

To Whom It May Concern:

My name is Sara Zirm and I am humbly asking you to please support and vote in favor of HB0027. This bill will create critical programs like the Maryland Long Covid Research Fund and support Long Covid innovation which Long Covid patients can't wait any longer to receive, the situation is dire.

I caught COVID in December 2024 and although I was already disabled before that infection, COVID has made my condition and symptoms worse and I now live with new symptoms that began at infection and have continued now for over a year, with no signs of improvement. I live with my parents and can really only leave my house for doctors' appointments. My symptoms include: burning mouth syndrome, extreme fatigue and post exertional malaise (PEM), nerve and muscle pain, headaches and many more symptoms.

I have friends who are also disabled by COVID who were able bodied prior to their COVID infection. Imagine having so many symptoms caused by this virus with not ONE single approved treatment let alone cure.

People are losing their jobs, their homes, their futures because of this horrible disease, and we have nothing to help and no one to turn to. While personally, I would still be disabled even if it weren't for my COVID infection and/or if there was a cure, it still makes sense to me to have treatments for those who have been disabled by this virus. It makes long-term economic sense to support Long Covid sufferers so they can recover, heal, and return to work, pay taxes, and have decreased medical costs.

I would also love for these treatments to be able to apply to those of us who have preexisting conditions that disqualify us from participating in Long Covid trials. People with conditions like I have, autoimmune disease, hEDS and brain malformation are also at risk for Long Covid symptoms but cannot access these treatments due to preexisting conditions being barriers to treatment.

Covid-19 is still running rampant through Maryland, leaving new cases of Long Covid in adults and children in its wake. Wastewater data shows around 117,300 new weekly cases currently in Maryland <sup>1</sup>, which will leave around 20,000 people disabled by Long Covid...again, weekly. Annapolis is at the CDC's highest level of Covid spread- Very High. Nationally, Covid case numbers are higher now than all of 2020 and 2021. This is a crisis.

Around 25-30% of people who get Covid will develop Long Covid (LC)<sup>2</sup>, a complex disease that is composed of 200 symptoms and has no approved treatment or cure<sup>3</sup>. The likelihood of developing LC goes up around 14% with each Covid infection, so by three infections, the chance is 40%<sup>4</sup>. The risk further increases if someone is a women<sup>5</sup>, Black<sup>6</sup>, Latino<sup>7</sup>, disabled or chronically ill<sup>8</sup>, low-income<sup>9</sup>, Trans<sup>10</sup>, has HIV/AIDS<sup>11</sup>, elderly<sup>12</sup>, Indigenous<sup>13</sup>, and/or a healthcare worker<sup>14</sup>. Around 50% of people with LC also develop the devastating condition Myalgic Encephalomyelitis (ME)<sup>15</sup>, which has a recovery rate of only ~5%<sup>16</sup>.

Marylanders with Long Covid and their friends and family are desperate for help and the federal funding and care for LC research is abysmal at best. We are depending on our state leaders to care about us and fight for us. Please support HB0027 and be the leaders and innovators that sick Marylanders deserve.

Thank you for your time and consideration of this matter. I truly appreciate it.

Sincerely,  
Sara Zirm

1. <https://www.pmc19.com/data/>
2. <https://www.cidrap.umn.edu/covid-19/studies-across-14-nations-show-25-30-rate-long-covid>
3. <https://jamanetwork.com/journals/jama/fullarticle/2805540>
4. <https://www150.statcan.gc.ca/n1/pub/75-006-x/2023001/article/00015-eng.htm>
5. <https://www.cdc.gov/covid/long-term-effects/index.html>
6. [www.nih.gov/news-events/news-releases/nih-recover-research-identifies-potential-long-covid-disparities](https://www.nih.gov/news-events/news-releases/nih-recover-research-identifies-potential-long-covid-disparities)
7. <https://www.cdc.gov/covid/long-term-effects/index.html>
8. <https://www.cdc.gov/covid/long-term-effects/index.html>
9. <https://www.cdc.gov/covid/long-term-effects/index.html>
10. <https://longcovidjustice.org/trans/>
11. <https://longcovidjustice.org/hiv-lc-risk/>
12. <https://www.cdc.gov/covid/long-term-effects/index.html>
13. [ncuih.org/wp-content/uploads/Takeaways-Indigenous-Wellness-A-Conversation-on-Long-Covid-5.25.2023.pdf](https://ncuih.org/wp-content/uploads/Takeaways-Indigenous-Wellness-A-Conversation-on-Long-Covid-5.25.2023.pdf)
14. [www.cidrap.umn.edu/covid-19/studies-detail-high-rates-long-covid-among-healthcare-dental-workers#](https://www.cidrap.umn.edu/covid-19/studies-detail-high-rates-long-covid-among-healthcare-dental-workers#)
15. <https://www.yalemedicine.org/news/long-covid-mecfs-and-the-importance-of-studying-infection-associated-illnesses>
16. [https://me-pedia.org/wiki/Prognosis\\_for\\_myalgic\\_encephalomyelitis\\_and\\_chronic\\_fatigue\\_syndrome](https://me-pedia.org/wiki/Prognosis_for_myalgic_encephalomyelitis_and_chronic_fatigue_syndrome)