

Statistical bulletin

Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK : 3 March 2022

Estimates of the prevalence of self-reported long COVID and associated activity limitation, using UK Coronavirus (COVID-19) Infection Survey data.

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1 . Main points

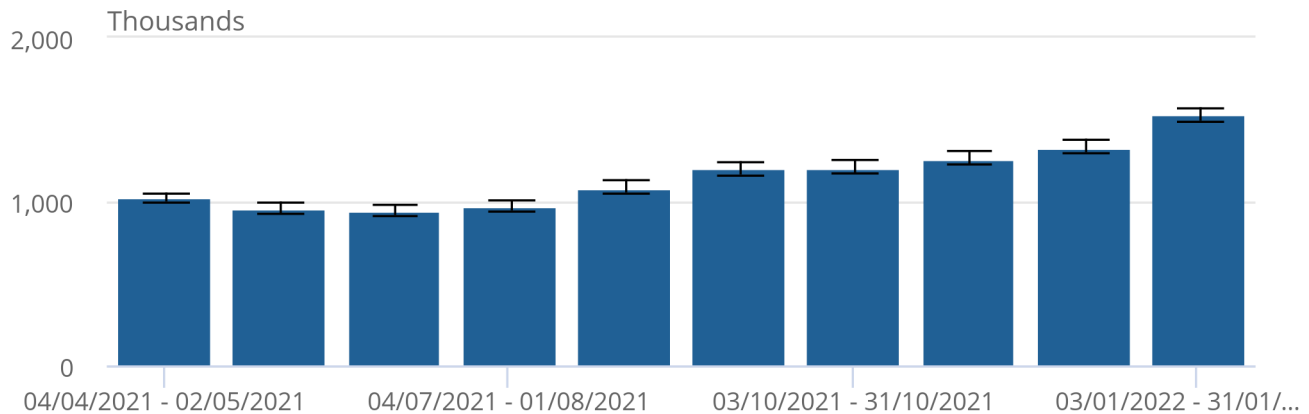
- An estimated 1.5 million people living in private households in the UK (2.4% of the population) were experiencing self-reported long COVID (symptoms persisting for more than four weeks after the first suspected coronavirus (COVID-19) infection that were not explained by something else) as of 31 January 2022 (see Figure 1).
- The estimates presented in this analysis relate to self-reported long COVID, as experienced by study participants who responded to a representative survey, rather than clinically diagnosed ongoing symptomatic COVID-19 or post-COVID-19 syndrome in the full population.
- Of people with self-reported long COVID, 344,000 (22%) first had (or suspected they had) COVID-19 less than 12 weeks previously, 1.1 million (71%) first had (or suspected they had) COVID-19 at least 12 weeks previously, and 685,000 (45%) first had (or suspected they had) COVID-19 at least one year previously.
- Long-COVID symptoms adversely affected the day-to-day activities of 989,000 people (65% of those with self-reported long COVID), with 281,000 (18%) reporting that their ability to undertake their day-to-day activities had been "limited a lot".
- Fatigue continued to be the most common symptom reported as part of individuals' experience of long COVID (51% of those with self-reported long COVID), followed by shortness of breath (35%), loss of smell (34%), and loss of taste and difficulty concentrating (both 25%).
- As a proportion of the UK population, prevalence of self-reported long COVID was greatest in people aged 35 to 49 years, females, people living in more deprived areas, those working in teaching and education, social care or health care ([likely reflecting increased exposure to COVID-19 infection in these sectors](#)), and those with another activity-limiting health condition or disability.

Figure 1: 1.5 million people were experiencing self-reported long COVID as of 31 January 2022

Estimated number of people living in private households with self-reported long COVID of any duration, UK: four-week periods ending 2 May 2021 to 31 January 2022

Figure 1: 1.5 million people were experiencing self-reported long COVID as of 31 January 2022

Estimated number of people living in private households with self-reported long COVID of any duration, UK: four-week periods ending 2 May 2021 to 31 January 2022



Source: Office for National Statistics – Coronavirus (COVID-19) Infection Survey (CIS)

Notes:

1. Estimates relate to self-reported long COVID, as experienced by study participants, rather than clinically diagnosed ongoing symptomatic COVID-19 or post-COVID-19 syndrome. Study participants were asked to respond to the following question: "Would you describe yourself as having 'long COVID', that is, you are still experiencing symptoms more than 4 weeks after you first had COVID-19, that are not explained by something else?"
2. Estimates include people living in private households and do not include those in communal establishments such as halls of residence, prisons, schools, hospitals, or care homes.
3. [Estimates for the four-week period 6 February to 6 March 2021](#) are also available.

If you are worried about new or ongoing symptoms four or more weeks after having COVID-19, there are resources available to help. You can visit the [NHS webpage on the long-term effects of coronavirus](#) and the [NHS Your COVID Recovery website](#), which can help you to understand what has happened and what you might expect as part of your recovery. The time it takes to recover from COVID-19 is different for everyone, and the length of your recovery is not necessarily related to the severity of your initial illness or whether you were in hospital.

This is analysis of new, recently collected data, and our understanding of the data and the quality of the data will improve over time. Long COVID is an emerging phenomenon that is not yet fully understood. The estimates presented in this release are [experimental statistics](#), which are series of statistics that are in the testing phase and not yet fully developed.

More about coronavirus

- Find the latest on [coronavirus \(COVID-19\) in the UK](#).
- [Explore the latest coronavirus data and analysis](#) from the ONS and other sources.
- View [all coronavirus data](#).
- Find out how we are [working safely in our studies and surveys](#).

2 . Prevalence of ongoing symptoms following coronavirus infection in the UK data

[Prevalence of ongoing symptoms following coronavirus \(COVID-19\) infection in the UK](#)

Dataset | Published 3 March 2022

Estimates of the prevalence and characteristics of people with self-reported long COVID and associated activity limitation, using UK Coronavirus (COVID-19) Infection Survey data.

3 . Measuring the data

This analysis was based on 382,591 responses to the [Coronavirus \(COVID-19\) Infection Survey](#) (CIS) collected over the four-week period ending 31 January 2022, weighted to represent people aged two years and over living in private households in the UK. Self-reported long COVID was defined as symptoms persisting for more than four weeks after the first suspected COVID-19 infection that were not explained by something else. Parents and carers answered survey questions on behalf of children aged under 12 years.

Date of first (suspected) COVID-19 infection was taken to be the earliest of:

- date of first positive test for COVID-19 during study follow-up
- date of first self-reported positive test for COVID-19 outside of study follow-up
- date of first suspected COVID-19 infection, as reported by the participant

Those with an unknown date of first (suspected) COVID-19 infection are in the estimates for "any duration" but not in duration-specific estimates.

The definition of self-reported long COVID in this release is consistent with that used for "Approach 3" in our [technical article](#) on the prevalence of post-acute symptoms 4 or 12 weeks after COVID-19 infection. The estimates in this release are expressed out of everyone in the population; in contrast, the denominator for the estimates in our technical article is the number of infected people in the study sample. A further difference is that this analysis is based on confirmed and suspected COVID-19 infections, whereas the estimates in the technical article include only laboratory-confirmed cases.

The focus of this analysis is the population prevalence of self-reported long COVID. For data on the impact of long COVID, see results from the [Opinions and Lifestyle Survey](#) and the [Schools Infection Survey](#) (SIS).

The strengths and limitations of this analysis are described in a [previous release](#). The survey questions relating to self-reported long COVID can be found in Section F of the enrolment and Section D of the follow-up [CIS questionnaires](#). See Tables 2a to 2f of the [technical datasets](#) accompanying the latest CIS statistical bulletin for survey response rates.

4 . Related links

[COVID-19 Infection Survey: methods and further information](#)

Methodology article | Last updated 7 February 2022

Information on the methods used to collect the data, process the data, and calculate the statistics produced from the Coronavirus (COVID-19) Infection Survey.

[Coronavirus \(COVID-19\) latest insights](#)

Interactive tool | Updated as and when data become available

Explore the latest data and trends about the coronavirus (COVID-19) pandemic from the Office for National Statistics (ONS) and other official sources.

[Coronavirus \(COVID-19\) Infection Survey: characteristics of people testing positive for COVID-19 in the UK](#)

Bulletin | Released fortnightly

Characteristics of people testing positive for COVID-19 from the Coronavirus (COVID-19) Infection Survey.

[Technical article: Updated estimates of the prevalence of post-acute symptoms among people with coronavirus \(COVID-19\) in the UK: 26 April 2020 to 1 August 2021](#)

Article | Released 16 September 2021

Experimental estimates from three approaches to estimating the percentage of people testing positive for coronavirus (COVID-19) and who experience symptoms four or more weeks after infection, broken down by demographic and viral characteristics, using UK Coronavirus Infection Survey data.

[Coronavirus and the social impacts of 'long COVID' on people's lives in Great Britain: 7 April to 13 June 2021](#)

Article | Released 21 July 2021

Indicators from the Opinions and Lifestyle Survey covering the period 7 April to 13 June 2021 to understand the impact of the coronavirus (COVID-19) pandemic on people by their self-reported long-COVID status.

[COVID-19 Schools Infection Survey, England: Prevalence of ongoing symptoms following coronavirus \(COVID-19\) infection in school pupils and staff: July 2021](#)

Bulletin | Released 28 September 2021

Initial estimates of prevalence of ongoing symptoms following coronavirus (COVID-19) infection in staff and pupils from the COVID-19 Schools Infection Survey (SIS) across a sample of schools, within selected local authority areas in England.

[COVID-19 Schools Infection Survey, England: mental health and long COVID, November to December 2021](#)

Bulletin | Last updated 28 February 2022

Analysis of COVID-19 findings on mental health and long COVID from the Schools Infection Survey's headteacher, parent and pupil questionnaires. The Schools Infection Survey is jointly led by the London School of Hygiene and Tropical Medicine, UK Health Security Agency and the Office for National Statistics.

[Coronavirus \(COVID-19\) Infection Survey: technical data](#)

Dataset | Released fortnightly

Technical and methodological data from the Coronavirus (COVID-19) Infection Survey in England, Wales, Northern Ireland, and Scotland.