.

#### **Exclusion Criteria**

Severe psychiatric or cognitive symptoms impairing ability to participate in group.

 Table 1 Group therapy protocol.

### Age ra

Sex

PASC sympt

#### **Psych** comor

Table 2 SOB=s depres anxiety stress

### Hopelessn

- Grieving the prior he
- Difficulty assessing due to symptom fluc
- Concern about inabi lead a fulfilling life
- Finding hope despit continued illness

#### Alienation

- Invalidation
- Envy of those with
- uncomplicated recoveries
- Lack of understanding in medical community
- Information sharing

Figure 1. Therapeutic themes of group therapy for PASC.

ange	24-59
	9 female: 1 male
toms	Post-exertional malaise, fatigue, brain fog, insomnia, SOB, tachycardia, migraines, neuropathy, diminished appetite, hair loss, thromboembolic events
niatric rbidity	MDD, GAD, PTSD, panic disorder, agoraphobia
2. Group member characteristics. shortness of breath; MDD=major ssive disorder; GAD=generalized y disorder; PTSD=post-traumatic disorder.	
eess ealthy self progress ctuation ility to e	
- No evidence-based	
<ul><li>treatment options</li><li>Unknown trajectory of</li></ul>	
illness & functioning	

- Concerns about re-infection

- Group identity was shaped by the common experience of poorly understood COVID-19 sequelae impacting physiologic and psychosocial functioning. Members connected over shared invalidation experienced in their individual lives.

- patients' individual lives.

- and identity consolidation.

#### **References:**

## - NewYork-Presbyterian

## **Group Process**

- The range in type and severity of symptoms and affected functioning was utilized by facilitators in order to explore transference reactions and draw parallels to challenges in the

- Members displayed psychological responses akin to grief, such as denial, anger, bargaining, and depression. This was formulated as grieving the prior healthy self, with disruptions in the grief process leading to identity diffusion.

- Major themes were identified in order to facilitate the process of moving toward acceptance of the circumstances of their PASC, and developing areas of life that would provide fulfillment and re-establish a sense of self.

 Anxiety about COVID-19 reinfection was socially impairing, and was common due to fear of complications with ongoing PASC. As members progressed, they systematically

addressed these anxieties to bring increased fulfillment. - Members verbalized benefit from the opportunity for

belonging and acceptance, accountability, and support from each other through conflicts and life transitions.

- Reasons for dropout included financial burden, poor distress tolerance, and progression in achieving goals of adaptation

### Conclusion

- Patients with PASC experience a variety of psychological challenges that can be addressed in group psychotherapy.

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