



October 28, 2024

National Academies of Sciences, Engineering, and Medicine (NASEM)
2101 Constitution Ave., N.W.
Washington, DC 20418

Dear NASEM Committee:

I would like to express my gratitude to the National Academies of Sciences, Engineering, and Medicine (NASEM) committee for your work in creating a consensus definition of Long COVID. This definition establishes shared language that enables all individuals, including those living with Long COVID, healthcare providers, public health professionals, researchers, healthcare executives, and policy makers to speak with a shared understanding of this debilitating, chronic condition.

Upon being commissioned by my office and the Administration for Strategic Preparedness and Response, your committee embarked on a collaborative journey. This journey, marked by a thorough investigation of the science literature and outreach events with diverse stakeholders, culminated in your report, "A Long COVID Definition: A Chronic, Systemic Disease State with Profound Consequences." This report thoughtfully defines Long COVID and refers to a range of symptoms, diagnosable conditions, and other key features of the disease, such as its characterization as an infection-associated chronic condition. It is a testament to our collective effort.

The approach taken by your committee to bring all parties to the table is clearly shown in the definition's focus on equity: "Long COVID can affect children and adults, regardless of health, disability, or socioeconomic status, age, sex, gender, sexual orientation, race, ethnicity, or geographic location." This inclusive definition is a critical step to ensuring equity in care. Furthermore, the involvement of patient communities in this process ensures the definition reflects people's lived experiences. This patient-centered approach is invaluable in promoting understanding and empathy.

I am the Chair of the federal government's Long COVID Coordination Council. Together we have thoroughly reviewed the definition and support its use for general purposes. It is essential to acknowledge that there may be cases where the definition must be adapted for specific technical purposes. As such, the Long COVID Coordination Council, in collaboration with the Office of Long COVID Research and Practice, will work to analyze and address the implications of the use of the definition for technical purposes, including clinical care. Furthermore, regulatory agencies across the federal government will each follow their process to consider using the definition for regulatory purposes. Interested parties should inquire with those agencies.

At the Department of Health and Human Services, we recognize the importance of your committee's work. Your Long COVID definition is a significant step forward in our mission to improve health outcomes and ensure equity. I want to thank you again for your critical work, which is instrumental in our journey.

Sincerely,

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ADM, USPHS

Ian Simon, Ph.D.
Director, Office of Long COVID Research and
Practice