Supplementary Table S1: The summary of included studies

	Title	First author name, journal, year	Country	Study design	Participants number	Follow-up period	Follow-up duration	Objective	Findings
1	Anxiety and depression in COVID-19 survivors: Role of inflammatory and clinical predictors.	Mario et al, *Brain Behav Immun*, 2020.	Italy	Prospective cohort	402	Post hospital discharge	1 month/ 31.29 ± 15.7	Investigate the psychopathological impact of COVID-19 in survivors.	28% for PTSD, 31% for depression, 42% for anxiety, 20% for OC symptoms, and 40% for insomnia.
2	Post-discharge symptoms and rehabilitation needs in survivors of COVID-19 infection: A cross-sectional evaluation.	Stephen J Halpin et al, J *Med Virol* 2020.	UK	Cross-sectional	100	Post hospital discharge	4 to 8 weeks (mean 48 days)	Measure the prevalence of post-COVID-19 symptoms.	Breathlessness (65.6%) in ICU group and 42.6% in ward group) and psychological distress (46.9% in ICU group and 23.5% in ward group)
3	Medium term follow-up of 337 patients with coronavirus disease 2019 (COVID-19) in a Fang cang shelter hospital in Wuhan, China	Nao Yan et al, *Front Med*, 2020.	Wuhan, China	Prospective study	337	Post hospital discharge	7.5 IQR (6–13) days	Surveillance of recovered patients	Cough/expectoration (13.1%, 3rd day) congestion/dyspnea (6.6%, 3rd day, 8.6%, 7th day, and 10.4%, 14th day); also fatigue and myalgia

4	Early clinical and socio demographic experience with patients hospitalized with COVID-19 at a large American healthcare system.	Cian P. McCarthy et al, *EClinicalMedicine*, 2020	Boston, Massachusetts, USA	Case series	213	Post hospital discharge	80 IQR, 68- 84) days	Identify COVID-19 patients readmitted to hospitals.	Persistent COVID-19 symptoms (18.2%) pneumonia (13.6%) and pulmonary embolism (9.1%).
5	Psychological distress and its correlates among COVID-19 survivors during early convalescence across age groups.	Xin Cai, et al, *Am J Geriatr Psychiatry*, 2020	China	Cross-sectional (Survey)	126	post healing	14 days	Examine the psychological distress and the associated predictor factors	The survivors aged 60 or above experienced less symptoms of severe stress response, depression, and anxiety than younger survivors
6	Clinical features and outcomes of discharged coronavirus disease 2019 patients: a prospective cohort study	Xingyu Wang et al, *QJM*, 2020.	China	Prospective, Cohort study	131	Post hospital discharge	4 weeks	Investigate clinical outcomes of COVID-19 patients after recovery.	Cough (29.01%), fatigue (7.63%), chest tightness (6.11%), dyspnea (3.82%), chest pain (3.05%) and palpitation (1.53%). These symptoms constantly decreased in 4 weeks after-discharge.
7	Clinical characteristics and short term outcomes after recovery from COVID-19 in	Farhana Akter et al, *Diabetes Metab Syndr*, 2020	Bangladesh	Cross-sectional, observational	734	Post Cure	4 weeks	Compare the clinical manifestations and long-term complications among the diabetic	Individuals with diabetes (40%) were found to have significantly ($P < 0.05$) higher levels of pain

	patients with and without diabetes in Bangladesh							and non-diabetic COVID-19 patients.	than those without diabetes (27.3%)
8	Characterization of patients who return to hospital following discharge from hospitalization for COVID-19.	Sulaiman S. et al, *J Gen Intern Med.* 2020	USA	Retrospective, Cohort study	2864	Post hospital discharge	14 days	Evaluate the reasons to return hospital after discharge	Respiratory distress (50%).
9	The landscape of cognitive function in recovered COVID-19 patients.	Hetong Zhou et al, *J Psychiatr Res*, 2020	China	Observational (cross-sectional)	29	Post hospital discharge		Evaluate the impacts of COVID-19 on cognitive functions	cognitive impairments exist even in patients recovered from COVID-19
10	Residual clinical damage after COVID-19: A retrospective and prospective observational cohort study.	Rebecca De Lorenzo et al, *PLoS One*, 2020	Italy	Retrospective and prospective observational, cohort	185	Post hospital discharge	23 (20-29) days	Investigate whether COVID-19 causes residual dysfunction	(31.3%) dyspnea, (22.2%) tachypnea, (5.4%) malnourished, (25.4%) new-onset cognitive impairment.
11	COVID-19 is associated with clinically significant weight loss and risk of malnutrition, independent of hospitalization: A	Luigi Di Filippo et al, *Clin Nutr*, .2020	Italy	Prospective cohort study	213	Post hospital discharge	23 (23-30) days	Assess the incidence of unintentional weight loss and malnutrition in COVID-19 survivors	Greater systemic inflammation (C-reactive protein 62.9 [29.0-129.5] vs. 48.7 [16.1-96.3] mg/dL, Impaired renal function (23.7% vs. 8.7% of patients, and longer

	post-hoc analysis of a prospective cohort study								disease duration 32[27-41] vs. 24 [21-30] days in those patients compared to healthy survivors.
12	Clinical characteristics of recovered COVID-19 patients with re-detectable positive RNA test.	Jianghong An et al, *Ann Transl Med*, 2020	China	Retrospective cohort	262	Post hospital discharge	14 days	Identify the characteristics, significance and potential cause of positive SARS-CoV-2 diagnoses in recovered	Fewer symptoms but similar plasma antibody levels during RP patients' hospitalization compared to NRP patients.
13	Clinical characteristics of "re-positive" discharged COVID-19 pneumonia patients in Wuhan, China.	Shengyang He et al, *Sci Rep*,2020.	China	Retrospective study	267	Post hospital discharge	14 days	Analyze the clinical characteristics of re-positive discharged COVID-19 patients	Coughing (21%), phlegm (13%), palpitate (34%), chest tightness (25%), paracenesthesia (12%) and fatigue (48%) were common residual symptoms post recovery.
14	Clinical sequelae of COVID-19 survivors in Wuhan, China: a single-center longitudinal study.	Qiutang Xiong et al, *Clin Microbiol Infect*,2021	China	Telephone follow-up survey prospective observational	538	Post hospital discharge	97 days (95-102)	Assess the risk factors for the main clinical sequelae in COVID-19 survivors	Clinical sequelae were general symptoms (49.6%), respiratory symptoms (39 %) Cardiac symptoms (13%), psychosocial symptoms (22.7%) and alopecia (28.6%)

15	Cardiac involvement in patients recovered from COVID-2019 identified using magnetic resonance imaging.	Lu Huang et al, *JACC Cardiovasc Imaging*, 2020.	China	Retrospective cohort	26	Post hospital discharge	47 days (IQR: 36 to 58 days)	Evaluate cardiac involvement in COVID-19 survivors.	(31%) patients had decreased right ventricle functional parameters including ejection fraction, cardiac index, and stroke volume.
16	Predictive factors for a new positive nasopharyngeal swab among patients recovered from COVID-19.	Francesco Landi, *Am J Prev Med* 2020	Italy	Observational study prospective study	131	Post hospital discharge	55.8 (SD=10.8) days 30.0 (SD=14.2)	Identify the risk factors associated with persistent positive nasopharyngeal swab.	(16.7%) tested Positive again. Some symptoms such as fatigue (51%), dyspnea (44%), and coughing (17%) were still present in a significant percentage of the patients
17	Incidence of post-traumatic stress disorder after coronavirus disease.	Min Cheol Chang et al, *Healthcare (Basel)*,2020	Korea	Telephone interviews	64	Post hospital discharge	75.7 ± 20.0 days	Investigate the prevalence of post-traumatic stress disorder (PTSD) among patients with COVID-19	20.3% of the patients had PTSD
18	Follow-up study of the pulmonary function and related physiological characteristics of COVID-19 survivors three	Yu-miao Zhao et al , *EclinicalMedicine*, 2020	China	Retrospective , multicenter cohort study	55	Post hospital discharge	3 months	The long-term pulmonary function and related physiological characteristics of COVID-19 survivors	The presenting symptoms included gastrointestinal (GI) symptoms (30.91%), headache (18.18%), fatigue (16.36%), exertion dyspnea (14.55%), as well as

	months after recovery.								cough and sputum (1.81%).
19	Stigma in coronavirus disease-19 survivors in Kashmir, India: A cross-sectional exploratory study.	Shabir Ahmad Dar et al, *PLoS One*, 2020.	India	Cross-sectional	91	Post hospital discharge	11.7±5.1 [Range(R) = 7–21] days	Assess the magnitude and correlates of stigma in these survivors.	98% of survivors provided at least one stigma endorsing response
20	'Long-COVID': a cross-sectional study of persisting symptoms, biomarker and imaging abnormalities following hospitalization for COVID-19.	Swapna Mandal et al , *Thorax*,2021.	U.K.	Cross-sectional study	384	Post hospital discharge	median 54 days (IQR 47–59)	Provide the first report of physical and psychological symptom burden, blood markers	53% reported persistent breathlessness, 34% cough and 69% fatigue. 14.6% had depression.
21	Persistent symptoms 3 months after a SARS-CoV-2 infection: the post-COVID-19 syndrome.	Yvonne M.J. et al, *ERJ Open Res*, 2020.	Netherlands and Belgium	Cross-sectional	2113	Post-COVID-19 syndrome (post-recovery)	79±17 days	Assess whether multiple relevant symptoms recover following the onset of symptoms.	Fatigue and dyspnea were the most prevalent symptoms during the infection.

22	Assessment and characterization of post-COVID-19 manifestations.	Marwa Kamal et al, *Int J Clin Pract*, 2021.	Egypt	Cross-sectional	287	Post hospital discharge		Investigate and characterize the manifestations which appear after eradication of the coronavirus infection	Fatigue (72.8%), anxiety (38%), joints pain (31.4%), continuous headache (28.9%), chest pain (28.9%), dementia (28.6%), depression (28.6%) and dyspnea (28.2%).
23	Patient outcomes after hospitalization with COVID-19 and implications for follow-up: results from a prospective UK cohort	David T Arnold et al, *Thorax*, 2021	UK	Prospective cohort (observational study)	131	Post hospital discharge	90 days (IQR 80–97 days)	A systematic clinical follow-up of COVID-19 survivors.	(74%) had persistent symptoms (breathlessness and excessive fatigue). clinically significant abnormalities in chest radiograph, exercise tests, blood tests and spirometry.
24	Post-discharge health status and symptoms in patients with severe COVID-19.	Himali Weerahandi, et al, **Pre-Print**,2020.	USA	Prospective cohort study	161	Post hospital discharge	30-40 days	Characterize overall health, physical health and mental health of patients.	Participants also rated their physical health and mental health as worse in their post-COVID state
25	Nailfold capillaroscopy findings in patients with coronavirus disease 2019: Broadening the spectrum of COVID-19	Gerlando Natalelloa et al, *Microvasc Res*, 2021.	Italy	Prospective study	54	Post hospital discharge	31.6 ± 9.3 days	Assess microvasculature through nailfold video capillaroscopy (NVC) in COVID-19 patients.	Enlarged capillaries (85.2% of patients), meandering capillaries (81.4% of patients), and pericapillary edema (70.4% of patients).

	microvascular involvement.								
26	Follow up of patients with severe coronavirus disease 2019 (COVID-19): Pulmonary and extra-pulmonary disease sequelae.	Ayham Daher et al, *Respir Med*, 2020.	Germany	Prospective study	33	Post hospital discharge	6 weeks 56 (48–71)	Evaluating pulmonary and extra pulmonary sequelae of COVID-19 after recovery	(33%) had dyspnea, (33%) had cough, and 15 (45%) suffered from fatigue.
27	Residual Lung Injury in Patients Recovering From COVID-19 Critical Illness: A Prospective Longitudinal Point-of-Care Lung Ultrasound Study	Abdulrahman Alharthy et al, *J Ultrasound Med*, 2021.	Saudi Arabia	Prospective observational study	127	Post hospital discharge	2 months/ 4 months	Track Lung Ultrasound findings of critically ill COVID-19 patients for 4 months after hospital discharge.	(48.8%) had difficulty breathing, were complaining of fatigue, and were unable to completed 6-minute walk test.
28	Comprehensive health assessment three months after recovery from acute COVID-19	Bram van den Borst, *Clin Infect Dis*, 2021.	Netherlands	Prospective observational study	124	Post-recovery - Post hospital discharge	13.0 (2.2) weeks/ 10 (1.7) weeks	Assess lung Function impairment, and residual pulmonary parenchymal abnormalities.	99% of patients had decreased ground-glass opacities (GGO).

29	Psychopathological profile in COVID-19 patients including healthcare workers: the implications.	D.P.R. Chieffo et al, *Eur Rev Med Pharmacol Sci*, 2020.	Italy	Cross-sectional	34	Post hospital discharge	4 months	Investigate the psychological impact and psychopathological outcome of patients affected by COVID-19	frequently reported items: "Nervousness or shakiness inside", "Feeling blue," "Feeling fearful"
30	Clinical status and lung function 10 weeks after severe SARS-CoV-2 infection.	Jelle Smet et al, *Respir Med*, 2021.	Belgium	Cross-sectional study	220	After recovery	74 ±12 days / 10 weeks	Assess the residual symptoms, lung function and chest CT after recovery in the outpatient clinic (for 10 weeks after COVID-19 pneumonia)	(38%) had restrictive pulmonary function, Fatigue (66%) and dyspnea (47%)
31	Short-term Neuropsychiatric Outcomes and Quality of Life in COVID-19 Survivors.	Raul Mendez et al, *J Intern Med*, 2021.	Spain	Prospective study	179	Post hospital discharge	2 months	Evaluate neurocognitive function, and psychiatric symptoms.	Delayed verbal memory (11.8%), verbal fluency (34.6%), anxiety 29.6%, depression (26.8%), and post-traumatic stress disorder (25.1%).
32	Cardiopulmonary exercise testing in COVID-19 patients at 3 months follow-up	Piero Clavario et al, *Int J Cardiol*, 2021.	Italy	Prospective, Cohort study	200	Post hospital discharge	3 months	Determine functional capacity of Non-severe COVID-19 survivors.	(80.0%) patients reported at least one disabling symptom. (59.0%) patients complained of dyspnea, of whom (27.0%) were in NYHA class III/IV,

									(31.5%) had chest pain, (57.5%) had fatigue, and (25.5%) complained of palpitations.
33	Medium-term effects of SARS-CoV-2 infection on multiple vital organs, exercise capacity, cognition, quality of life and mental health, post-hospital discharge.	Betty Raman et al, *EclinicalMedicine*, 2021.	UK	Prospective cohort	85	Post-hospital discharge	3 months	Measure the effects of COVID-19 on multiple organ health, exercise Capacity	64% of patients experienced persistent breathlessness and 55% complained of significant fatigue.
34	Chest radiography is a poor predictor of respiratory symptoms and functional impairment in survivors of severe COVID-19 pneumonia	Rebecca F. et al, *ERJ Open Res*, 2021.	UK	Prospective single-centre observational cohort study	119	Post-hospital discharge	2 months 61 (51–67) days	Assess COVID-19 survivors	Fatigue (68%), sleep disturbance (57%) and breathlessness (32%).
35	Three-month outcomes in hospitalized COVID-19 patients	Jude PJ Savarraj et al, **Pre-Print,** 2020	USA	Prospective single-center study	48	Post hospital discharge	3 months	Characterize long-term neurologic outcomes after COVID-19.	71% of the patients still experienced neurological symptoms at 3 months. Fatigue (42%) and PTSD (29%).

36	A prospective study of 12-week respiratory outcomes in COVID-19-related hospitalizations	Aditi S Shah et al, *Thorax* 2020	Canada.	Prospective consecutive cohort	60	Post recovery follow-up for 12 weeks	12 weeks	Describe the long-term health outcomes in COVID-19 survivors.	pulmonary function variable was abnormal in 58% of patients
37	Immunity status of Health Care Workers post recovery from COVID-19: An online longitudinal panel survey	Shah S B, Chawla et al, **Pre-Print** 2020.	India	Prospective longitudinal panel survey questions	151	Post recovery	1-2 months	Shed light on the immunity status of Health care workers	Chronic fatigue (33.11%), breathlessness (13.25%), body ache (4.64%), headache (3.31%), myalgia, joint pain, lower limb pain and gastritis.
38	Pulmonary function and health-related quality of life after COVID-19 pneumonia.	Talman, S Boonman-de Winter et al, *Respir Med*, 2021.	Netherlands	Prospective longitudinal cohort study	101	Post hospital discharge	6 weeks	Examine the impact of COVID-19 pneumonia on pulmonary function.	The majority of COVID-19 pneumonia survivors had abnormal diffusion capacity six weeks.
39	Chest CT in COVID-19 pneumonia: what are the findings in mid-term follow-up	Seyed Mohammad H.Tabatabae et al, *Emerg Radiol*, 2020.	Iran	Retrospective study	52	Post hospital discharge	3 months 91 ± 15.5 days	Assess the rate of complete resolution, and determine the individuals at risk for residual abnormalities.	(57.7%) demonstrate complete resolution of pulmonary findings.

40	Cognitive deficits in people who have recovered from COVID-19 relative to controls: An N= 84,285 online study.	Adam Hampshire et al, *EclinicalMedicine*,2020.	UK	Cross-sectional study	84285	Post recovery		Reveal neurological problems in severely affected COVID-19 patients.	Hospitalized patients showed large-medium scaled global performance deficits dependent on whether they were or were not put onto a ventilator.
41	Care dependency in non-hospitalized patients with COVID-19.	Anouk W. Vaes et al, *J Clin Med*, 2020.	Netherlands and Belgium	Cross-sectional study	1837	Follow up long-term symptoms for 3 months	79 ±17 days	Explore the level of care Dependency.	The care-dependent patients had a higher prevalence of mild to very severe fatigue (100.0% vs. 94.5%), muscle weakness (100.0% vs. 86.2%), pain (96.9% vs. 86.2%), headache (86.2% vs. 72.4%), and fever (46.2% vs. 28.3%)
42	Plasma Metabolomic Profiles and Clinical Features in Recovered COVID-19 Patients Without Previous Underlying Diseases 3 Months After Discharge.	Wang Sufei, **Pre-Print,** 2020	China	Prospective study	135	Post hospital discharge	3 months	Profile the plasma metabolites in asymptomatic, moderate, and severe and critical COVID-19 patients.	This study showed that the alterations in plasma metabolite profiles in recovered asymptomatic, moderate and critical patients progressed gradually as compared with health control.

43	Airway, voice and swallow outcomes following endotracheal intubation and mechanical ventilation for COVID-19 pneumonitis: preliminary results of a prospective cohort study.	Benjamin Miller, Chrysostoms et al, *Br J Surg*, 2021.	UK	Retrospective cohort study	141	Post-hospital discharge	6-12 week	Impact of COVID-19 critical illness on Laryngotracheal morbidity.	The COVID–19 cohort demonstrated higher overall rates of self-reported airway dyspnoea, voice and swallow difficulties (airway 59% vs 44% and 31%, voice 40% vs 19% and 19%, swallow 21% vs 6% and 12%).
44	Clinical and immune-serological status 12 weeks after infection with COVID-19: prospective observational study	Lucía Valiente-De Santis et al, **Pre-Print** 2020.	Spain	Prospective, single-center study	108	Post hospital discharge	12 weeks	Assess the functional status, persistence of symptoms and immune serological situation.	75.9% presented some type of symptoms, with dyspnea being the most common. A D-dimer >500 ng/mL was detected in (31.4%) patients.
45	Persistence of symptoms and quality of life at 35 days after hospitalization for COVID-19 infection	Laurie G. Jacobs et al, *PLoS One*, 2020.	USA	Prospective cohort study	183	Post hospital discharge	35 ± 5 days	Estimate the persistent COVID-19 symptoms in survivors	fatigue (55.0%), dyspnea (45.3%), muscular pain (51%) were the persistent symptoms
46	Follow-up study on serum cholesterol profiles in recovered COVID-19 patients.	Guiling Li et al, *BMC Infect Dis*, 2021	China	Prospective cohort study	107	Post hospital discharge	100 (96, 116) days (3–6) months	Estimate lipid levels have improved in recovered patients	LDL-c and HDL-c levels were significantly higher at follow-up than at admission in

									severe/critical cases ($p < 0.05$).
47	Dyspnea, lung function and CT findings three months after hospital admission for COVID-19	Tøri Vigeland Lerum et al, *Eur Respir J*, 2021.	Norway	Prospective cohort study	103	Post hospital discharge	3 months	Describe self-reported dyspnea, quality of life	Half of all participants had persistent dyspnea on exertion.
48	Smell and taste loss in COVID-19 patients: assessment outcomes in a Victorian population	Lukas Horvatha et al, *Acta Otolaryngol* 2021.	Australia	Retrospective, descriptive study	102	Post recovery follow up of long-term symptoms	83 ±19.2 days (Three months)	Assess the frequency of olfactory and gustatory disturbances.	High rates of smell (65%) and taste disturbance (63%) were noted.
49	Three-Month Follow-Up Study of Survivors of Coronavirus Disease 2019 after Discharge.	Limei Liang et al, *J Korean Med Sci*, 2020	China	Prospective observational follow-up study	76	Post hospital discharge	3 Months	Characterize 3-month outcomes of patients who survived COVID	Most of the survivors had symptoms including fever, sputum production, fatigue, diarrhea, dyspnea, cough, chest tightness on exertion and palpitations in the three months after discharge.
50	Outcomes of cardiovascular magnetic resonance imaging in patients recently recovered from coronavirus	Valentina O Puntmann et al, *JAMA Cardiol*, 2020.	Germany,	Prospective observational cohort study,	100	After recovery follow-up	71 (64-92) days	Evaluate the presence of myocardial injury.	High-sensitivity troponin T (hsTnT) was detectable (greater than 3 pg/mL) in patients recently recovered from COVID-19 (71%) and significantly elevated

	disease 2019 (COVID-19).								(greater than 13.9 pg/mL) in patients (5%).
51	Pulmonary Dysfunction in Patients Recovered from COVID-19 Pneumonia: A 6-Month Follow-up Study.	Xianglin Meng et al, *Radiology*, 2020.	China	Prospective Cohort Study	46	Post recovery follow-up	3 months /6-months	Evaluate clinical features and pulmonary functions.	Pulmonary interstitial changes due to COVID-19 pneumonia gradually reverse over time, pulmonary dysfunction is common.
52	High Prevalence of Pulmonary Sequelae at 3 Months after Hospital Discharge in Mechanically Ventilated Survivors of COVID-19.	Rob J.J. van Gassel et al, *Am J Respir Crit Care Med*, 2021	Netherlands	Prospective Cohort Study	94	Post hospital discharge	2 Month	Long term respiratory sequelae persist in severe COVID-19	High prevalence of diminished diffusion capacity
53	Long COVID in the Faroe Islands-a longitudinal study among non-hospitalized patients.	Maria Skaalum Petersen et al, *Clin Infect Dis*, 2021.	Faroe Islands,	Prospective longitudinal study	180	Follow-up of Long COVID for non-hospitalized patients.	81 days & 125 days.	Present long-lasting COVID-19 symptoms.	The most prevalent persistent symptoms were fatigue, loss of smell and taste, and arthralgia
54	Persistent symptoms after Covid-19: qualitative study of 114 “long Covid”	Emma Ladds et al, *BMC Health Serv Res*, 2020.	UK	Prospective cohort	114	Post hospital discharge	3 Month	Document patients with long COVID.	Confusing illness with many, varied and often relapsing-remitting symptoms; a heavy

	patients and draft quality principles for services.								sense of loss and stigma;
55	Cardiopulmonary recovery after COVID-19–an observational prospective multi-center trial	Thomas Sonnweber et al, *Eur Respir J*, 2021.	Australia;	Prospective, multi-centre, observational study	145	2nd follow-up of post-COVID 19 patient for persistent symptoms	63 (± 23) days	Evaluate the cardiopulmonary damage in subjects recovering from COVID-19.	Dyspnea being most frequent (36%) and Cardiac impairment
56	Multiorgan impairment in low-risk individuals with post-COVID-19 syndrome: a prospective, community-based study	Andrea Dennis et al, *BMJ*, 2021.	UK	Prospective, longitudinal	201	Post recovery	140 (IQR 105-160) days (3 months)	To assess medium-term organ impairment in symptomatic individuals following recovery from acute SARS-CoV-2 infection.	70% of patients have impairment in one or more organs 4 months after initial COVID-19 symptoms. Fatigue (98%), Muscle aches (88%), breathlessness (87%), and headaches (83%)
57	Long Covid and the role of physical activity: a qualitative study.	Helen Humphreys et al, *BMJ*, 2020.	United Kingdom	Qualitative (Semi-structured interviews)	18	Long COVID follow-up		Explore the lived experience of Long COVID	It highlights the physical and social isolation experienced by people with Long COVID.

58	Follow-up of adults with noncritical COVID-19 two months after symptom onset	Claudia Carvalho-Schneider et al, *Clin Microbiol Infect*, 2021.	France	Retrospective cohort	150	2 months follow-up post symptoms onset	32.7 ± 2.5 days. 59.7 ± 1.7 days	Describe the clinical evolution and predictors of symptom. Comment: the study compared the symptoms severity and the appearance of new symptoms at day 7 during COVID 19 and post infection at day 30 and day 60.	Persisting symptoms were defined by the presence at Day 30 or Day 60 of at least one of the following: weight loss 5% severe dyspnea or asthenia.
59	Persistence of COVID-19 Symptoms after Recovery in Mexican Population	Carlos E. Galván-Tejada et al, *Int J Environ Res Public Health* 2020	Mexico	Case-control study	219	Post recovery	14 days or more	Identify the risk of persistent symptoms in recovered from COVID-19	The presence of a post-COVID syndrome in which symptoms persist with diff errant frequency after recovering.
60	Pre-existing conditions are associated with COVID patients' hospitalization, despite confirmed clearance of SARS-CoV-2 virus	Colin Pawlowski et al, *EclinicalMedicine*, 2020.	USA	Retrospective cohort	1355	Post recovery	90 days	Identify complications which are enriched in the hospitalized post-clearance cohort	The most significantly phenotypes are: pleural effusion (relative risk: 4.2, 95% C.I.: [2.1, 7.9], cardiac arrhythmias (RR: 5.3, 95% C.I.: [2.1, 12], and hyperglycemia (RR: Infinity, 95% C.I.: [1.8, 5,400].

61	Bidirectional associations between COVID-19 and psychiatric disorder: retrospective cohort studies of 62 354 COVID-19 cases in the USA	Maxime Taquet et al , *The Lancet Psychiatry*, 2021.	USA	Retrospective cohort	44779	After diagnosis	3 months	Assess whether a diagnosis of COVID-19 was associated with increased rates of subsequent psychiatric diagnoses.	The most frequent psychiatric diagnosis following COVID-19 was anxiety disorder
62	Three-month pulmonary function and radiological outcomes in COVID-19 survivors: a longitudinal patient cohort study.	Xuejiao Liao et al, *Open Forum Infect Dis*, 2020.	China.	Longitudinal patient cohort study	172	Post hospital discharge	90 (88-95) days.	Investigate pulmonary function and radiological outcomes	6.40% still present pulmonary function abnormality,
63	Clinical characteristics and post-intensive care outcomes of COVID-19 pneumonia	C NM, Lakey SM et al, *Int J Clin Pract*, 2020	Ireland	Retrospective Case series	31	Post ICU discharge follow-up	65 days	Evaluate the quality of life at a virtual post-intensive care	COVID-19 survivors have a marked functional and psychological morbidity impacting quality of life

64	The Kids Are Not Alright: A Preliminary Report of Post-COVID Syndrome in University Students	Julie Walsh-Messingeret al, **Pre-Print** 2020	USA	Cross-sectional	148	Post recovery		Investigate the prevalence and features of protracted symptoms in non-hospitalized university students who experienced mild-to-moderate acute illness.	91% of COVID-19 positive participants reported “full recovery” from acute illness, 51% continued to experience protracted symptoms, of which 59% had persistent symptoms for ≥50 days.
65	Psychological Consequences of Survivors of COVID-19 Pneumonia 1 Month after Discharge	Hye Yoon Park et al, *J Korean Med Sci*, 2020.	South Korea	Cross-sectional	10	Post hospital discharge	1 month	Investigate psychological problems in COVID-19 patients.	10% reported depression, patients with high perceived stigma tended to have higher scores for PTSD symptoms.
66	Finding the 'right' GP: a qualitative study of the experiences of people with long-COVID	Tom Kingstone et al, *BJGP*, 2020.	China	Qualitative methodology, with semi-structured interviews	24	Post recovery	Interviewed patients with Long COVID	Explore experiences of people with persisting symptoms following COVID-19 infection.	‘Hard and heavy work’ enduring and managing symptoms and accessing care; living with uncertainty, helplessness and fear, particularly over whether recovery is possible

67	Mental Health Status of Survivors Following COVID-19 in Wuhan, China: A Descriptive Study	Chaomin Wu et al, **Pre-Print,** 2020	China	Descriptive case series	370	Post discharge	22 days (20-30 days)	Report the post-discharge mental health status for these survivors and explore relevant influence factors	(16.2%) survivors had post-discharge cough and (12.2%) had breathlessness after activity. (5.4%) survivors had sputum production during the follow-up.
68	Olfactory dysfunction in patients after recovering from COVID-19	Martin Sylvester Otte et al, *Acta Otolaryngol*, 2020	Helsinki, Finland	Cross-sectional Survey	91	Post recovery	57.94 (±1.40) days	Determine the olfactory function of COVID-19 recoveries by a detailed olfactory test.	53.8% showed an olfactory performance within the normal range.
69	Mental health among COVID-19 survivors and healthcare workers exposed to COVID-19 in Wuhan, China: a cross-sectional study	Bin Chen et al, **Pre-Print** 2020.	China	Cross-sectional, survey-based study	20	Post recovery		Evaluate mental health status of COVID-19 survivors and healthcare workers, and the impacting factors.	Psychological health status among all participants in Wuhan, China was not very serious, and the main problems were anxiety and psychoticism.