

Post-Pandemic Burden Of COVID-19 Among High-Risk Patients with Acute Infection: A Cross-Sectional Survey in Germany

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INTRODUCTION

- High-risk patients, particularly those with underlying health conditions, remain vulnerable to severe outcomes from COVID-19 infection [1]. Despite widespread exposure and evolving treatment practices, evidence on real-world clinical burden among high-risk individuals is limited in post-pandemic era in Germany.
- Understanding symptoms, quality of life effects, and functional impact in this population is essential to inform ongoing clinical management and support strategies in routine care in Germany [2].

OBJECTIVE

- The study aimed to describe clinical characteristics, treatment, quality of life (QoL), and activities of daily living (ADL) among high-risk patients with acute COVID-19 infection (<28 days).

METHODS

- Data were drawn from the Adelphi Real World COVID Disease Specific Programme™ [3-6], a cross-sectional survey, with retrospective data capture from physicians concerning consulting adult patients aged ≥60 years who tested positive for COVID-19 with acute infection in Germany between January and July 2024. These patients were considered as being at high risk of developing severe COVID-19 according to Germany specific guidelines [7].
- Physicians reported on demographics, clinical characteristics, treatment, symptoms, and patients' additional support required for their activities of daily living (ASADL).
- Patients were asked to fill out a voluntary self-completion form about their symptoms and ASADL. Each patient also subjectively rated impact of COVID-19 on their overall QoL and their overall health using EQ-5D-5L visual analogue scale (VAS) [8].
- All data were analysed descriptively. Continuous variables were presented as mean (standard deviation; SD) or median (interquartile range; IQR) as appropriate and categorical variables as n (%). All data were analyzed using UNICOM Intelligence Reporter, 7.5 (IBM Corp. Released 2023. IBM SPSS Statistics for Windows, Version 29.0.2.0 Armonk, NY: IBM Corp).

RESULTS

- 151 physicians reported data for 200 high-risk patients with acute COVID-19; 98 of whom completed a self-completion questionnaire (Table 1)

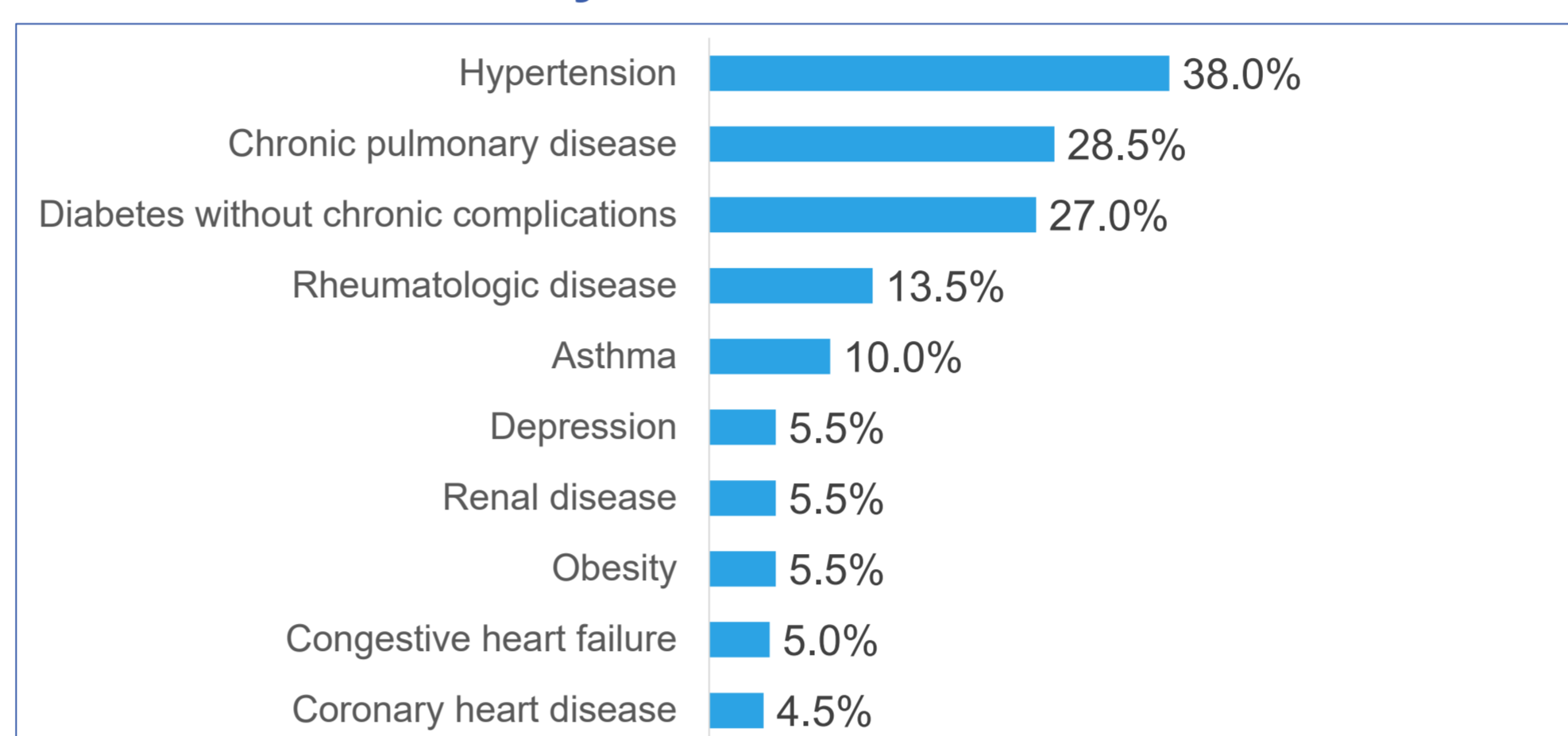
Table 1. Patient demographics (n=200)

	Value
Age, mean (SD), years	68.1 (6.1)
BMI, mean (SD), kg/m ²	26.0 (4.0)
Gender, n (%)	
Male	112 (56.0)
Ethnicity (not mutually exclusive), n (%)	
White	198 (99.0)
Black African or Caribbean	1 (0.5)
East or Southeast Asian	1 (0.5)
Employment status, n (%)	
Not working due to retirement	136 (68.0)
Working full time	36 (18.0)
Homemaker	14 (7.0)
Working part time	10 (5.0)
Unemployed	2 (1.0)
Don't know	2 (1.0)

RESULTS (continued)

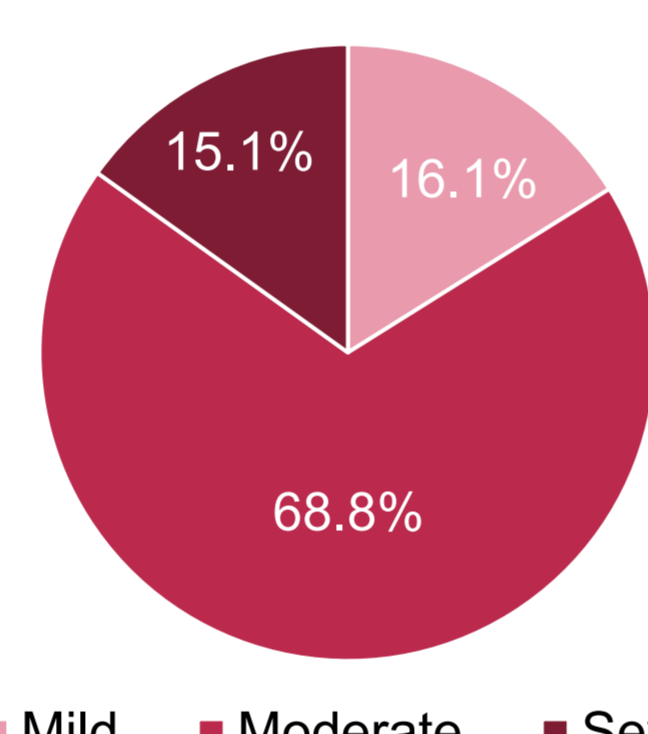
- 77.5% of patients had at least one concomitant condition, most commonly hypertension (38.0%), chronic pulmonary disease (28.5%), and diabetes without chronic complications (27.0%) (Figure 1).

Figure 1. Physician-reported most common concomitant conditions at survey date (n=200)



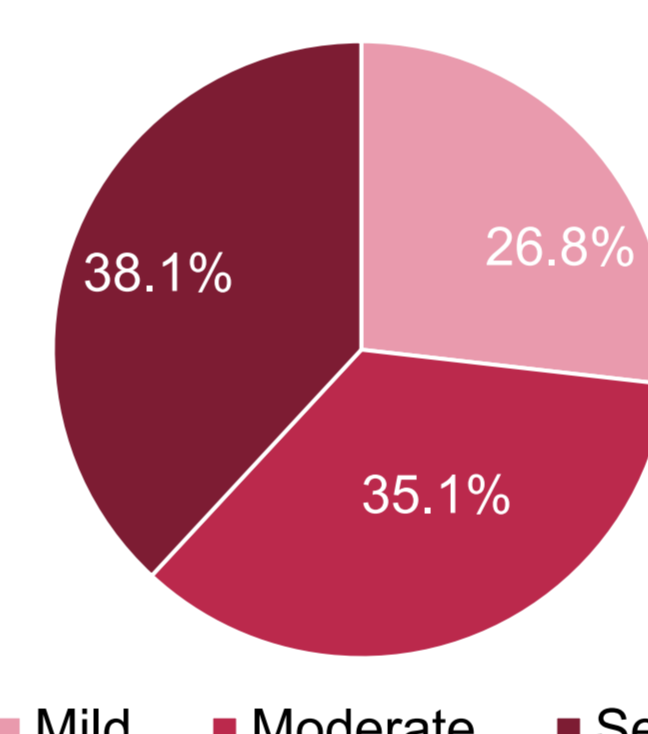
- At survey date, most patients self-reported experiencing moderate (68.8%) or severe (15.1%) COVID-19 symptoms. Patients self-reported 35.1% moderate and 38.1% severe impact of COVID-19 on QoL (Figure 2).

Figure 2a. Patient-reported current COVID-19 symptom severity (n=93*)



*n=93; missing data for 5 patients

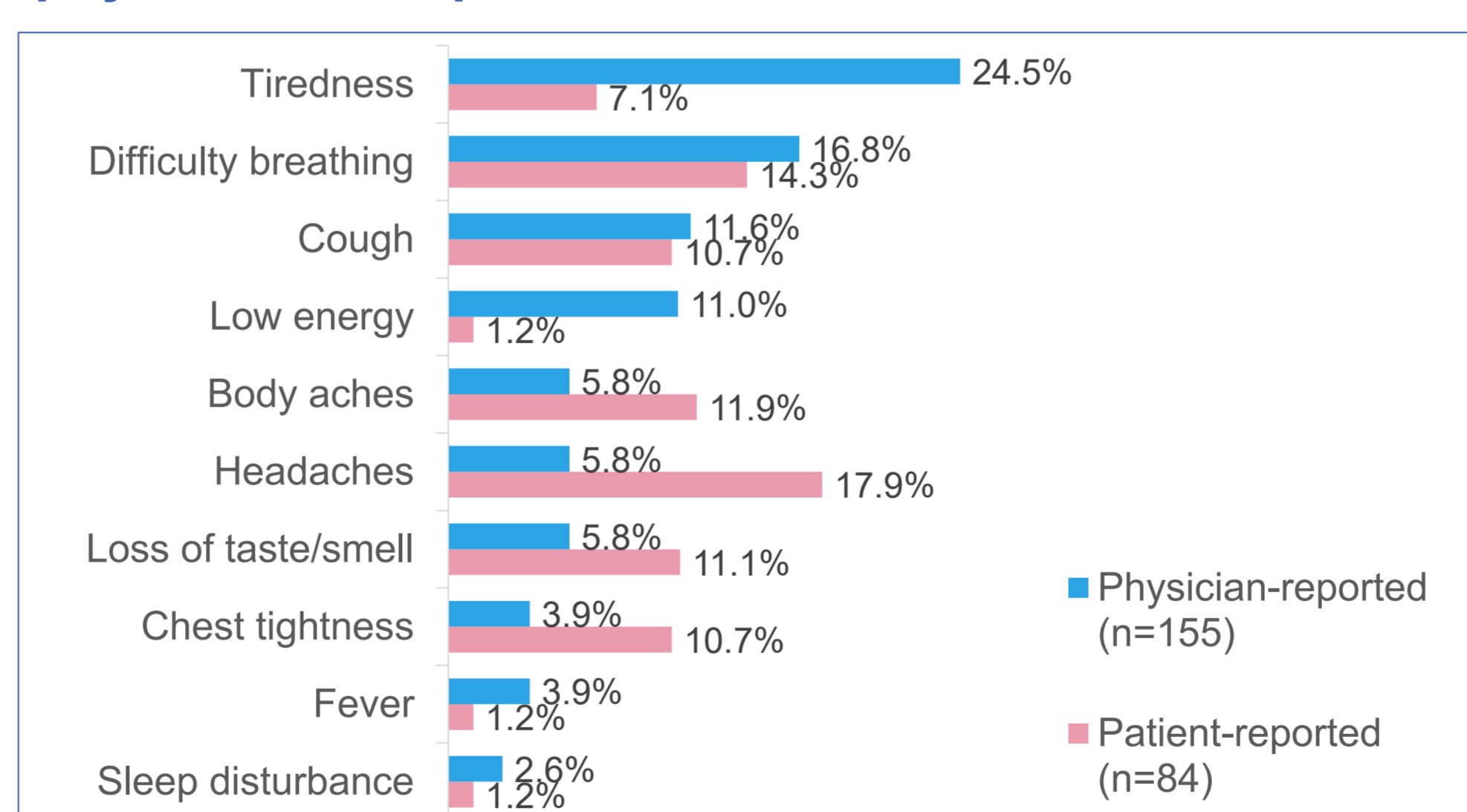
Figure 2b. Patient-reported current impact of COVID-19 on overall QoL (n=93*)



*n=93; missing data for 5 patients

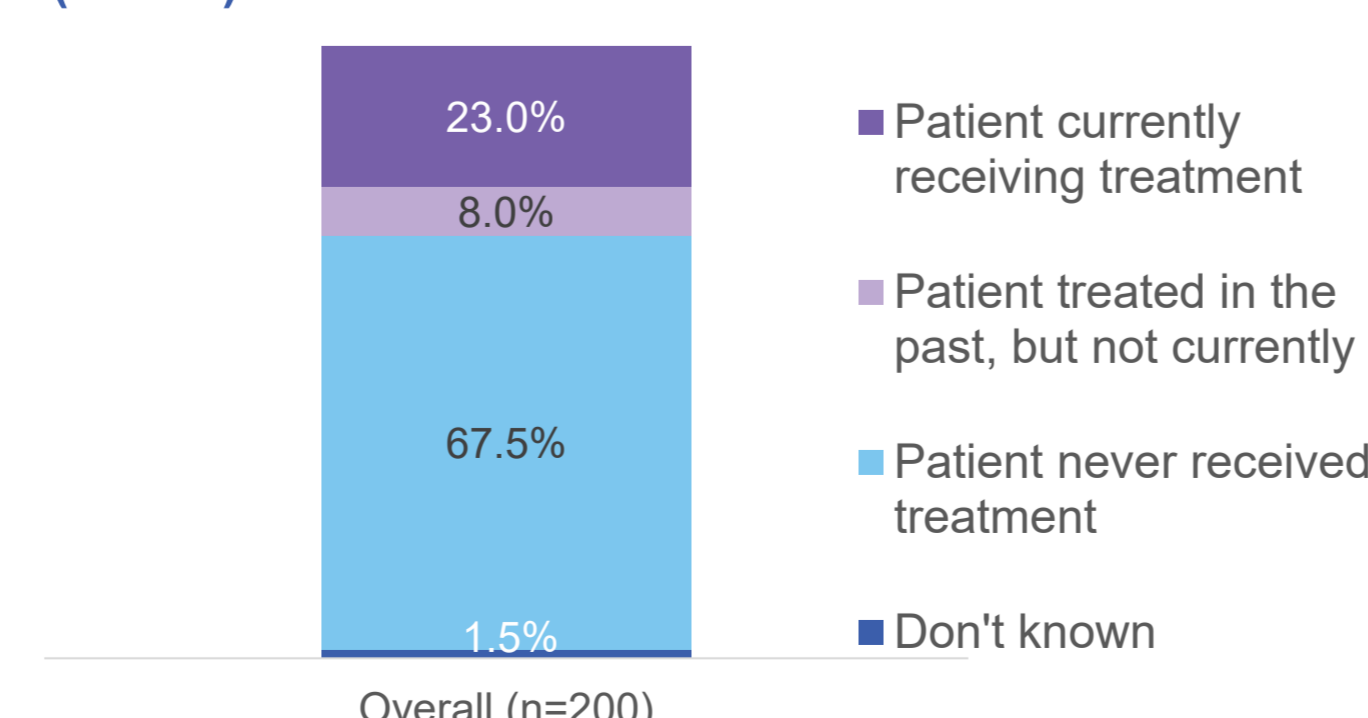
- At survey date, the most bothersome symptoms (physician-reported) were tiredness (24.5%) and difficulty breathing (16.9%). Patients most commonly self-reported headaches (17.9%) and difficulty breathing (14.3%) (Figure 3).

Figure 3. Most common bothersome symptoms experienced by patients reported independently by physicians and patients



- 31.0% of patients have received COVID-19 treatment currently or in the past, while 67.5% have never received treatment for COVID-19 (Figure 4).
- Of those who have received treatment, 95.1% received antivirals.

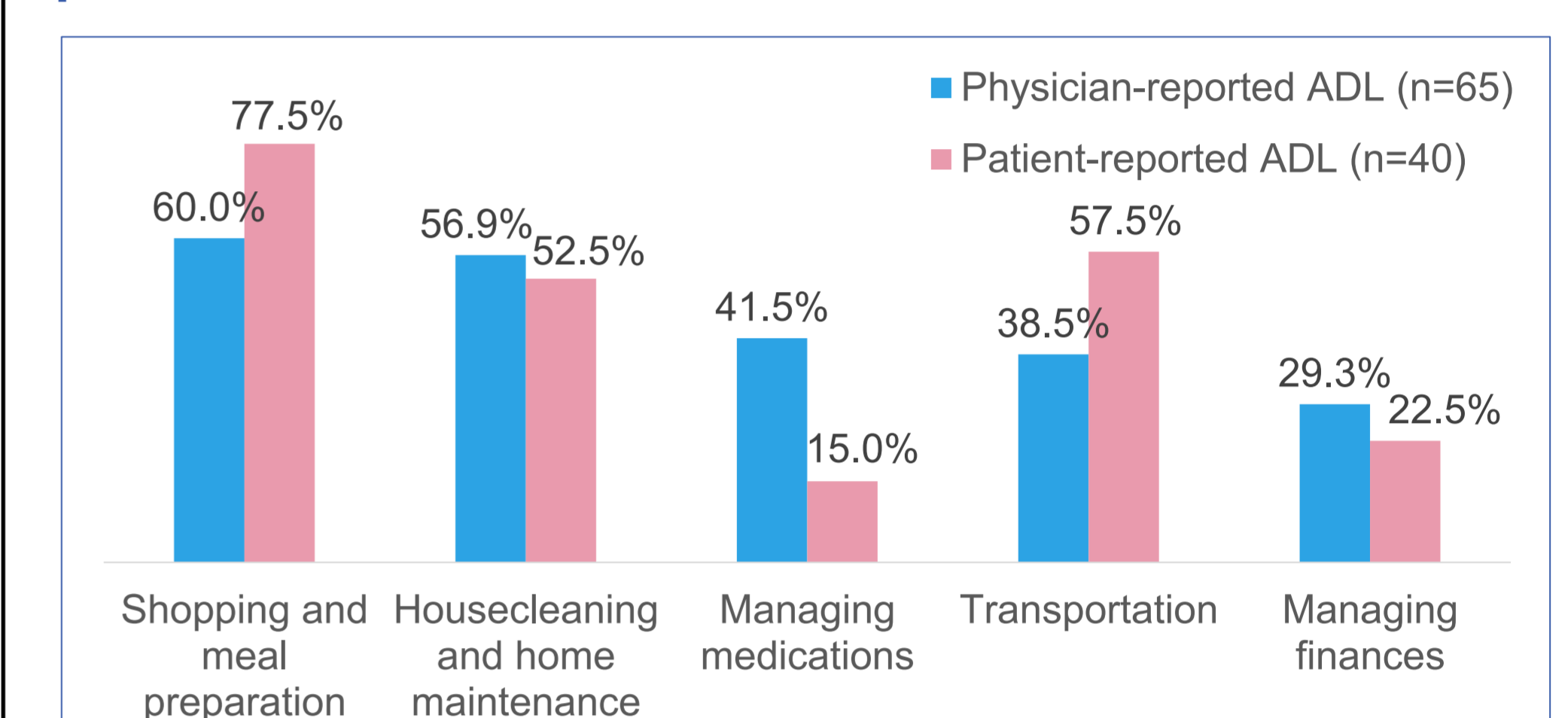
Figure 4. Physician-reported patients' current treatment status (n=200)



RESULTS (continued)

- 43.0% physicians reported that patients required ASADL from caregivers due to COVID-19, most commonly for shopping and meal preparation (60.0%). 40.8% patients stated that they required ASADL from their caregivers due to COVID-19, most commonly for shopping and meal preparation (77.5%) (Figure 5)

Figure 5. ADL caregiving support required for high-risk patients with acute COVID-19 infection



- Mean EQ-5D-5L VAS scores for high-risk patients with acute COVID-19 were 66.1 [SD:14.5].
- This level of self-reported overall health highlights a substantial humanistic burden, particularly when viewed in the context of existing literature reporting a mean (SD) EQ-5D-5L VAS score of 73.2 (18.5) among older adults (>65) in the general German population [9].

CONCLUSIONS

- High-risk patients with acute COVID-19 experienced a notable clinical, functional, and QoL burden, with a high proportion of patients not receiving any specific treatment for their COVID-19 infection.
- These findings highlight that, even in post-pandemic era, acute COVID-19 infection continues to impose meaningful challenges for high-risk patients in Germany. Ongoing research is warranted to evaluate how short-term impacts translates into longer-term health, QoL, and ADL, and to inform evidence-based approaches for monitoring and supporting high-risk populations over time.

References

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Disclosures

- MB, TM, EOIK, MAC, RM are employees of Pfizer
- AK, JL, EQ, JP are employees of Adelphi Real World

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