# Covid-19 complications in severe, critically ill patients and follow up them after hospital discharge

Thesis

Submitted for fulfillment of master degree in Critical care medicine

By

#### Esrraa Azzam Ahmed Abdelbaky

M.BB.CH

Supervised by

#### Dr. Osama Mahmoud Momtaz

Assistant professor of critical care Medicine – faculty of medicine – fayoum University

## Dr. Tamer Sayed Abdelmawla

Lecturer of critical care medicine- faulty of medicine – fayoum university

#### **Dr.Ahmed fathy Elkhateeb**

Lecturer of critical care medicine – faculty of medicine – fayoum university

Faculty of Medicine – fayoum university

2022

### **ABSTRACT**

Background; Data on the post-acute and post-infectious complications of patients who have recovered from severe coronavirus disease 2019 (COVID-19) are limited. While studies report that approximately 5-15% of COVID-19 hospitalized patients require intensive care and mechanical ventilation, a substantially higher non-invasive ventilation and are subject number need prolonged hospitalizations, with long periods of immobility and isolation, Aim and objectives; to detect short outcome and remote complications in severe and critically ill covid-19 patients admitted to ICU of Fayoum University Hospital from April 2020 to February 2022, Subjects and methods: This was prospective, observational, randomized controlled clinical trial, conducted at Fayoum university Hospital on patients with severe and critically ill covid 19 after ICU hospital discharge from April 2020 to Februrary 2022,

**Result**; The most common associated with cardiac cause were 34 patients (31%), then respiratory failure in type II in 30 (27.5%) patients, RFI in 49 (44.9%), patients with sepsis 21 (19%), and renal failure in 12 patients (10.9%),

Conclusion; Results of the present study showed that baseline independent factors associated with Discharge were AKI, Dialysis and D-DIMER. These factors can help clinicians prognosticate and should be considered in management strategies. Early monitoring of renal function should be paid more attention. The clinical profile of these patients showed that the most important risk factors for death in these patients represented in, age and underlying diseases. Regarding the underlying diseases associated with death, the most recorded one was chronic hypertension then diabetes mellitus, chronic cardiac diseases, cerebral infarction, kidney disease, chronic obstructive pulmonary diseases.