Common heart issues after COVID What to know and do



COVID-19 | Info sheet

Over time, we've learned that COVID can damage the heart and how it functions - even in people who didn't have heart problems before getting sick.



If you've noticed any new or ongoing health issues after having COVID, it's important to talk with your care team. There are tests, treatments, post-COVID clinics, and research studies that may help.

Some common cardiovascular issues can develop or worsen after COVID. These include:

- Shortness of breath
- Exercise intolerance
- Rapid heart rate (tachycardia)
- Chest pain or discomfort

Many of these symptoms overlap with existing heart disease. But for younger people, or those who didn't have heart disease before having COVID-19, these symptoms may persist despite normal test results. Not having a clear explanation can be frustrating.

Teaming up with your care team can help. Be sure to give yourself time to recover. Focus on getting good sleep, eating a healthy diet - filled with fruits, vegetables, whole grains, unprocessed foods - and staying hydrated.

How post-COVID symptoms may be evaluated

- ☐ Explaining your symptoms what they feel like, when and how often they occur and if they affect your everyday life, as well as any other changes in your general health since having COVID
- ☐ Taking your vital signs blood pressure, blood oxygen and heart rate when sitting and standing
- ☐ Assessing your heart's electrical activity with an electrocardiogram (ECG)
- ☐ Adding other tests, for example, blood tests, an echocardiogram to see how the heart is working, pulmonary (lung) function, and/or stress tests

As always, talk with your care team about your specific health needs, and what tests and treatments are right for you.

Common heart issues after COVID and next steps to consider



Shortness of breath

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Exercise intolerance



Rapid heart rate (tachycardia)



Chest pain/ discomfort

Usually with exertion or even small bouts of activities. Pay attention to and report any wheezing, coughing or difficulty moving air in and out of your lungs.

Possible next steps:

- Certain medications (for example, steroid inhalers, antihistamines)
- Gradually returning to activity or doing more over time
- Deep breathing from the diaphragm (also called "belly breathing"), yoga and other mindfulness exercises
- Writing down when you feel short of breath, what you were doing at the time, and how long it lasted

Not being able to exercise the way you did before having COVID. You might feel winded or tired easily with activities that never used to give you any problem. It can be a sign that your muscles aren't using

Possible next steps:

oxygen well.

- Taking it slow when returning to activity or exercise - it can take 3 or more months; listen to your body so you know what's too much
- Not exercising to the point that you feel totally wiped out the next day
- Drinking water with electrolytes
- Increasing your salt (sodium) intake by a teaspoon a day as long as you don't have high blood pressure
- Deep breathing from the diaphragm ("belly breathing"), yoga and other mindfulness exercises

A racing or faster-than-normal heart rate at rest (60-100 beats per minute is normal for adults), when standing or with activity. In some cases, the heart rate doesn't recover (come back to normal) as quickly as it should after activity.

Possible next steps:

- Gradually returning to or doing more activity over time; for some people, a structured exercise program using a bike, rowing machine or swimming may help
- Drinking more water with electrolytes
- Deep breathing from the diaphragm ("belly breathing")
- Medications (for example, beta blockers, calcium channel blockers or ivabradine)
- Increasing your salt (sodium) intake by a teaspoon a day as long as you don't have high blood pressure

There can be many reasons for chest pain. You will need to work with your care team to find the root cause of your chest pain.

For example, if the pain happens when you move or breathe deeply, it could be due to swelling or inflammation in the chest wall. In that case, an anti-inflammatory medicine might help. In contrast, chest pain that worsens with exercise or activity could be related to the heart's arteries.

Possible next steps:

- More testing
- Trials of some therapies based on what's found