

DOI: <https://doi.org/10.56936/18290825-2025.19v.4-54>**UNVEILING THE HETEROGENEOUS BURDEN OF LONG COVID IN THREE IRANIAN CITIES****MOUSAVI M.J¹, AMIRZARGAR S.², AREFINIA N.³, AJEL M.⁴, ARYAMAND S.⁴, BEHBOUDI E.^{4*}**¹ Department of Hematology, School of Para-Medicine, Bushehr University of Medical Sciences, Bushehr, Iran² Islamic Azad University Roodehen branch, Azad, Iran³ Bio Environmental Health Hazards Research Center, Jiroft University of Medical Sciences, Jiroft, Iran⁴ Department of Basic Medical Sciences, Khoy University of Medical Sciences, Khoy, Iran*Received 03.07.2025; Accepted for printing 21.10.2025***ABSTRACT**

The COVID-19 pandemic has left an enduring global health legacy, extending far beyond the acute phase of the illness. A significant proportion of individuals, even after recovering from the initial infection, experience a constellation of persistent symptoms, a condition known as Long COVID or Post-Acute Sequelae of SARS-CoV-2. This study investigates the heterogeneous burden of Long COVID in three distinct cities in Iran: Khoy, Bushehr, and Jiroft, each presenting unique geographical, socioeconomic, and healthcare contexts. Employing a cross-sectional study design, we surveyed 900 individuals in three cities of Iran, providing valuable insights into the prevalence, risk factors, and symptomatic manifestations of Long COVID. In the present study, Jiroft presents the highest prevalence of Long COVID at 24%, closely followed by Khoy at 21.7%, while Bushehr shows a considerably lower rate of 16%. The age, gender, pre-existing condition, and vaccination were significantly different among these three cities (p -value less than 0.05). Individuals in Jiroft exhibited a greater burden of pre-existing conditions, experienced more severe initial infections, were less likely to have access to health insurance, and reported a high financial burden of health care. This study suggests a convergence of vulnerabilities contributing to the city's higher Long COVID prevalence. Symptom profiles also varied across the cities, but the core complaints remained prominent, including fatigue, shortness of breath, and cognitive dysfunction. By identifying the specific drivers and patterns in each city, we can inform tailored interventions, healthcare resource allocation, and public health strategies that are responsive to the unique contexts of Khoy, Bushehr, and Jiroft.

KEYWORDS: long covid, Iran, risk factors, symptoms.**CITE THIS ARTICLE AS:**

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ADDRESS FOR CORRESPONDENCE:

Emad Behboudi, PhD, Assistant Professor
Khoy University of Medical Sciences
Valiasr street, Khoy 8144168859, Iran
Tel.: +98 (936) 7011199
Email: emadbehboudi69@gmail.com