



Lung function during and after acute respiratory infection in COVID-19 positive and negative outpatients

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At acute phase, outpatients with mild COVID-19 had more symptoms, higher small airway resistance and poorer lung elasticity compared to outpatients with other respiratory infections, but there was no difference between the groups after 2 months <https://bit.ly/3nalPye>

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To the Editor:

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has been associated with prolonged post-acute symptoms in at least 10% of patients [1, 2]. The majority of published data evaluates hospitalised patients with severe SARS-CoV-2 disease (COVID-19) with symptoms and pulmonary function defects several months after discharge [1]. Most of the infected subjects develop mild symptoms and are treated as outpatients. Though they are also reported to suffer from prolonged symptoms, their lung function is studied far less. Furthermore, the prolonged symptoms and objectively measurable findings are usually not compared to a group suffering from airway infection caused by other pathogens [2]. As spirometry and other aerosol-producing procedures are minimised during the pandemic, there are no reports on lung function during acute COVID-19.

