



UEMS PRM Section and Board

EUROPEAN UNION OF MEDICAL SPECIALISTS
Section of Physical and Rehabilitation Medicine
European Board of Physical and Rehabilitation Medicine

UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
Section de Médecine Physique et de Réadaptation
Collège Européen de Médecine Physique et de Réadaptation



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UEMS PRM Section and Board Statement

“Rehabilitation for persons with COVID-19”

Health systems in Europe are being challenged to address the health needs of persons suffering from COVID-19. The response of health systems has been initially focused on acute care and, once vaccines were available, on vaccination programming. So far, less attention has been given to the need to scale up rehabilitation to minimize the individual and societal burden of the long-term consequences of COVID-19.

Rehabilitation after COVID-19 is clearly an investment and not a cost. By means of rehabilitation, patients have a better chance to regain their functional ability, improving their lives and returning more quickly to socially productive activities according to recent scientific studies.

Rehabilitation for persons who currently suffer from COVID-19 should address all limitations in functioning and not simply aspects related to a single organ system, such as the pulmonary system. It is well recognized that limitations in functioning after COVID-19 span a broad range of body functions - including physical, cognitive and emotional functions - and impact all domains of activities and participation. There is a rapidly growing number of studies reporting severe consequences of COVID-19 on persisting activity limitations and participation restrictions months after the infection, in more than 60% people discharged from hospital. In response to this situation, the Physical and Rehabilitation Medicine Section and Board of the European Union of Medical Specialists (UEMS-PRM) has developed standards for the documentation of functioning limitations for various rehabilitation service types in Europe and the specific situation of persons with COVID-19 in acute, post-acute and long-term context. These standards provide the universal basis for patient-centered and interdisciplinary rehabilitation projects led by a PRM physician in shared decision-making with all the health professionals involved in the rehabilitation process.

Rehabilitation after COVID-19 must be offered across the continuum of care from acute care to care in the community, including rehabilitation services at home, nursing homes, and specialized life-long follow-up rehabilitation. It should consider the needs of specific populations such as the elderly and persons with comorbidities and disability. The broad and innovative range of rehabilitation service types offered across Europe allows Health Ministries to choose and implement rehabilitation services that are best suited to address rehabilitation needs after COVID-19.

The UEMS-PRM supports a range of international activities that identify rehabilitation interventions relevant for persons with COVID-19; this includes the Cochrane Rehabilitation REH-COVER action. WHO has also launched a free online course, "Clinical management of patients with COVID-19 – Rehabilitation of patients with COVID-19".

The standards and guidance provided by UEMS-PRM are available to national Ministries of Health through national delegates with an in-depth knowledge of their health care system and an understanding on how to best address the challenges involved in the scaling up of rehabilitation for persons with COVID-19. UEMS PRM would like to express its commitment to providing advice to Ministries of Health throughout Europe in their rehabilitation response to ensure the health and quality of life of persons with COVID-19 and long COVID-19.

With kind regards,

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Mauro Zampolini

President of the UEMS PRM Board
Nikolaos Barotsis



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