

COVID and its Effects on the Heart

Since March, more than 10 million Americans have been diagnosed with COVID-19. While most people with COVID-19 recover and return to normal health, some patients can have long-lasting symptoms for weeks or even months after recovering from the virus. According to the American Heart Association (AHA), a growing number of studies indicate that many COVID-19 survivors experience some type of heart damage, even if they didn't have underlying heart disease prior to infection and weren't sick enough to be hospitalized.

Chadi Nouneh, M.D., Cardiology Medical Director, OSF HealthCare

“We are learning that some patients have long-term pulmonary and lung effects which can cause some arrhythmia on top of it, which can last as an atrial fibrillation, an atrial flutter – which needs to be treated. Anything happening in the body can manifest as a cardiovascular problem, so we’re watching, we’re learning, we’re treating, we’re monitoring,” (:24)

An arrhythmia is an abnormal heart beat, and according to the Heart Rhythm Society, it has been suggested that COVID-19 is associated with a high incidence of cardiac arrhythmias.

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“Cardiac arrhythmia is very common – and we do see it especially in acute respiratory illness. When the patient has a lung problem, we start seeing from atrial fibrillation to atrial flutter to ventricular arrhythmia to extra heartbeat to a pause. We have seen a long range of atrial arrhythmia and ventricular arrhythmia caused by the COVID virus infection itself.” (:28)

Dr. Nouneh says it has become common for people who previously had COVID-19 to have an ongoing heart problem weeks, or even months, later.

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“Now it’s becoming routine to see a patient tell me, ‘I had COVID in March, April, June, July,’ and the observation we’ve seen – myself and others around the country – there is something called pericarditis or myocarditis, which is inflammation of the heart muscle and the membrane around the heart.” (:23)

Treatment for heart conditions caused or enhanced by COVID-19, such as atrial fibrillation (AFib), is the same as non-COVID occurrences. Dr. Nouneh and physicians around the country are working tirelessly to treat these patients and are monitoring them closely, especially after recovering from the virus.

So who is most at risk?

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“It can affect all ages. But the more we see, it’s the older patients, patients with chronic disease such as hypertension, diabetes, or chronic heart failure – diastolic or systolic. I have seen it in a few younger patients with the effects of pericarditis on the heart. I see a couple patients who had COVID and they still have some symptoms of it.” (:28)

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“Every patient with heart disease – they are at high risk. This means that if somebody has congestive heart failure or weak heart or blocked artery or cardiac arrhythmia and we add the COVID virus, the outcome is definitely worse than the healthy person with the COVID disease.” (:23)

Dr. Nouneh says [prevention](#) of contracting the virus remains key. For more information on COVID-19, including frequently asked questions, visit the OSF HealthCare COVID-19 digital health hub: www.osfhealthcare.org/covid19/.

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If you are experiencing COVID-19 symptoms and it is not an emergency, use one of the digital care options offered by OSF. You can connect through Clare, a digital assistant available through the OSF website, or by calling the 24/7 nurse hotline at 833-OSF-KNOW (833-673-5669).

If you are experiencing a medical emergency, including heart attack or stroke, call 911.