Deriving and validating a risk prediction model for long COVID a population-based, retrospective cohort study in Scotland

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- A debilitating multi-system condition, estimated to affect **10–20%** of people infected with COVID-19
- **Diverse symptoms**, including fatigue, shortness of breath, and cognitive issues.
- Symptoms can last for months or years, leading to deterioration in quality of life.

AIM: Improve understanding of risk factors, identify modifiable characteristics, inform therapies and healthcare planning.







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PROBABILITY OF LONG COVID BY AGE, SEX, VARIANT





IMPLICATIONS

Our findings....

- Support vaccination as a protective measure against long COVID
- Highlight **parenteral anticoagulants** as a candidate for research into



Parentera	anticoagulants
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Herpes simplex and varicella-zoster (antiviral) - Compound bronchodilator preparations - Macrolides (antibacterial) -		1.35 (1.23, 1.49); p < 0.001 1.47 (1.31, 1.64); p < 0.001 1.53 (1.43, 1.63); p < 0.001
Systemic nasal decongestants -		1.61 (1.28, 2.03); p < 0.001
	Severity of acute infection	
Hospitalised within 28 days of PCR test-	•	1.49 (1.44, 1.54); p < 0.001
	1 3 Adjusted Odds Ratio (95%	10 CI)





Calibration slope 0.93 95% CI 0.91 – 0.95

therapeutic interventions.

- Offer personalised risk scores
 - to inform decision-making

around COVID-19 exposure

WHAT NEXT?

External validation in English data



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