

# NPAIHB Weekly Update

July 9, 2024

Please sign in using the chat box:

Enter the tribe or organization you are representing  
and names of all people participating with you today



NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD  
*Indian Leadership for Indian Health*

# Information for Today's Call

## Agenda

- Welcome & Introduction: Victoria Warren-Mears
- Upcoming Indian Country ECHO Sessions
- Upcoming NPAIHB Weekly Update Sessions
- Long COVID: Dr. Frank James
- State Partner Updates
- Questions & Comments

## Guidelines

- Please place yourself on mute unless speaking
- Sign in, using chat box, with your tribe/organization and names of all participants
- Use the chat box for questions, for Q&A after updates and announcements



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# Upcoming Indian Country ECHO telehealth opportunities

- **NW Elders, Knowledge Holders and Culture Keepers ECHO** – 2<sup>nd</sup> Tuesday of every month at 12pm PT
  - Tuesday, July 9<sup>th</sup> 12pm PT
  - Didactic Topic: *Canoe Journey*
  - To learn more and join: <https://www.indiancountryecho.org/program/nw-elders-knowledge-holders-and-culture-keepers/>
- **Trauma Care ECHO** – 2<sup>nd</sup> Wednesday of every month at 6:30am PT
  - Wednesday, July 10<sup>th</sup> at 6:30am PT
  - Didactic Topic: *Verbal De-Escalation in the ED*
  - To learn more and join: <https://www.indiancountryecho.org/program/trauma-care/>
- **Journey to Health ECHO** – 2<sup>nd</sup> & 4<sup>th</sup> Thursday of every month at 7am/12pm PT
  - Thursday, July 11<sup>th</sup> at 7am PT
  - Didactic Topic: *Nutrition*
  - To learn more and join: <https://www.indiancountryecho.org/program/journey-to-health-echo-program/>
- **Clinical Dementia ECHO** – 2<sup>nd</sup> Thursday of every month at 11am PT
  - Thursday, July 11<sup>th</sup> at 11am PT
  - To learn more and join: <https://www.indiancountryecho.org/program/dementia-echo-program/>

# Upcoming Indian Country ECHO telehealth opportunities

- **Diabetes ECHO** – 2<sup>nd</sup> Thursday of every month at 12pm PT
  - Thursday, July 11<sup>th</sup> at 12pm PT
  - Didactic Topic: *Overview of Addressing Diabetes Distress*
  - To learn more and join: <https://www.indiancountryecho.org/program/diabetes/>
- **emRIC ECHO**
  - Monday, July 15<sup>th</sup> at 8:30 am PT
  - Didactic Topic: *Dermatology: Serious Illness in the ED*
  - To learn more and join: <https://www.indiancountryecho.org/program/emergency-medicine-echo-program/>
- **Cardiology ECHO** – 3<sup>rd</sup> Monday of every month at 11am PT
  - Monday, July 15<sup>th</sup> at 11am PT
  - Didactic Topic: *Management of Common Cardiac Diseases in the Primary Care Setting*
  - To learn more and join: <https://www.indiancountryecho.org/program/cardiology-echo-program/>
- **Community Health Representative (CHR) ECHO** – 3<sup>rd</sup> Monday of every month at 12:00pm PT
  - Monday, July 15<sup>th</sup> at 12:00pm PT
  - Topic: *Emergency Preparedness Training*
  - To learn more and join: <https://www.indiancountryecho.org/program/community-health-series/>

# Weekly Update Schedule Preview: July-August

**July 16:** No Weekly Update – NPAIHB QBM (Spokane)

**July 23:** Public Health Update – Journey of Transformation 10<sup>th</sup> Grade Curriculum  
(Native Youth Health Leadership Program)

**July 30:** Legislative & Policy Update

**August 6:** Public Health Update – TBD

**August 13:** Public Health Update – Tribal Public Health Workforce Development

**August 20:** NWTEC Update New Tribal Memoranda of Agreement for Data Sharing

**August 27:** Legislative & Policy Update



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Visit [www.npaihb.org/weeklyupdate](http://www.npaihb.org/weeklyupdate) for upcoming topics, past presentations, and more!

# Oregon Community Health Conversations

- Join us for a working session next week at the July QBM in Spokane!

## **Oregon Community Health Discussion: Social Determinants of Health BRFSS Survey Module Feedback**

**When:** Tuesday, July 16, 12:00 - 1:30 PM

**What:** Working lunch (lunch provided for discussion session attendees)

**Who:** Open to all Oregon attendees: OR Tribal Delegates, Tribal Leaders, THDs, Health Program Staff, OR Tribal Members

For more information or to RSVP (not required), please contact Bridget Canniff at [bcanniff@npaihb.org](mailto:bcanniff@npaihb.org)



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# Upcoming NPAIHB Events

- 2nd Annual NW Tribal Brain Health & Dementia Summit – August 19-22

<https://www.npaihb.org/modernevent/2nd-annual-northwest-tribal-brain-health-and-dementia-summit-registration/>

- Native Fitness XVIII – August 21-22, Providence Park, Portland, OR

<https://www.npaihb.org/modernevent/native-fitness-xviii/>

**NPAIHB Events Calendar:** <https://www.npaihb.org/npaihb-events/>



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Frank James MD

Health Officer



# Long Covid

# How common is “Long COVID”?

- True prevalence is unknown due to varying definitions and analysis methods
- The largest study to date found that at 3 months, 6.2% of individuals who had symptomatic COVID had at least one of a predetermined set of 3 long-COVID symptom clusters
- A new analysis from the RECOVER trial puts the estimate at ~10%

# What causes “Long COVID”?

- Active area of research with no definitive answers yet
- SARS-CoV-2 viral particles may become active again, causing symptoms to reappear?
- Overactive immune cells may release high levels of inflammatory substances that can injure organs and tissues?
- The infection may cause the immune system to start making autoantibodies that attack a person's own organs and tissues?

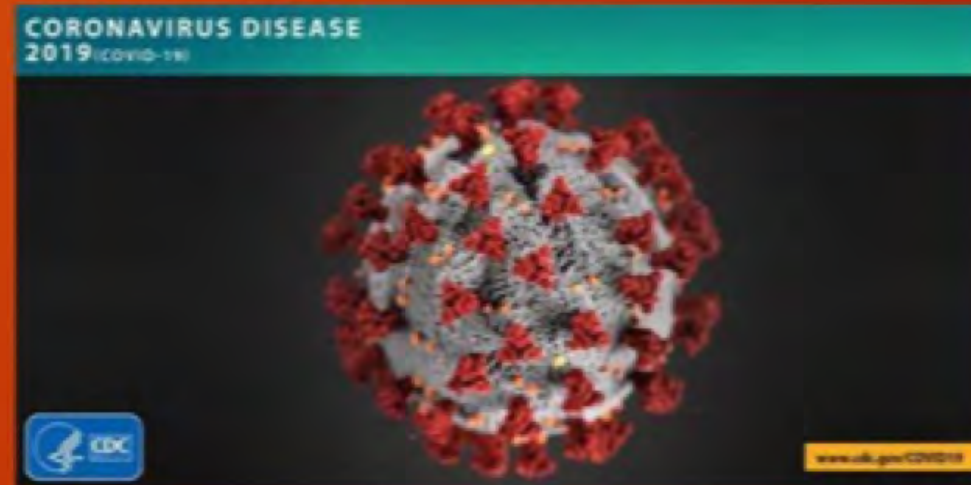
# Who is more likely to develop “Long COVID”?

- People who experienced severe initial illness
- People who have underlying health conditions, such as diabetes, asthma, autoimmune diseases or obesity
- People who did not get a COVID vaccine
- People who experienced multisystem inflammatory illness (MIS) during or after COVID



# Other factors that may play a role

- Female sex
- Older age
- Immune response to initial infection
- The SARS-CoV-2 variant that caused the initial infection
- Having a lower income or being unable to rest through the first few weeks after getting COVID also seem to raise the risk of long COVID



# Evaluation of a patient with persistent symptoms

- For patients who are still having symptoms after 4 weeks or who have new or worsening symptoms, medical evaluation is recommended
- If cardiopulmonary symptoms are present, providers should evaluate for the development of late complications of COVID, such as secondary bacterial pneumonia, empyema, pulmonary embolism, or COVID-related myocardial injury or inflammation with chest imaging and EKG
- Check complete vital signs, with special attention to SpO<sub>2</sub>, and in patients with orthostasis, pre-syncope or syncope, postural blood pressure (up to 10 minutes after standing) and pulse rate

# Management of specific Post-COVID symptoms: Cough

- Cough following recovery from acute COVID is managed in a similar fashion to cough in patients with postviral cough syndrome
- Supportive therapies (guaifenesin, benzonatate, dextromethorphan)
- If bronchospasm is present inhaled bronchodilators or glucocorticoids may help



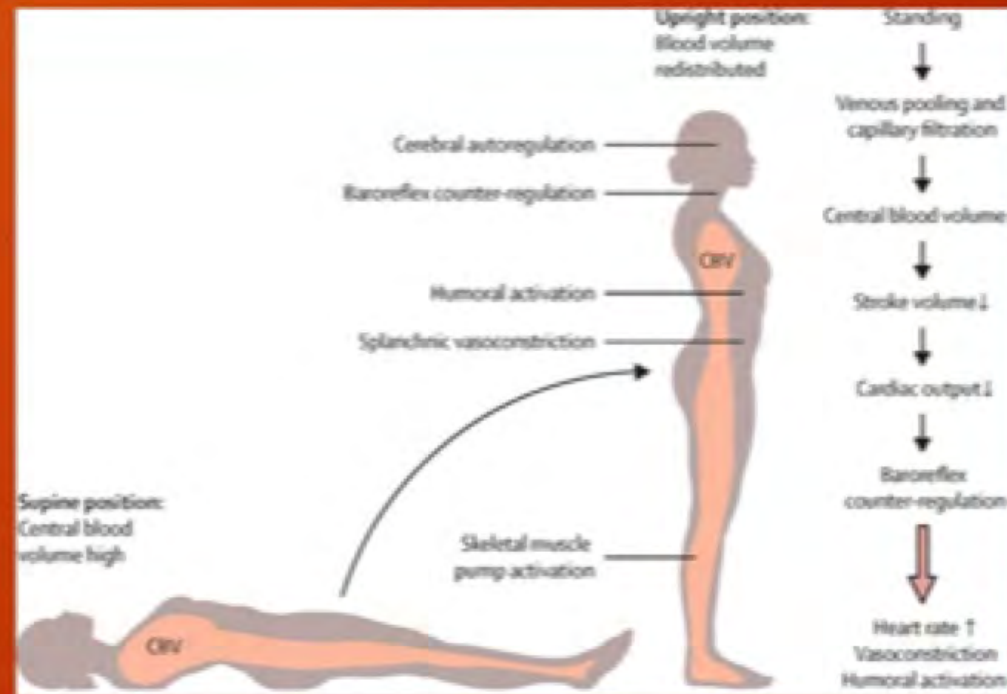
# Management of specific Post-COVID symptoms: Chest discomfort/tightness

- May resolve slowly
- Does not necessarily require treatment unless interfering with patient's quality of life
- NSAID's can be used if needed for more severe discomfort (as long as not contraindicated)



# Management of specific Post-COVID symptoms: Orthostasis

- Some patients experience orthostasis and dysautonomia (unexplained sinus tachycardia, dizziness on standing) following COVID
- Compression stockings, abdominal binder, hydration, physical therapy, and behavioral modifications may help



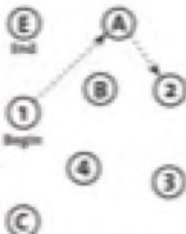
# Postural Tachycardia Syndrome (POTS)

- Intermittent symptoms of orthostatic intolerance accompanied by excessive tachycardia without arterial hypotension
- Behavioral modifications and medications such as beta blockers, fludracortisone or midodrine are sometimes used in this condition



## Management of specific Post-COVID symptoms: Neurocognitive Changes

- Screen patients who report memory and cognitive problems “brain fog” using formal testing such as the Montreal Cognitive Assessment (MOCA)
- Patients with scores indicating moderate-severe cognitive impairment may benefit from neuropsychological evaluation

| MONTREAL COGNITIVE ASSESSMENT (MOCA)                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | NAME : _____                                                                                                                                                                                                   | Education : _____ | Date of birth : _____ |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
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|                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Sex : _____                                                                                                                                                                                                    | DATE : _____      |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| <b>VISUOSPATIAL / EXECUTIVE</b><br> <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> <input type="checkbox"/> </div> | <br>Copy cube                                                                                                                                                                                                                                                                                                                                                                  | Draw CLOCK (See past eleven) (5 points)<br><br><div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| <b>NAMING</b><br> <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> </div>                                           |  <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> </div>                                                                                                                                                                                                                                                                                           |  <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> </div>                                        |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| <b>MEMORY</b><br>Read list of words, subject must repeat them. Do a trial. Do a recall after 5 minutes.                                                                                                                            | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;">SAGE</td> <td style="width: 15%;">VELVET</td> <td style="width: 15%;">CHURCH</td> <td style="width: 15%;">DADY</td> <td style="width: 15%;">RED</td> </tr> <tr> <td>1st trial</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2nd trial</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                |                   |                       |     | SAGE | VELVET | CHURCH | DADY | RED | 1st trial |  |  |  |  |  | 2nd trial |  |  |  |  |  |
|                                                                                                                                                                                                                                    | SAGE                                                                                                                                                                                                                                                                                                                                                                                                                                                              | VELVET                                                                                                                                                                                                         | CHURCH            | DADY                  | RED |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| 1st trial                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| 2nd trial                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| <b>ATTENTION</b><br>Read list of digits (5 digits) see 1. Subject has to repeat them in the forward order. Subject has to repeat them in the backward order.                                                                       | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;">2</td> <td style="width: 15%;">1</td> <td style="width: 15%;">8</td> <td style="width: 15%;">5</td> <td style="width: 15%;">4</td> </tr> <tr> <td>Forward</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Backward</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>                      |                                                                                                                                                                                                                |                   |                       |     | 2    | 1      | 8      | 5    | 4   | Forward   |  |  |  |  |  | Backward  |  |  |  |  |  |
|                                                                                                                                                                                                                                    | 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1                                                                                                                                                                                                              | 8                 | 5                     | 4   |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| Forward                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| Backward                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| Read list of letters. The subject must say with his hand at each letter &. No points if 5 errors.                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |
| <div style="display: flex; align-items: center;"> <input type="checkbox"/> <span style="margin-left: 10px;">F B A C M N A A J E L B A F A K D A A A A J A M O F A B</span> </div>                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                |                   |                       |     |      |        |        |      |     |           |  |  |  |  |  |           |  |  |  |  |  |

# Management of specific Post-COVID symptoms: Smell and taste changes

- In most cases, symptoms resolve slowly over several weeks and do not require intervention except for education regarding food and home safety
- Persistent symptoms may respond to olfactory training programs



# Management of specific Post-COVID symptoms: Fatigue and exercise intolerance

- Screen patients using a 6 minute walk test
- Encourage adequate rest, good sleep hygiene, fatigue management strategies
- Some patients may meet criteria for myalgic encephalomyelitis/chronic fatigue syndrome



# Role of Physical Therapy

- Some have speculated that graded exercise therapy may not be appropriate for patients with COVID-related fatigue and debility given concern for worsening postexertional malaise (PEM)
- However, real world experience from multiple centers has demonstrated that a structured and supervised program can improve endurance and reduce fatigue and dyspnea for many patients



# COVID and Diabetes

- Patients with type 2 diabetes are more likely to have serious complications, more ICU admissions, longer length of stay, and death from COVID
- Some studies suggest an increased incidence of diabetes after COVID
- Some of the newly diagnosed diabetes may be related to previously unrecognized diabetes, and approximately 50% of new-onset diabetes cases in the setting of COVID regressed to normoglycemia after recovery in one series
- An increase in the incidence of diabetes after COVID was also reported in children and adolescents <18 years of age

Source: Diabetes is a risk factor for the progression and prognosis of COVID-19. Guo et al. Diabetes Metab Res Rev. 2020

Source: Newly diagnosed diabetes vs. pre-existing diabetes upon admission for COVID-19: Associated factors, short-term outcomes, and long-term glycemic phenotypes. Cromer et al. J Diabetes Complications. 2022;36(4):108145. Epub 2022 Feb 4.

# How can Post-COVID conditions be prevented?

- Several studies report lower rates of post-COVID symptoms in patients who are vaccinated
- Some data also indicate that early treatment of COVID (eg. with nirmatrelvir/ritonavir) may reduce the risk of development of post-acute sequelae of COVID



Source: Association Between BNT162b2 Vaccination and Long COVID After Infections Not Requiring Hospitalization in Health Care Workers. Azzolini et al. Lancet Infect Dis. 2022;22(1):43. Epub 2021 Sep 1.

# Ongoing areas of research on Post-COVID conditions

- NIH RECOVER has enrolled over 20,000 participants
- Obesity, Insulin Resistance, and PASC: Persistent SARS-CoV-2 infection and Inflammation in Human Adipose Tissue
- Pathophysiological Mechanisms of PASC: Inflammatory Mediators of Endothelial Dysfunction
- Role of Sleep in PASC Recovery and the Development of Immunological Memory
- Metabolic Dysfunction, Viral Persistence and Bioenergetic T-Cell Fatigue in Post-Acute SARS-CoV2
- Long-term Sequelae of SARS-CoV-2 Infection: Diabetes Mellitus

# State Partner Updates



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## Free COVID-19 Testing Supplies for Tribes

### Washington

#### [Tribal Order Request Form](https://app.smartsheet.com/b/form/6574ac36b4f748269cac2507f2ab2f8e)

(<https://app.smartsheet.com/b/form/6574ac36b4f748269cac2507f2ab2f8e>)

**Available through July 31, 2024**

Individual COVID-19 testing gear: swabs for sample collection, biohazard bags for safe sample storage, transportation bags for secure shipping and ice packs to keep samples cool. Inteliswab® at-home test kits also available in boxes of 48 tests each.

### Oregon

#### [Abbott COVID-19 Tests Request Form](https://app.smartsheet.com/b/form/5ebd5f9f9a854d7bab7e00f48d2464bd)

(<https://app.smartsheet.com/b/form/5ebd5f9f9a854d7bab7e00f48d2464bd>)

Abbott BinaxNOW Rapid Antigen Test Kits for clinical use (organizations that have a CLIA waiver) and Abbott ID NOW COVID-19 test kits: request online

#### [ASPR Self-Test Ordering Form \(OHA\)](https://app.smartsheet.com/b/form/f367a9f9517748a4a501cdbc6622f171)

(<https://app.smartsheet.com/b/form/f367a9f9517748a4a501cdbc6622f171>)

Federal program providing free self-tests to approved groups, including tribes; minimum order ~450 tests. Contact Stephen Wilcox for more info ([Stephen.wilcox@oha.oregon.gov](mailto:Stephen.wilcox@oha.oregon.gov)).

# Questions and Comments



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