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Characterizing post-covid conditions in a Turkish
cohort: A prospective study

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Background:
Investigating the people who suffer from post-COVID health
conditions is necessary to accommodate the demand for
accessing healthcare. This study aims to describe post-COVID
health conditions within six months after diagnosis.
Methods:
This study was conducted at Dokuz Eylul University Hospital,
a tertiary care hospital in Ä°zmir-Turkey. Participants aged
$\geq$18 years who were diagnosed as SARS-CoV-2 RNA positive
in the hospital from November 1st, 2020 to May 31st were
interviewed by phone at one, three and six months after
diagnosis. Symptom frequencies were stratified by demo-
graphic and clinical characteristics. The dependent variable was
having post-COVID condition according to World Health
Organization's definition. We estimated logistic regression
models to identify associated factors for post-COVID condi-
tion in the patients who had symptoms at baseline.
Results:
A total of 5083 people completed the third month's interview.
The prevalence of post-COVID condition was 21.8%
(n = 1108). Tiredness/fatigue (10.2%), muscle or body aches
(7.3%) and dyspnea/difficulty breathing (4.8%) were the most
common symptoms. Older age (65-74 aged groups versus 18-
24 aged group, odds ratio-OR:1.57, 95% confidence interval:
1.10-2.25), female gender (OR: 1.97, 1.71-2.28), bad economic
status (OR: 1.44, 1.13-1.84), having more health conditions
($\geq$3 conditions, OR: 1.82, 1.28-2.55), having more symptoms
(>5 symptoms, OR: 2.59, 2.20-3.07) and hospitalization
(intensive care unit, OR: 1.98, 1.13-3.37) were found to be
associated with reporting of post-COVID condition.
Conclusions:
This study identifies the prevalence and risk factors for post-
COVID conditions in a large cohort of patients. The results of
the study would guide the healthcare organizations in the
planning of post-COVID management strategies.
Key messages:
• The prevalence of post-COVID conditions was 21.8%. Older
  age, female gender, having more health conditions, disease
  severity in the acute phase and bad economic status were risk
  factors.

- Clinical management strategies and country-specific health-care planning should be devised for the post-COVID condition burden.