

Authors	Year	Publication date	Title	Journal	Study aim	Study design	Study design details	Setting	Study location	Data collection start	Data collection end	Survey administration mode	N recruited	N analysed	QoL measure(s)	Clinical outcome(s)	QoL values	QoL conclusions	Clinical conclusions
S. Kowal, C.D Ng, R Schuld, D Sheinson, R Cookson	2022	01/10/2022	The Impact of Funding Inpatient Treatments for COVID-19 on Health Equity in the United States: A Distributional Cost-Effectiveness Analysis	Value in Health	To evaluate how Medicare funding of inpatient COVID-19 treatments affected health equity	A distributional cost-effectiveness analysis	A distributional cost-effectiveness analysis looking at the impact of race and ethnicity, social vulnerability index	USA	Hospitals	Unclear	Unclear	NA	NA	NA	Used age-adjusted, sex-based QALY weights for the general US population from Sullivan and Ghushchyan for baseline QALE across the subgroups	NA	Unclear	NA	COVID-19 treatments increased overall population health and reduced inequality
A. E. Karaogullarindan, S. O. Tuhanioglu, B. Kuran, G. Gorgulu, O.	2021	Not clear	Sleep quality in patients over 65 years of age in the covid-19 pandemic	Turk Geriatri Dergisi	Measuring COVID-19 inpatients' sleep quality, anxiety and depression	Case-control study	Cross-sectional comparison of COVID-19 positive and non-COVID patients	Turkey	Hospital	15/02/2021	15/03/2021	Not clear	71 COVID, 71 non-COVID	71 COVID, 71 non-COVID	Pittsburgh Sleep Quality Index (PSQI); Beck Depression Index; Beck Anxiety Index	None	53.5% of COVID patients had poor sleep quality compared to 43.0% of non-COVID patients (p=0.011); 66.2% of COVID patients had positive anxiety symptoms compared to 59.2% of non-COVID patients (p=0.088); SF-36 physical component scores were 58.1 (inpatients), 58.2 (quarantined) and 57.2 (general population) with no significant differences; SF-36 mental component scores were 51.2 (inpatients), 49.5 (quarantined),	Poor sleep quality, anxiety and depression were observed for COVID-19 inpatients aged >65	NA
S. A.-A. Ouanes, H. Hussein, N. B. Khan, F. Al Shahrani, A. David, P. Wali, A. B. Thapur, M. Al. Karim, M. A. Al Maslamani, M. Al-Ansari, Z. Ghuloum, S.	2021	13/12/2021	Physical and Psychosocial Well-Being of Hospitalized and Non-Hospitalized Patients With COVID-19 Compared to the General Population in Qatar	Frontiers in psychiatry Frontiers Research Foundation	Comparing HRQoL of COVID-19 inpatients, COVID-19 quarantined patients and the general population	Case-control study	Cross-sectional	Qatar	Hospital; quarantine; general population	Jul-20	Sep-20	Phone; online	141 COVID-19 inpatients, 99 quarantine d with COVID-19,	99	SF-36	None	87 had PSQI<5, 102 had PSQI>=5; 17% of good sleepers above HADS anxiety threshold vs 9% for poor sleepers (p=.131);	COVID-19 patients' HRQoL was better than expected, possibly due to support, access to mental health care, and enhanced resilience on recovering from COVID-19	NA
T. M. B. Akinci, H.	2021	28/01/2021	Relationship between sleep quality and the psychological status of patients hospitalised with COVID-19	Sleep Medicine	Measuring COVID-19 inpatients' sleep quality	Cross-sectional study	Comparing outcomes for participants with good	Turkey	Hospital	Apr-20	May-20	Not clear, probably paper	207	189	Pittsburgh Sleep Quality Index (PSQI); Hospital Anxiety-Depression Scale (HADS)	Hospital length of stay	Presence of co-morbidities; resuscitation rate; COVID-19 severity;	COVID-19 patients with poor sleep were more likely to be above the HADS depression scale	Mean LOS was 6.18 days for patients with good sleep, vs 8.23 for patients with poor sleep (p=0.002)
F. K. Bounoua, A. Moubachir, H. Serhane, H.	2021	25/11/2021	Evaluation of the quality of life in patients treated for COVID-19 at the Hassan II hospital in Agadir using the MOS SF-36 questionnaire	EUROPEAN RESPIRATORY JOURNAL	Measuring COVID-19 inpatients' QoL	Cross-sectional study	Cross-sectional	Morocco	Hospital	Sep-20	Nov-20	Not clear	85	85	SF-36	Not clear	40.1% had a PHQ-9 score over 24 indicating depression; depression was more likely among older people, females; unmarried/separated people; people with substance abuse	COVID-19 negatively affected QoL, with lower SF36 scores with severe and critical COVID-19 compared to moderate; age,	58% of patients had comorbidities; 51.5% had severe and 17.6% had critical COVID-19; 40.2%
S. Chakrabarti	2021	04/10/2021	Mental health in hospitalised COVID 19 patients in quarantine during second wave in a south Indian private teaching hospital	Journal of Multidisciplinary Healthcare	Find risk factors for poor mental health outcomes in COVID-19 inpatients with mild/moderate disease	Cross-sectional study	Cross-sectional	India	Hospital (non-ICU)	Apr-21	Jun-21	Online	635	590	Patient health questionnaire-9 (PHQ-9); Bangla Insomnia Severity Index (BISI); suicidal ideation (binary choice)	None	COVID-19 had a major psychological impact on patients	NA	
A. S. Gunes, B.	2022	Not clear	Sleepiness, Insomnia, and Sleep Quality of Hospitalized Patients with Coronavirus Disease-2019: Sleep Scale Evaluation	Journal of Turkish Sleep Medicine	Measuring COVID-19 inpatients' sleep quality	Cross-sectional study	Comparing sleep quality between patients with confirmed and	Turkey	Hospital	May-20	Jun-20	In-person interview	Not clear	94	Pittsburgh Sleep Quality Index (PSQI); Epworth sleepiness scale (ESS); Insomnia severity index (ISI)	None	55.1% of confirmed COVID-19 patients had bad sleep quality (PSQI>5) compared to 33.1% of suspected COVID-19 patients	[T]he psychosomatic aspect of this epidemic should not be overlooked and patients must be evaluated in detail in respect of	NA
M. L. He, X. Tan, Q. Chen, Y. Kong, Y. You, J. Lin, X. Lin, Y. Zheng, Q.	2021	18/05/2021	Disease burden from COVID-19 symptoms among inpatients at the temporary military hospitals in Wuhan: a retrospective multicentre cross-sectional study	BMJ Open	Find disease weights for COVID-19	Cross-sectional study	Person trade-off with 9 person expert panel to establish disability weights for	China	Temporary military hospitals	05/02/2020	05/04/2020	Paper	9 (expert panel); 2702 (patients)	9 (expert panel); 2702 (patients)	DALYs calculated using disability weights from expert panel (N=9)	Symptom duration; inpatient length of stay	Highest disability weight was 0.399 for severe expiratory dyspnoea; lowest disability weight was 0.004 for mild cough and	COVID-19 disease burden was higher for women than men, and higher in the younger than the older population	Mean LOS was just less than 18 days; mean symptom duration was around 42 days
X. C. Li, Q. Jia, Z. Liu, L. Zhou, Y. Zhang, B. Ren, L. Tang, Y.	2021	09/07/2021	The correlation between mental health status, sleep quality, and inflammatory markers, virus negative conversion time among patients confirmed with 2019-nCoV during the COVID-19 outbreak in China An observational study	Medicine (United States)	Measuring COVID-19 patients' mental health and sleep quality and linking it to biomarkers	Cross-sectional study	Cross-sectional	China	Hospital	21/02/2020	06/03/2020	Online	66	66	Self-Rating Depression Scale (SDS); Self-Rating Anxiety Scale (SAS); Pittsburgh Sleep Quality Index (PSQI)	Clinical characteristics (fever, cough, shortness of breath, pulmonary infiltration);	27.6% were above SDS depression threshold; 22.7% were above SAS anxiety threshold; 25.5% had poor sleep	COVID-19 inpatients had mental health and sleep quality problems	Inflammation was higher for patients above the depression, anxiety and poor sleep threshold
M. A. K. Samushiya, S. M. Ragimova, A. A. Berishvili, T. Z. Chorbinskaya, S. A. Ivannikova, E. I.	2022	18/03/2022	Psychoemotional Disorders and Sleep Impairments in Patients with COVID-19	Neuroscience and Behavioral Physiology	Estimating the prevalence of mental health and sleep problems among COVID-19 inpatients	Cross-sectional study	Cross-sectional	Russia	Hospital	Not clear	Not clear	Phone; online	119	119	Hospital Anxiety-Depression Scale (HADS); Pittsburgh Sleep Quality Index (PSQI); Multidimensional Fatigue Inventory (MFI-20)	NA	11% of patients had HADS anxiety subscale scores above 8; 4% of patients had HADS depression subscale scores above 8; 73% of patients had MFI-	COVID-19 inpatients had poor mental health, fatigue and sleep quality	NA
O. O. T. Tapan, U. Alasan, F. Akgul, A. F. Genc, S.	2022	Not clear	Factors That Affect Sleep Quality in Hospitalized Patients with COVID-19 Pneumonia	Journal of Turkish Sleep Medicine	Measuring COVID-19 inpatients' sleep quality	Cross-sectional study	Cross-sectional	Turkey	Hospital	18/07/2020	15/10/2020	Paper	105	105	Pittsburgh Sleep Quality Index (PSQI); Hospital Anxiety-Depression Scale (HADS)	NA	Patients with severe COVID-19 had worse sleep quality than those with non-severe COVID-19 (PSQI 12.64 vs. 8.43, p<.001), worse HADS anxiety subscale	COVID-19 inpatients had sleep quality and mental health problems, which were worse for patients with a more severe form of the disease	NA
A. Moretti, A. Belfiore, M. Bianco, S. Liguori, M. Paoletta, G. Toro, F. Gimigliano, G. Iolascon	2022	27/09/2022	Functioning issues in inpatients affected by COVID-19-related moderate pulmonary impairment: a real-practice observational study	Journal of International Medical Research	Examining correlations between clinical, functional and radiological outcomes in COVID-19 inpatients, including dyspnea	Cross-sectional study	Cross-sectional	Italy	Hospital	01/01/2021	31/05/2021	Not clear	23	23	Modified Borg dyspnea scale (mBDS)	Correlation between International Classification of Functioning, Disability and Health (ICF) codes of the	8 patients (34.8%) had no dyspnea, 3 (13.04%) had mild dyspnea, 10 (43.5%) had severe dyspnea, 1 (4.3%) had very severe dyspnea, and 1 (4.3%) had critical dyspnea.	mBDS scores were moderately correlated with reduced muscle power functions (ICF code: b730, p=.041) and walking (ICF code: d450, p=.011)	There were correlations between clinical, instrumental, and functional parameters using ICF categories
B Taskesen, O Kardas, K Yilmaz	2022	16/11/2022	Evaluation of depression, anxiety and posttraumatic stress response levels of children and adolescents treated with COVID-19	European Journal of Pediatrics	Measuring stress, depression, anxiety and PTSD in paediatric patients	Cross-sectional study	Data collected and compared between hospitalised/non-hospitalised patients	Turkey	Paediatric unit	Mar-20	Jun-21		100 inpatients, 100 outpatients	100 inpatients, 100 outpatients	Child posttraumatic stress reaction index (CPTS-R); Child depression inventory (CDI); Screen for child anxiety-related disorders (SCARED)	NA	CDI values were comparable for inpatients/outpatients (7.34 vs 10.13; p=.13); Inpatient CPTS-R was significantly lower than outpatient (10.7 vs. 16.63, p=.01);	COVID-19 can have psychopathological effects on paediatric patients	NA
A. C. Carta, C.	2021	18/09/2021	Cost utility analysis of Remdesivir and Dexamethasone treatment for hospitalised COVID-19 patients - a hypothetical study	BMC Health Services Research	Economic evaluation of remdesivir and dexamethasone for COVID-19 patients	Economic evaluation	Decision tree	USA	Hospital	NA	NA	NA	1000 (simulated)	1000 (simulated)	Published utility values for influenza/pneumonia DALYs from published literature: YLL from actuarial study, disability weights from Global Burden of Disease Study for severe lower respiratory tract	Published outcomes from RCTs	Base utility 0.851; hospitalised with no supplemental oxygen 0.581; hospitalized with supplemental oxygen 0.5;	Remdesivir and/or Dexamethasone was cost effective	NA
S. M. W. Cleary, T. Tamandjou Tchuem, C. R. Doerat, S. Solanki, G. C.	2021	22/01/2021	Cost-effectiveness of intensive care for hospitalized COVID-19 patients: experience from South Africa	BMC Health Services Research	Economic evaluation of intensive care for COVID-19 patients	Economic evaluation	Decision tree	South Africa	General ward and ICU/general ward only	NA	NA	NA	NA	NA	Burden of Disease Study for severe lower respiratory tract	COVID-19 mortality rates from systematic literature search	Severe patients: disability weight 0.13, illness duration 1.5 months; critical patients: disability weight 0.41, duration of illness 2 months	At the margin, ICU use for COVID-19 patients was not cost effective	NA
S. E. V. Congly, R. A. Brown, C. E. Clement, F. M. Saxinger, L.	2021	07/09/2021	Treatment of moderate to severe respiratory COVID-19: a cost-utility analysis	Scientific Reports	Economic evaluation of remdesivir and dexamethasone for COVID-19 patients	Economic evaluation	Decision tree	USA	Hospital, including ICU	NA	NA	NA	NA	NA	Published utility values for influenza; Published utility values influenza (H1N1)2009	Published outcomes from meta-analysis and RCT	Base utility 0.851; severe COVID-19 0.23; moderate COVID-19 0.5616	Dexamethasone for both moderate and severe COVID-19 patients was most cost-effective;	NA
S. W. K. Dijk, E. M. Kunst, N. Gross, C. P. Wong, J. B. Hunink, M. G. M.	2022	28/04/2022	Emerging Therapies for COVID-19: The Value of Information From More Clinical Trials	Value in Health	Economic evaluation of hydroxychloroquine, remdesivir, casirivimab/imdevimab, dexamethasone, baricitinib-remdesivir, tocilizumab, lopinavir-ritonavir, interferon beta-1a for COVID-19 patients	Economic evaluation	Markov model; Value of information	USA	Hospital, including ICU	NA	NA	NA	NA	NA	Published HUI utility values for SARS; published EQ-5D values for post-ICU and post-hospitalised patients	Published outcomes from meta-analyses and RCTs	ICU 0.050; hospital ward 0.500; recovered from ICU 0.677; recovered from hospital ward 0.880	Remdesivir, casirivimab-imdevimab, dexamethasone, baricitinib-remdesivir, and tocilizumab were cost-effective at \$100,000 cost/QALY threshold; VOI analysis says 5 cost effective treatments should be approved;	NA
N. K. Jovanoski, A. Becker, U. Hussein, M. Briggs, A.	2022	01/05/2022	Cost-effectiveness of casirivimab/imdevimab in patients with COVID-19 in the ambulatory setting	Journal of Managed Care & Specialty	Economic evaluation of casirivimab/imdevimab to help COVID-19 patients avoid	Economic evaluation	Decision tree (acute phase); Markov model (post-acute)	USA	Outpatient; hospital	NA	NA	NA	NA	NA	Published utility values for c-diff infection	Published outcomes from RCTs	Base utility: 0.9442-0.0027*age; non-hospitalised COVID-19 disability: 0.19; hospitalised	Casirivimab/imdevimab was cost effective for most COVID-19 patients at a cost/QALY	NA
A. W. Kairu, V. Isaaka, L. Agweyu, A. Aketch, S. Barasa, E.	2021	07/12/2021	Modelling the cost-effectiveness of essential and advanced critical care for COVID-19 patients in Kenya	BMJ Global Health	Economic evaluation of essential care (EC) and EC combined with advanced critical care (ACC) for COVID-19 patients compared to	Economic evaluation	Decision tree	Kenya	General ward; ICU	Not clear	30/01/2021	NA	20836	20836	DALYs from published literature: disability weights from Global Burden of Disease Study for severe respiratory infection	Outcomes from cohort of hospitalised COVID-19 patients	Severe patients: disability weight 0.133; critical patients: disability weight 0.655	EC dominated status quo; EC+ACC had an ICER of \$1378.21/DALY averted compared to EC, above the	NA
K. K. Kelton, T. Murphy, D. Belger, M. Hille, E. McCollam, P. L. Spiro, T. Burge, R.	2022	22/11/2021	Cost-Effectiveness of Combination of Baricitinib and Remdesivir in Hospitalized Patients with COVID-19 in the United States: A Modelling Study	Advances in Therapy	Economic evaluation of baricitinib-remdesivir vs. remdesivir	Economic evaluation	Decision tree (acute phase); Markov model (post-acute phase)	USA	Hospital	NA	NA	NA	NA	NA	Published utility values for c-diff and other unspecified conditions	Published outcomes from RCT	Base utilities ranged from 0.922 for 18-29 year-olds to 0.736 for aged 80+; COVID-19 symptom disability -0.190; mechanical ventilation disability -0.600;	ICER of BARI-REM vs. REM was \$22,334/QALY, below WTP threshold of \$50,000/QALY	NA

R. K. Ohsfeldt, K. Klein, T. Belger, M. Mc Collam, P. L. Spiro, T. Burge, R. Ahuja, N.	2021	04/10/2021	Cost-Effectiveness of Baricitinib Compared With Standard of Care: A Modeling Study in Hospitalized Patients With COVID-19 in the United States	Clinical Therapeutics	Economic evaluation of baricitinib vs. standard of care	Economic evaluation	Algebraic model (inpatient and discharge); Markov model (recovered)	USA	Hospital	NA	NA	NA	NA	NA	Published utility values for influenza and c-diff	Published outcomes from RCT	Base utilities ranged from 0.922 for 18-29 year-olds to 0.736 for aged 80+; COVID-19 symptom disutility -0.190; mechanical ventilation disutility -0.600;	ICER of baricitinib vs. standard of care was \$25,774/QALY	NA
E. M. Oksuz, S. Gonen, M. S. Kutlubay, Z. Keskindemirci, Y. Jarrett, J. Sahin, T. Ozcagli, G. Bilgic, A. Bibilik, M. O. Tabak, F.	2021	11/08/2021	Cost-Effectiveness Analysis of Remdesivir Treatment in COVID-19 Patients Requiring Low-Flow Oxygen Therapy: Payer Perspective in Turkey	Advances in Therapy	Economic evaluation of remdesivir vs. standard of care	Economic evaluation	Decision tree	Turkey	Hospital	Not clear	Not clear		78	78	Published utility values for unspecified conditions	NA	Standard of care disutility: -0.515; remdesivir disutility: -0.341	ICER of remdesivir vs. standard of care was \$1,631/QALY, below cost-effectiveness threshold of \$25,797	NA
R. M.-S. J. Rafia, M. Harman, S. Metry, A. Hamilton, J. Willoo, A.	2022	20/02/2022	A Cost-Effectiveness Analysis of Remdesivir for the Treatment of Hospitalized Patients With COVID-19 in England and Wales	Value in Health	Economic evaluation of remdesivir for COVID-19 patients	Economic evaluation	Partitioned survival/area under the curve model	England and Wales	Hospital	NA	NA	NA	NA	NA	Published utility values for influenza and c-diff; assumption	Published outcomes from two RCTs	Utility value for patients undergoing invasive ventilation assumed to be 0; Hospitalised, not on oxygen disutility -0.36; Hospitalized on oxygen disutility - Base utilities ranged from 0.920 for 18-29 year-olds to 0.740 for aged 80+; COVID-19 symptom disutility -0.270; mechanical ventilation disutility -0.560;	ICER of remdesivir vs. standard of care was £12,400/QALY; Remdesivir was not cost effective if it did not affect mortality	NA
D. D. Sheinson, J. Shah, A. Meng, Y. Eisea, D. Kowal, S.	2021	27/02/2021	A Cost-Effectiveness Framework for COVID-19 Treatments for Hospitalized Patients in the United States	Advances in Therapy	Constructing a framework for evaluating COVID-19 treatments	Economic evaluation	Decision tree (acute phase); Markov model (post-acute phase)	USA	Hospital	NA	NA	NA	NA	NA	Published utility values for unspecified conditions and survivors of acute respiratory distress syndrome	Published outcomes from RCTs	COVID-19 symptom disutility - 0.190; mechanical ventilation disutility -0.600; noninvasive ventilation disutility -0.500; supplemental oxygen disutility -	COVID-19 treatments offering a mortality reduction were likely to be cost effective	NA
M. D. P. Whittington, S. D. Rind, D. M. Campbell, J. D.	2022	19/02/2022	The Cost-Effectiveness of Remdesivir for Hospitalized Patients With COVID-19	Value in Health	Economic evaluation of remdesivir for COVID-19 patients	Economic evaluation	Markov model; Value of information	USA	Hospital	NA	NA	NA	NA	NA	Published utility values for influenza and c-diff	Published outcomes from RCT	COVID-19 symptom disutility - 0.190; mechanical ventilation disutility -0.600; noninvasive ventilation disutility -0.500; supplemental oxygen disutility -	ICER of remdesivir vs. standard of care was \$298,200/QALY for patients with moderate/severe COVID-19 and \$1,847,000/QALY for patients	NA
J. Z. Li, Y. Y. Cong, X. Y. Ren, S. R. Tu, X. M. Wu, J. F.	2022	14/01/2022	5-min mindfulness audio induction alleviates psychological distress and sleep disorders in patients with COVID-19	World Journal of Clinical Cases	Whether guided mindfulness meditation helps COVID-19 patients with psychological distress and sleep disorders	Non-randomized controlled trial	Voluntary selection into treatment and standard of care groups	China	Hospital	Feb-20	Feb-20	Not clear	75	75	Short inventory of mindfulness capability (SIM-C); Pittsburgh Sleep Quality Index (PSQI); Hospital Anxiety-Depression Scale (HADS)	None	For mild/moderate patients: SF-36 mental (31.8 vs 31.7) and physical (48.6 vs 54.2) components not significantly different pre/post intervention; For severe/critical patients: SF-36 physical component not significantly different pre/post intervention (medians 50.01 vs 68.05, p<.001); PHQ-9 improved	Mindfulness meditation improved sleep quality and depression	NA
R. L. Gloeckl, D. Jarosch, I. Schneeberger, T. Nell, C. Stenzel, N. Vogelmeier, C. F. Kenn, K. Koczulla, A. R.	2021	31/05/2021	Benefits of pulmonary rehabilitation in COVID-19: a prospective observational cohort study	Erj Open Research	Measuring the efficacy of pulmonary rehabilitation for post-acute COVID-19 patients	Prospective cohort study	Prospective observational cohort study comparing COVID-19 patients with mild/moderate vs severe/critical COVID-19	Germany	3-week inpatient pulmonary rehabilitation programme	Nov-20	Jan-21	Not clear	58	50	SF-36; Patient health questionnaire-9 (PHQ-9); Generalized Anxiety Disorder-7 (GAD-7);	6-min walk distance (6MWD); endurance shuttle walk test (ESWT); physiological and respiratory measures	Self-reported dyspnea on 11-point scale; 6-min walk distance (6MWD); physiological and respiratory measures	Pulmonary rehabilitation can improve quality of life for patients with severe/critical COVID-19	Pulmonary rehabilitation improved exercise performance and lung function
M. C. L. Hayden, M. Schuler, M. Merkl, S. Schwarzl, G. Jakab, K. Nowak, D. Schultz, K.	2021	26/08/2021	Effectiveness of a three-week inpatient pulmonary rehabilitation program for patients after covid-19: A prospective observational study	International Journal of Environmental Research and Public Health	Measuring the efficacy of pulmonary rehabilitation for post-acute COVID-19 patients	Prospective cohort study	Prospective observational cohort study	Germany	3-week inpatient pulmonary rehabilitation programme	28-Apr-20	08-Jan-21	Not clear	108	105	EQ-5D-5L level sum and VAS; Patient health questionnaire-9 (PHQ-9); Generalized Anxiety Disorder-7 (GAD-7);	EQ-5D-5L level sum and VAS; Patient health questionnaire-9 (PHQ-9); physiological and respiratory measures	Median EQ-5D-5L level sum was 11.65 pre-intervention and 9.23 post-intervention (p<.001); EQ-VAS improved pre/post intervention (medians 50.01 vs 68.05, p<.001); PHQ-9 improved	Pulmonary rehabilitation can improve quality of life for patients with COVID-19	Pulmonary rehabilitation improved dyspnea, exercise performance and lung function
S. Z. Huang, W. Wang, D. Zha, L. Xu, X. Li, X. Shi, Q. Wang, X. S. Qiao, G.	2021	10/02/2021	Persistent somatic symptom burden and sleep disturbance in patients with COVID-19 during hospitalization and after discharge: A	Medical Science Monitor	Measure the trajectory of COVID-19 symptom burden and its effect on sleep quality	Prospective cohort study	Longitudinal cohort study; Patients surveyed on	China	Hospital	04/02/2020	05/05/2020	Online	74	74	8-Item Somatic Symptom Scale (SSS-8); modified Medical Research Council (mMRC)	Hospital length of stay	SSS-8, mMRC and PSQI scores declined over time	Symptomatic burden of COVID-19 and sleep quality improves over time up to 1 month post-	Median LOS was 21 days
M. Bayrak & K. Cadirci	2022	17/04/2021	The associations of life quality, depression, and cognitive impairment with mortality in older adults with COVID-19: a prospective, observational study	Acta Clinica Belgica, International Journal of Clinical	To identify the risk factors for mortality and analyze the associations with patients' physiological and mental well-being	Prospective cohort study	Prospective observational cohort study; data obtained for a cohort of older	Turkey	Hospital	Aug-20	Oct-20	NA	122	122	WHOQOL-OLD	Mortality; co-morbidities; life quality; depression; cognitive impairment	Overall WHOQOL-OLD total score = 41.5 [27.0-69.0]. For those who survived (n=111), total score = 42.0 [20.01 - 69.0]. For	QOL scores were significantly lower in the non-survivors on the first day of hospitalisation.	Depression, cognitive impairment, higher falling risk, and poor life quality are
S. Kokhan, M. Kolokoltsev, A. Vorozheikin, A. Gryaznykh, E. Romanova, M. Guryanov, E. Faleeva, A. Tarasov, S. Aganov.	2022	30/09/2022	Physical rehabilitation of patients with post-COVID syndrome	Journal of Physical Education and Sport	To determine the effectiveness of therapeutic walking in the protocol of the individual physical rehabilitation program at the stage of sanatorium recovery of patients	Prospective cohort study	Cohort study conducted in a multidisciplinary sanatorium	Russia	Multidisciplinary sanatorium	Unclear (since april 2020)	Unclear	Unclear	38	38	EQ-5D-3L, monitored over time; The high quality of life of the patient was assessed at 0 points, low at 10 points	Mainly related to walking ability and body functional state	No significant differences were seen between baseline and discharge for FSS-7 (2.8 vs. 2.9, p=.970) or HADS-A (5.0 vs. 4.0, p=.142); Significant improvements were seen	QOL scores improved over time for those undertaking the walking therapy intervention	That the walking therapy is effective
E. Moseholm, J. Midtgaard, S. Bollerup, AD Apol, OB Olesen, S Jespersen, N Weis	2022	15/08/2022	Psychological Distress among Hospitalized COVID-19 Patients in Denmark during the First 12 Months of the Pandemic	International Journal of Environmental Research and Public Health	Measuring psychological distress among COVID-19 inpatients when hospitalised and 3 months after discharge	Prospective cohort study	Data collected 48 hours after admission, one month post-discharge and 3 months post-discharge	Denmark	Hospital	15/05/2020	15/05/2021	In-person interview; phone	107	95	Hospital Anxiety-Depression Scale (HADS); Perceived stress scale (PSS-10); Insomnia Severity Index (ISI); Harvard Trauma Questionnaire (HTQ); SF-36	Physical symptoms; temperature; oxygen support demands; whether need mechanical ventilation; length of stay	No significant differences were seen between baseline and discharge for FSS-7 (2.8 vs. 2.9, p=.970) or HADS-A (5.0 vs. 4.0, p=.142); Significant improvements were seen	A high proportion of patients hospitalised with COVID-19 experienced psychological distress	Median LOS was 6 days; 4% of patients were admitted to ICU; 9% of patients died in hospital
C. Wimmer, M. Egger, J. Bergmann, V. Hugel, F. Muller, K. Jahn	2022	28/10/2022	Critical COVID-19 disease: Clinical course and rehabilitation of neurological deficits	Frontiers in Neurology	Measuring outcomes for COVID-19 patients requiring neurorehabilitation	Prospective cohort study	Data collected at study inclusion and hospital discharge	Germany	Neurorehabilitation centre	Apr-20	Sep-21	Not clear	113	61	Fatigue severity scale-7 (FSS-7); Hospital Anxiety-Depression Scale (HADS); Clinical frailty scale (CFS); EQ-5D-5L	Various function measures	EQ-5D-3L values were higher for non-COVID positive patients than COVID positive patients (0.701 vs. 0.291, p=.001)	Neurorehabilitation improves quality of life for patients with severe neurological symptoms following COVID-19	Patients' health improved over the course of the study, but did not reach pre-infection levels
B. V. Pass, E. Knauf, T. Rascher, K. Aigner, R. Eschbach, D. Lendemans, S. Knobe, M. Schoeneberg, C. Registry for Geriatric, Trauma	2022	04/10/2021	COVID-19 and Proximal Femur Fracture in Older Adults-A Lethal Combination? An Analysis of the Registry for Geriatric Trauma (ATR-DGU)	Journal of the American Medical Directors Association	Comparing mortality and quality of life outcomes for patients with and without COVID-19 undergoing surgery for a proximal femur	Retrospective cohort study	Retrospective cohort study	Germany; Austria; Switzerland	Peri-operative	01/07/2020	31/12/2020	Not clear	4944	123 COVID; 3610 non-COVID	EQ-5D-3L values from German value set measured 7 days post-operatively	Mortality; Hospital length of stay; discharge location	EQ-5D-3L values were higher for non-COVID positive patients than COVID positive patients (0.701 vs. 0.291, p=.001)	A COVID-19 infection was associated with reduced quality of life	Mortality was 5 times higher for people with COVID-19; length of stay was higher; they were less frailty could accurately recognise individuals at an increased risk of long-term all-cause death.
M. Covino, A. Russo, S. Salini, G. D. Matteis, B. Simeoni, F. Pirone, C. Massaro, C. Recupero, F. Landi, A. Gasparini, F. Franceschi.	2022	29/09/2022	Long-term effects of hospitalisation for COVID-19 on frailty and quality of life in older adults >80 years	Journal of Clinical Medicine	To assess the effects of frailty and the perceived quality of life on the long-term survival of patients >80 years hospitalised	Single centre, prospective cohort study	Prospective observational study; data obtained for all those over 80 and	Italy	Hospital	Apr-20	Mar-21	Unclear	729	368	EQ-5D-5L; the crude sum of all the points (best (1) to worst (5)) assigned to the five domains	Frailty and self-reported quality of life before COVID, clinical characteristics	All cases (n=368) = 8[5,10]. Survived (n=236) = 9[7,13]. The group is also split by who had a stable QOL over time and those	Factors most influencing a decrease in QOL were found to be the female sex, frailty status before COVID-19, age group,	