WSWS speaks with New Zealand Long Covid sufferer

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The World Socialist Web Site recently interviewed a Long Covid sufferer in New Zealand, who we will call Paul, about his experiences with the debilitating condition which has forced him to stop working and sell his home. The interview was conducted as part of the Global Workers’ Inquest into the COVID-19 Pandemic initiated by the WSWS to break through the cover-up, falsifications, and misinformation that have been deployed to justify policies responsible for mass infection and disablement of millions of people around the world.

Since New Zealand’s prime minister Jacinda Ardern announced just over a year ago that the Labour Party-led government was abandoning its Zero COVID policy, the coronavirus has spread throughout the country largely unimpeded. Because of this criminal political decision, deaths from COVID-19 have soared from just 32 last October to about 2,500, perhaps higher. It is estimated that at least half of New Zealanders, 2.5 million people, have been infected. If just one in 10 develop Long Covid then, conservatively, 250,000 people could be experiencing ongoing symptoms months after contracting the coronavirus. Research is still being conducted into Long Covid, and there are no specific treatments. It can cause prolonged inflammation and damage to numerous organs in the body, including the brain, lungs and heart, while weakening the immune system.

Paul got COVID-19 at the end of May. As a healthcare worker at a Christchurch hospital he had received three doses of the Pfizer vaccine and was careful to wear masks and take other basic precautions. Despite such measures, thousands of healthcare workers have been infected this year, exacerbating what was already a staffing crisis before the pandemic.

At first, Paul was not overly concerned. He explained: “I’m in my forties, so I was one of those people who thought I was getting vaccinated to protect others. I wasn’t really worried about getting COVID because I just assumed it wouldn’t affect me. I was slightly overweight but not massively, and I didn’t have any other physical issues. I was very active, I would do 10,000 steps every day, running around doing things at work.”

“I thought I was low risk. I assumed I would get COVID and I would bounce back, but as the weeks went by, instead of getting better, I got worse. It still baffles me to this day: what the hell happened that made my body react like this?”

“My experience during my acute COVID phase was a bit like having the flu,” Paul said. “I had symptoms like fever, cough, no appetite, and I was so tired, I slept a lot. About the time I was due to go back to work I still felt quite tired. But my colleagues, friends and family who had had COVID all said: ‘You will be tired for a few weeks and that’s completely normal, so don’t worry about it. Just do what you can and slowly ease back into it.’

“So I went back to work and just tried to get on with things but my symptoms, instead of getting better, got worse. I suddenly started losing a lot of weight, I just had no appetite and when I did eat food it tasted like cardboard. I spent a few weeks going downhill and feeling pretty miserable, but I tried just to push through.

“About three weeks after my acute COVID I tried to get back into exercise. I went to a hot yoga class, something I used to do two or three times a week, and my heart rate just went massively high, so I ended up having to sit out half the class.

“After that, for about the next four to six weeks I would go to work, I would come home utterly exhausted, I would be in bed at about 7 p.m.. Then I would spend the weekends in bed just trying to rest and recover and have enough energy to go back to work on Monday.”

Paul’s symptoms worsened towards the end of July, forcing him to stop work altogether. He developed “horrific insomnia,” something he had never experienced before, as well as loss of appetite, weight loss and brain fog. “One day at work, someone asked me how old I was and I couldn’t tell them, I forgot my own age. I had to figure it out with a calculator.”

He had a CT scan of his brain after waking up one morning, about two months after his acute COVID phase, “incredibly dizzy to the point where I couldn’t stand up straight, and I actually fell over. I thought that I was having some sort of brain event; I thought: Geez, am I having a stroke? I was with my father that day and I said to him: ‘I’m really not feeling that great.’ The next thing I knew, I was on the floor and he was calling 111 because I’d suddenly collapsed.

“It’s really changed my whole life,” he said. “I’ve gone from someone who used to work full time, clean my house on weekends, go and see friends, go out, go to the gym three or
four times a week, do yoga classes—pretty much all of that has stopped. For a couple of months I stopped driving because I wasn’t confident. With the brain fog, quite often I wake up feeling hung over, even though I don’t drink.” Paul also started using an inhaler to deal with shortness of breath.

“I’ve said to people I don’t even feel like I’m the same person anymore, because I feel like my brain doesn’t work the same, my body definitely doesn’t work the same. One of my most annoying symptoms is that my whole body feels like it’s on fire most of the time and I sweat profusely.” This was like a constant fever, “but instead of it being just the head, it’s the whole body: my legs, my arms, my face. I’ll have a shower and I’ll get out freezing cold, and within 10 minutes I’m sweating again and it’s like I never even showered.”

In early November, Paul was forced to sell his apartment and move to live with his parents, “just to try and help me financially, because without working it was quite hard to keep on top of all the bills which come with owning a property.”

He was able to get some assistance from the state agency Work and Income NZ (WINZ), but it was not enough. After getting a medical certificate showing he couldn’t work, Paul had to apply for the Jobseeker Support payment ($315 a week for a single person), in addition to a small Disability Allowance to cover medical expenses.

It is not clear how many of the 170,000 people receiving the Jobseeker benefit (as of September), 5.4 percent of the working-age population, are doing so because of Long Covid. The government keeps no record of the numbers of people with the condition.

WINZ did not allow Paul to register for his benefit as a Long Covid sufferer. “For my medical exemption, as far as they’re concerned, I can’t work because of my anxiety, which was the first really big symptom that caused me to stop working,” he said.

Paul, who is part of a Long Covid support group on social media, said many people with the condition have been told they just have anxiety, which is one of dozens of symptoms. “I had some experience with anxiety in the past. Long Covid is more like being in a nightmare 24/7, a feeling of being in utter terror.

“How my doctor explained it to me was that my body somehow got stuck in the fight-or-flight mode, I had too much adrenaline coursing through my veins and freaking my body out. She said: ‘It’s not your thoughts that are causing this, it’s how your body is responding.’ But the thing about Long Covid is there is no actual test for it, so they’ve got to exclude everything else first.” Paul has taken a series of blood tests to rule out other conditions.

For the most part, Paul said, the government has remained silent on Long Covid. People with the condition are largely on their own, with little information or support.

“I just feel really let down,” he said. “I worked in the health sector. I thought that if I got sick I’d be taken care of. And then to suddenly find that you’re left high and dry and you’ve got to do your own research, find your own treatments and try a million different multivitamins and pills and things…. it’s frustrating.

“You’re pretty much told: Go to your GP, and the poor GPs quite often know very little about it. I’m lucky because I’ve got a doctor who does believe in the condition, but I know from speaking to other people that they’ve been to doctors who pretty much rolled their eyes at them and said Long Covid doesn’t exist.

“We aren’t pretending to be sick!” Paul said. “I didn’t wake up one day and think: ‘Gee, I’m going to go on the benefit and not work for a while and have to sell my home and give up all my activities that I enjoy.’ This is real, and if it can happen to someone like me, it could happen to anyone.

“From my perspective, all I want is to be back at work. I want my old life back. I’m not after anything financially, I just want to get back to where I was or at least similar to where I was.”

Asked how he felt about the government’s decision to remove the vast majority of pandemic-related public health measures, including temporary lockdowns and mask and vaccine mandates, Paul said: “As someone who has Long Covid, I wish they hadn’t.” While he understood that some people were frustrated by the restrictions, he felt that the government should have “waited until we knew more about Long Covid and how to treat it first, before saying: hey, we’ve just got to live with it.

“One of the things that really upsets me and would upset anyone with Long Covid is when people talk about the pandemic being over, or they talk about the ‘post-pandemic world.’ For those of us who are still sick, it’s not over. We’re not post-pandemic, we’re still living it.”

The WSWS pointed out that hospitalisations and deaths are now increasing, with New Zealand now experiencing a third wave of the pandemic, fuelled by several new variants.

“That’s exactly it,” Paul said. “We’re sort of pretending everything’s okay, and clearly the case numbers are going up every day and the number of deaths are going up. It’s not getting better, it’s getting worse.”

He noted that even for those who have so far avoided long-term symptoms, “with each exposure, your risk of ending up with Long Covid gets even higher. It’s like playing Russian Roulette. I was unlucky enough to get it on my first strike, but some people have had three or four cases of COVID and then ended up with Long Covid.

“One of the things we talk about often in the Long Covid support group is that the only way to prevent Long Covid is to not get COVID in the first place,” he said.