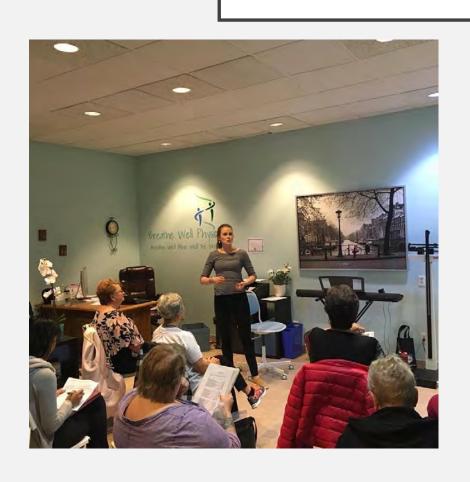
SINGING AND LONG-COVID

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SINGING AND LONG-COVID



Who am I?

I'm a voice teacher with a lot of background and experience in this area.

I work collaboratively with a multidisciplinary team.

Long COVID has been preliminarily defined by The National Institute for Health and Care Excellence (NICE) as the presence of signs and symptoms that develop during or following an infection consistent with COVID-19 which continue for 12-weeks or more and are not explained by an alternative diagnosis.

This includes both ongoing symptomatic COVID-19 (from 4 to 12 weeks) and long term consequences of COVID-19 (12-weeks or more).

Stigma/Disbelief



Pre-existing conditions

Access to Services

Anxiety

Acute Phase: 2 weeks

Initial Positive Test

Subacute Phase: 6-12 weeks

Cough

Fatigue

Mucus

Chronic Phase: 12+ weeks

Ongoing symptoms

Dysautonomia

Breath Pattern Disorders

Post-Exertional Malaise

Fatigue

Sensory Disturbance

Sleep Disturbance

Inability to Return to "Baseline"

Cognitive Difficulties

ME/CFS & Long-COVID

(chronic fatigue syndrome)

Fatigue that is beyond what is expected.

AUTONOMIC NERVOUS SYSTEM

Unconsciously regulates bodily functions...

Parasympathetic Nervous System

Rest, Digest, Repair

Calm, Relaxed

Decreased

breathing rate heart rate blood pressure

Balance



Sympathetic Nervous System

Fight or Flight

Alert, Tense, Panic

Increased

breathing rate heart rate blood pressure

DYSAUTONOMIA

Inappropriate responses from the autonomic nervous system...

Racing heart rate when resting

Increased blood pressure at rest

Breathlessness

BREATHING PATTERN DISORDER

Dysfunctional breathing...

"Regular life"

Chest breathing that leads to over breathing



BREATHING PATTERN DISORDERS

Common Symptoms:

Sighing/Yawning

Disturbed Sleep

Anxiety

Nausea

Clammy Hands

Fatigue

Muscle Aches

Irritability

Air Hunger

Red Flags:

Breathing discomfort

Erratic heartbeat

Chest pains

Dizzy spells

Extreme hoarseness that doesn't improve

Rapid, shallow breathing that doesn't improve

When in doubt, defer to a medical professional

BREATH MANAGEMENT

Diaphragmatic vs. Chest movement

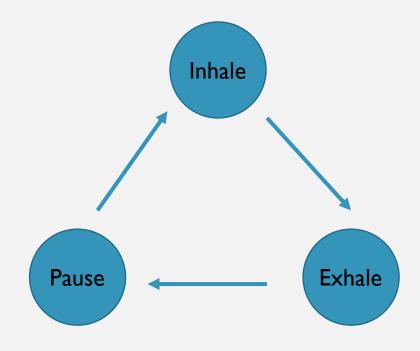


BREATHING MANAGEMENT

Longer exhale than inhale.

Pause before inhale.

8-12 breaths per minute.



Post-Exertional Malaise (PEM)

...a flare of symptoms and/or the appearance of new symptoms after exertion, often presenting 24 hours or more after the triggering event.

Physical activity, **cognitive** overexertion and **sensory** overload can all trigger PEM.

Singing is inherently athletic!

Physicality:

Breathe to larger lung volumes

Engage the body

Coordinate our breath, voice, articulators...

Stamina required

Sophisticated cognitive tasks:

Foreign Languages

Characters

Interaction with other musicians

Playing other instruments

Graded Exercise

A gradual increase in activity over time as directed by a clinician, until the patient returns to a healthy activity level.

While grade exercise may be useful in patients who are deconditioned after surgery or severe illness, graded exercise does not address the metabolic changes and atypical reactions to activity that lead to symptoms in people with ME/CFS.

Because post-exertional malaise is the hallmark symptom of ME/CFS, programs that gradually increase exercise may do more harm than good.

Pacing

A self-management strategy for activity

...active when able

...rest when tired



then



Rest

Rest as much as possible before a triggering event.

Doing less is doing more

Whatever you think you can do, do much less until you know it's OK.

Set smaller, manageable, obtainable goals Prior

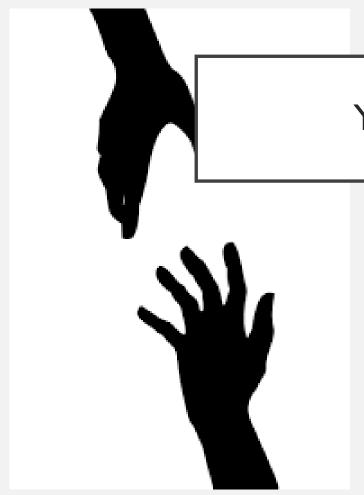
als Prioritize goals

Journal

What works and what doesn't work?

Wearables

In consultation with healthcare provider to keep heart rate lower.



YOU AND YOUR STUDENT

How to Support

Listen

Believe

Advocate

Reinforce and support the treatment plans from the health professionals.

Go slowly and be prepared for ups and downs.

YOU AND YOUR STUDENT

Strategies:

Shorter lessons Easy repertoire to begin with

Have the student sit down while singing

Be aware of sensory overload

Double warm up time Vocal hygiene strategies

Adjust breaths so the volumes are not so extreme
Check in about the last session

Reduce ranges Inquire about crashes

Slower tempos Continue to check in about energy levels throughout lesson

Cool down and return to quiet breathing

YOU AND YOUR STUDENT

Go slowly

Give yourself and your student permission to be flexible in setting your goals.

When in doubt, refer out!

Look for support within the medical and allied health community or from other singing teachers.

Teach the person in front of you!

RESOURCES

www.breathewellphysio.com

www.themusicalbreath.com

https://www.physiosforme.com/covid-19

https://www.wearebodypolitic.com/covid19

https://longcovid.physio/