Surgeon General Tackles Workplace Well-being

US Surgeon General Vivek Murthy, MD, MBA, released framework for increasing mental health and well-being in the workplace.

The framework cites 2021 survey data of 1500 US-based adults that shows 84% of respondents reporting at least 1 workplace factor negatively affecting their mental health.

“A healthy workforce is the foundation for thriving organizations and healthier communities,” Murthy said in a statement. The new framework “will require organizations to rethink how they protect workers from harm, foster a sense of connection among workers, show workers that they matter, make space for their lives outside work, and support their growth.”

Murthy’s framework calls for prioritizing physical and psychological safety and providing time for adequate rest. Furthermore, it says, workplaces should normalize focusing on mental health and should operationalize diversity, equity, and inclusion initiatives. Other components include cultivating trusted workplace relationships and fostering a culture of belonging and teamwork. To encourage work-life harmony, the framework recommends that workplaces increase schedule predictability and flexibility while ensuring that boundaries outside of work time are respected. The framework also mentions that workplaces should offer opportunities for growth and foster a culture where employees feel like they matter.

“These systems are critical to sustain workplace structures and practices that advance rather than harm the health and well-being of all workers long-term,” the framework notes.

Related resources—including graphics, videos, reflection questions, and digital toolkits—are available at https://www.surgeongeneral.gov/workplace.

VA Finds Nirmatrelvir Associated With Lower Risk of Long COVID

The antiviral therapy nirmatrelvir, 1 of the medications used in Paxlovid, may mitigate the development of long COVID conditions, according to an observational study by the US Department of Veterans Affairs (VA).

The study was posted to the preprint server medRxiv in early November and had not yet been peer-reviewed.

In the study of medical records from veterans who tested positive for SARS-CoV-2, about 9200 patients took oral nirmatrelvir within 5 days of their diagnosis while about 47 000 did not receive antiviral or antibody treatment during the first 30 days of infection. All patients had at least 1 risk factor for developing severe COVID-19. None were hospitalized on the day they tested positive, and all survived for at least 30 days.

About 3 months after diagnosis, patients who received nirmatrelvir were 26% less likely to develop long COVID conditions such as blood clots, fatigue, heart disease, kidney disease, liver disease, muscle pain, neurocognitive impairment, and shortness of breath. Such conditions occurred less often among these patients regardless of their vaccination status and prior history of SARS-CoV-2 infection. Nirmatrelvir use was also associated with a 30% and 48% reduction in postacute hospitalization and death, respectively. However, the drug wasn’t associated with a lower risk of new-onset diabetes or cough.

“This treatment could be an important asset to address the serious issue of long COVID,” the study’s corresponding author, Ziyad Al-Aly, MD, director of the Clinical Epidemiology Center at the VA St Louis Health Care System, said in a statement.

HHS Releases New Report on Long COVID Experiences

The US Department of Health and Human Services (HHS) published a report highlighting the experiences of patients with long COVID. Between 5% and 30% of people who had COVID-19 may develop long COVID conditions, and about 1 million individuals aren’t in the workforce “at any given time” because of related symptoms, according to an HHS statement. It also notes that researchers have documented more than 50 long COVID conditions that affect nearly all organ systems.

“Long COVID isn’t one condition,” Deputy Assistant Secretary for Science and Medi-cine Michael lademarco, MD, MPH, said in the statement. “The Health+ Long COVID Report allows us to hear directly from patients so we can better understand the complexities of this multisystemic condition and enrich our understanding and response to Long COVID and its associated conditions.”

A literature review, 4 workshops, and interviews with more than 60 people about long COVID served as the report’s foundation. Participants were recruited from a diverse group to include those who had long COVID as well as caregivers and health care professionals. Researchers then synthesized common themes that emerged to paint a picture of shared long COVID experiences.

The report—commissioned by HHS and produced by Coforma, an independent research agency—also explores how and why the effects of long COVID can vary from person to person and ways in which individuals with related conditions can improve their quality of life and care. It points out that related conditions likely disproportionately affect historically underserved communities.

“Long COVID will be around long after the pandemic subsides,” the report concludes. “We can reduce the severity and breadth of that impact, however, if we act collectively and urgently.”

— Melissa Suran, PhD, MSJ

Note: Source references are available through embedded hyperlinks in the article text online.