

Managing communication difficulties in Long Covid

1 March 2023

Researcher

Prof. Louise Cummings

Enquiry Contact

louise.cummings@polyu.edu.hk

Who should read this?

If you have Long Covid and have problems communicating with others, then this leaflet is for you. These problems might occur during speech and writing, or when you are trying to understand what others are saying in conversation. Communication problems may negatively affect your interactions with colleagues at work or your relationships with friends and family. You may react by trying to avoid interactions that you know will cause you distress or embarrassment, or you may depend on others to communicate on your behalf. This leaflet will give you some simple tips to help you deal with Covid-related communication difficulties.

How is communication compromised by Long Covid?

Speech

You may find yourself slurring certain words and your speech may be unintelligible to others. This may be more pronounced at certain times of the day or after exertion. Your speech may be less clear when you are fatigued. You may also find that your speech is less fluent than it was before you developed Covid-19 and that you repeat sounds, syllables, and words.

Language

You may have word-finding difficulties and need to use gestures in place of the word you want to say. You may swap the positions of words in sentences and utterances. You may start to say something and have to abandon it in the middle of an utterance. You might find it difficult to understand what others are saying, especially if they speak rapidly.

Voice

Your voice may sound weak, breathy, or hoarse. This may persist long after your acute Covid infection when you experienced considerable coughing. Your voice may not be adequate to the demands of your job, and you may try to compensate by increasing your volume and straining your voice.

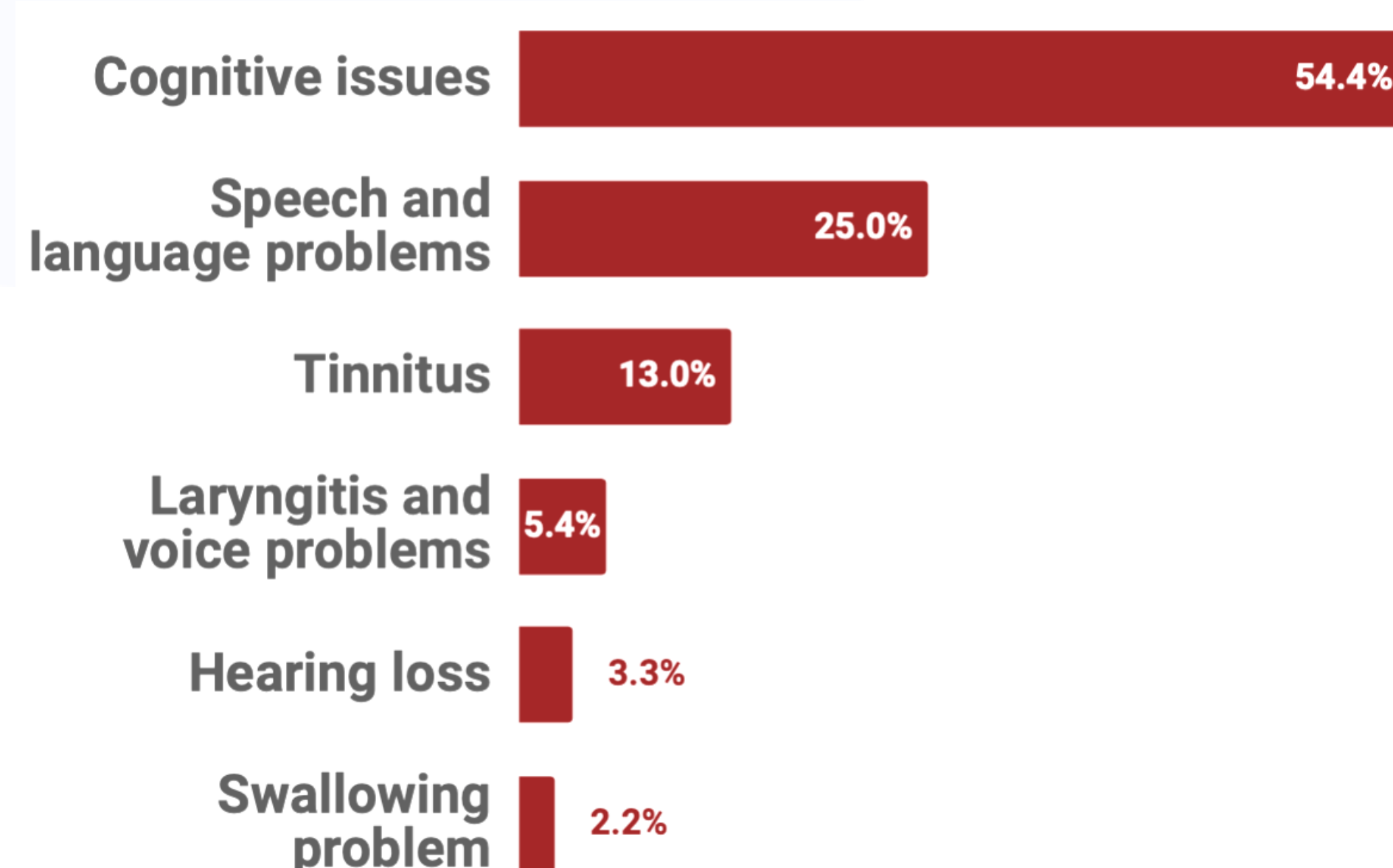
Hearing

You might have some hearing loss following your Covid infection. This may be most evident when there is background noise that you cannot control or when you are not directly facing the person you are talking to. You may also experience tinnitus for the first time. The buzzing and ringing sounds that are typical of tinnitus may be severe enough to prevent you sleeping at night, leading to further fatigue and distress.

How common are communication problems in Long Covid?

In a study of 92 adults with Covid-19, 81 of whom had Long Covid, symptoms were recorded at *Covid onset* and at *any stage* of Covid illness ([Cummings, 2023](#)). The following chart displays the percentage of individuals with communication, swallowing, and cognitive problems at any stage of their Covid illness.

COMMUNICATION, SWALLOWING, and COGNITIVE PROBLEMS IN ADULTS WITH COVID-19



Who assesses and treats communication difficulties?

The health professionals who assess and treat communication difficulties are **speech and language therapists** for the most part. In the UK, you can refer yourself to speech and language therapy (SLT) by contacting the SLT team at your local hospital (it is an open referral system). Alternatively, a doctor or other medical professional can refer you to SLT. The professional bodies that represent SLTs are the Royal College of Speech and Language Therapists (RCSLT) in the UK and the American Speech-Language-Hearing Association (ASHA) in the US. Both bodies have online resources relating to Covid-19 that you can access here: [RCSLT](#) [ASHA](#)

Other professionals are also involved in the assessment and treatment of Covid-related communication difficulties. If you have a voice problem or have experienced hearing loss or tinnitus since developing Covid-19, you may need to be assessed by an **Ear, Nose and Throat (ENT) specialist** or an **otolaryngologist**. These medical professionals can examine your larynx or voice box and check if there is an organic cause of your vocal difficulties. They can also examine the structure and function of the organs in your ear that permit you to hear and achieve balance. They may decide that your hearing should be more fully assessed by undergoing audiometric testing by an **audiologist**.

Finally, because so many communication difficulties in Long Covid are related to underlying cognitive problems, you may need to be assessed by a **neuropsychologist**. These professionals assess all aspects of cognition, including attention, memory, processing speed, and reasoning.

Simple tips to improve communication in Long Covid

Everyone with Long Covid experiences debilitating fatigue. This is not like normal fatigue from which we rebound after a night's sleep or a short period of rest. Covid-related fatigue both contributes to communication difficulties in people with Long Covid and can be exacerbated by efforts to communicate. These simple tips will help you manage your problems with communication:

1 Start to think of communication as an activity that requires *cognitive effort* in exactly the same way that walking or running requires *physical effort*. Cognitive effort is not a limitless resource even when you did not have Long Covid – we all have a maximum amount of information that we can store in memory, a maximum speed at which we can formulate an utterance, and so on. Now think of this maximum level as having decreased as a result of Long Covid. This is the new level of cognitive resource that you have available for daily activities, including communication.

2 Good cognitive health depends on good physical health. As your physical symptoms improve, you can expect to see an improvement in your cognitive status, including your ability to communicate. When you are having a relapse and your physical symptoms are severe, practice strict physical and cognitive pacing. Shut down all cognitive stimulation in an effort to rest. You are not resting if you are reading a book, listening to music, or watching the TV while you are lying on a sofa. Your brain is having to undertake considerable cognitive work during each of these activities.

3 When your physical symptoms lessen and you want to interact with others, take a graded approach to communication. Start by arranging to meet a trusted person who is aware of your condition and its impact on your ability to communicate.

4 Meet this person in a quiet environment like your home rather than a busy coffee shop or restaurant. Tell this individual how long you will be able to communicate with them. Bring the interaction to an end even if you feel like you would like to extend it. It is better to have a short interaction initially which can be repeated for a slightly longer period of time than to have an extended interaction which triggers a significant crash for several days.

5 Do not be afraid to tell your trusted person that you want them to slow down their speaking rate to help you process what they are saying. You may also want to tell them to decrease or increase their speaking volume depending on your needs or even sit quietly with you for a few minutes if you feel overloaded by the interaction. They will understand your difficulties and will be prepared to make these simple adjustments to help you.

Managing communication difficulties in Long Covid

1 March 2023

Researcher

Prof. Louise Cummings

Enquiry Contact

louise.cummings@polyu.edu.hk

6 **When** you feel you can communicate adequately with this person over a particular period of time without triggering a deterioration in your symptoms, you can begin to increase the cognitive demands of the interaction. Make **one** adjustment at a time. This may be to increase the length of time you meet your trusted partner **OR** to meet your trusted partner for the same length of time as before but in an environment that has some background noise. Do not attempt to increase the length of time that you meet for **AND** to have your meeting in a noisier environment – this will likely overload you.

7 **When** you are able to meet your trusted partner over several occasions and with steadily increasing cognitive demands (e.g. more time, more background distraction), you will want to think about introducing a third person into your interactions. Again, this should be someone who is aware of your difficulties and of the need to adjust their communication style to your current needs.

8 **Meet** this third person for a short period of time initially and with other cognitive demands kept to a minimum. If this three-person interaction is overwhelming, then return to an earlier stage in your graded communication approach. Work on achieving a more consistent level of communication at this earlier stage before attempting to scale up to a more demanding three-person interaction.

9 **When** interacting with two other people, establish some ground rules with them to avoid you becoming overloaded in the interaction. Ask both parties to speak more slowly than they might otherwise do. Also encourage them to avoid overlapping talk which will be difficult for you to process – one person speaks at a time. Be clear in advance about the duration of an interaction and any sensory sensitivities you may have to ambient noise and lighting.

10 **All** of the above points relate to spoken communication during in-person interaction. But you will also need to make adjustments to other forms of communication. Rather than make phone calls which leave you fatigued, ask family members and friends to communicate with you by texts or email. Written communication gives you more time to process and edit what you want to say. Texts and emails are also a written record of information that you can read multiple times to aid comprehension and to refresh your memory. Use the accessibility settings on your mobile phone to help you write texts and understand the texts you receive from others.

Voice problems in Long Covid

Voice problems are also common in people with Long Covid. During the acute stage of your Covid infection, you may have coughed repeatedly to help clear mucus from your lungs. However, cough can become persistent in Long Covid and is related to laryngeal hypersensitivity and dysfunction ([Kang et al., 2022](#)). While you are waiting to have your vocal difficulties assessed by an ENT specialist and speech and language therapist, there are several things that you can do to maintain good vocal hygiene and reduce the strain on your voice:



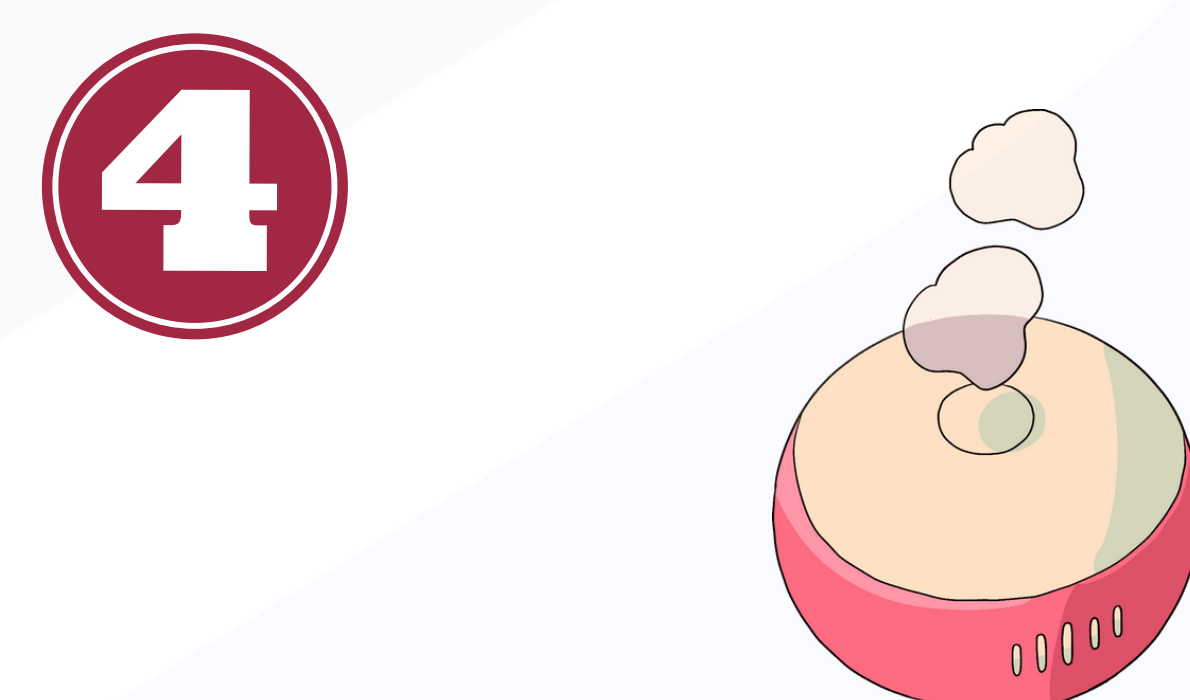
Keep yourself well hydrated, and not just in warm weather. The tissues of the larynx (voice box) will lose moisture if you are dehydrated, and they will not vibrate normally as a result. They will also be more susceptible to damage from irritants like smoke.



Avoid or limit your intake of caffeinated drinks and alcohol, both of which can dry out the tissues of the larynx.



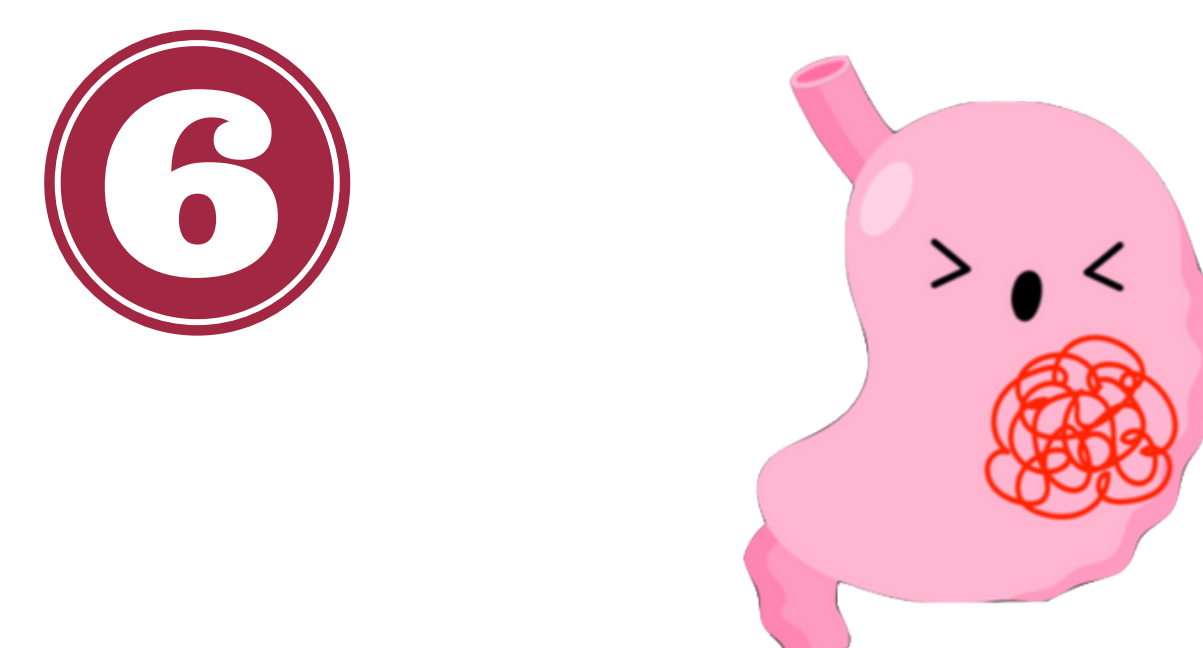
Some prescription medications (e.g., diuretics) can also cause laryngeal tissues to become dehydrated. These medications are treating other important medical problems, so you should not discontinue them. But you should tell your ENT specialist and speech and language therapist about the medications that you are taking.



Use a humidifier at home. Thirty percent humidity is recommended. Also, be aware of the drying effects that the use of car radiators can have on the larynx.



Avoid irritants such as tobacco smoke. Stop smoking and do not inhale the second-hand smoke of other people.



If you experience heartburn or GERD (gastroesophageal reflux disease) after eating spicy foods, use medications to treat it effectively. Persistent, untreated GERD can damage the tissues of the larynx.



Take vocal rest during the day. This is especially important if you are placing heavy occupational demands on your voice. Vocal rest conserves your energy – especially important in Long COVID – and gives the tissues of your larynx time to recover from excessive use.



Think about workplace adjustments that can help you avoid straining your voice. If you teach or speak in public, use a microphone. Try to avoid talking over background noise as it will cause you to increase your vocal volume. Sit quietly during breaks at work to give your voice time to recover.

For more guidance on voice, visit the [National Institute on Deafness and Other Communication Disorders](#).

Finally.....

The advice in this leaflet assumes that you are also practicing excellent physical and mental self-care. So, **eat well, get plenty of rest, and avoid situations that cause you stress!**

Additional resources

Cummings, L. (ed.) (2023) *COVID-19 and Speech-Language Pathology*. New York: Routledge ([Chapter 5](#); [Chapter 6](#))

[Long Covid Nurses & Midwives UK \(LCNMUK\)](#).

Royal College of Speech and Language Therapists (2023) Long Covid: What is it and how can speech and language therapists support people living with it? ([RCSLT](#))