

Editorial





SARS-CoV-2 (COVID-19) vaccination, affected on post-acute-COVID-19-sequelae symptoms (long COVID-19)

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Currently, few prospective data that explore the biological mechanisms of the effect of SARS-CoV-2 (COVID-19) vaccination on the persistent symptoms, "long-COVID 19" or "post-acute sequelae of COVID (PASC)", including compared antibody dynamics between those with and without PASC.1,2 PASC is defined by symptoms persisting more than 4 weeks after a confirmed or probable COVID-19, without any confirmed alternative diagnosis.1 Around 52.8 % of the patients reported a global effect on symptoms after the vaccine injection, corresponding to a worsening in around 31 % and an improvement in around 21.8 %.1 No differences based on the vaccine type used were detected.1 Fear of worsening PASC symptoms (55.9 %) were the most common reasons for the SARS-CoV-2 (COVID-19) vaccination postponing.1 Around 58.9 % of the enrolled subjects developed PASC after at least 3 months of follow-up.2 Age, sex, obesity status, and time since illness onset of the participants have no significantly statistical differences.2 Among PASC participants, they revealed the median half-life of RBD- and spike-binding IgG levels of 181 (95 % CI: 147-230) and 233 (95 % CI: 183-324) days, whereas among those without PASC demonstrated 144 (95 % CI: 113-196) and 170 (95 % CI: 125-252) days, respectively.²

Conclusion

In conclusion, the majority of PASC patients were well tolerated to SARS-CoV-2 (COVID-19) vaccine and have good immunogenicity. However, further investigations are urgently needed to confirm the COVID-19-vaccine-related strong evidence on improvement of PASC symptoms.

Volume 9 Issue 2 - 2022

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Received: July 4, 2022 | Published: July 5, 2022

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