

# A Food Lover's Guide to Cooking With Long COVID-19

Chronic pain, fatigue, and brain fog can mean rest and restoration come before meal prep and dish duty. But hope is not lost when it comes to cooking joy.



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Illustration by Haley Tippmann

As an emergency physician and associate residency director at Emory University School of Medicine in Atlanta, Jeff Siegelman, M.D., would make life-altering medical decisions and perform rigorous tasks while covering an ER the size of a football field. Then he'd go home, play soccer with his son, help his wife make dinner, [do the dishes](#), and repeat it all the next day.

But in August of 2020, Siegelman came down with a mild case of the COVID-19 virus that never entirely went away. "I've gone from being a completely healthy 40-year-old emergency physician to being a disabled physician," Siegelman says. "It's shifted that balance of what I can contribute to the family and changed how I can enjoy time with my kids." And when it comes to preparing meals? "I guess I'm her prep cook now," he says of the limited contributions he offers his wife.

Long COVID-19 refers to persistent symptoms continuing 90 days after a COVID-19 infection, even if the virus or antibodies are no longer detected. [Preliminary studies show](#) it affects an estimated 25 to 35% of COVID-19 patients. The "COVID Long Haulers" symptom list documents 200 potential symptoms, the most common being overwhelming fatigue, cognitive impairment, loss of taste and/or smell, persistent headaches, and post-exertional malaise, where pain and fatigue worsen after activity.

Post-viral illness may seem a new phenomenon given the current overwhelm of long COVID-19 cases. But millions of people with myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) have long reported similar disabilities. "I wouldn't say that there's any single symptom unique between the two," says Emily Taylor, director of advocacy for [Solve M.E.](#) and senior staff for the [Long-COVID Alliance](#). Both illnesses affect people across demographic populations. Like Siegelman, those with healthy lifestyles are not immune from developing chronic conditions.

Chronic pain, fatigue, and brain fog can mean rest and restoration come before meal prep and dish duty. But hope is not lost when it comes to cooking joy. With a few shifts the kitchen can become a safe and sacred space once again.

**Reframe your relationship**

It can be hard to embrace new routines when you're hung up on those you can no longer do. "It comes from an identity piece of 'I'm not as capable or valuable because I can't do *this thing*,'" says [Shemiah Derrick](#), a licensed professional counselor in Chicago with long COVID-19. To move on from that '*I can't*' mode of thinking, focus on the importance of the end game. Are you calmed by the mindful quiet of prep time? Does tackling a new recipe thrill you? Or is it about gathering loved ones around a meal? Once you identify that value, consider shifts that will ease the process: Let prepped meal kits or frozen chopped vegetables lighten preparation physicality. Assign a partner, friends, or children the menial tasks in larger recipes. Let take-out or frozen meals concentrate your limited energy on table time.

"It's about getting to a level of acceptance that some things have changed," Derrick says. "There's an opportunity for us to do things differently if it's something we find value in."

Accepting help can be challenge enough. "It's a difficult transition, especially if you're an independent, private person and suddenly have to let somebody into some intimate moments of your life," Taylor says. "Learn to ask for help. Imagine your loved ones being your hands and your bridge and make it part of your relationship together. That's a good way to keep cooking in your life while not bringing symptoms back."

## **Pace and rest**

Cooking often requires a flurry of energy and action, which becomes impossible for those with debilitating fatigue. "Like many of my patients, I am used to pushing through illness," says Janna Friedly, executive director of the [Post-COVID Rehabilitation and Recovery Clinic at Harborview Medical Center](#) in Seattle. "Long COVID is different. You can't push through. It requires a lot more structure and focused efforts to help rehabilitate."

Friedly's personal long COVID-19 rehabilitation meant switching from high-intensity workouts to stretching and restorative yoga. She says such pacing is equally crucial when it comes to kitchen tasks. "People know what times of the day they tend to be most fatigued," she says. "Structuring your meals around that can be helpful." Prep meals during your most energized hours. Rest between activities. And try to let go of self-imposed productivity pressure, like insisting that you must wash dishes before bed no matter how ill you feel.

Simplifying your cooking style can help too. "I have a motto to do 'Some Not None,'" says [Claire Huntley](#), a woman with ME/CFS in Victoria, Australia. To reduce cognitive and physical demands, she limits the things she cooks and uses methods that allow seasonal produce to shine. For more complicated recipes she breaks steps into "tiny tasks" she'll tackle over one or two days. "Even though I have limited energy and capacity, I still choose to use food preparation to express my identity, love, creativity, skills, and knowledge," she shares of the pace-and-rest benefit.

## Lighten the load

Most long COVID-19 and ME/CFS patients experience lightheadedness and dizziness upon prolonged standing. This is caused by dysregulation of the autonomic nervous system—which moderates heart rate and blood pressure levels—called postural orthostatic tachycardia syndrome (POTS). To reduce falls and exhaustion, avoid cooking while on your feet. “Rearrange your kitchen so that it’s easier to sit when preparing foods,” Friedly says. Follow Siegelman’s lead and cook seated on kitchen barstools. Or invest in [an adjustable stool on wheels](#) so you can work safely at any surface.

Consider subtle energy saves too. “I changed all my kitchenware to a much lighter weight just to make lifting plates easier,” says [Christina Baltais](#), a Toronto visual artist who has had ME/CFS since 2005. As cognitive and physical symptoms can increase slips and drops, embrace unbreakable options when possible. If they fall, “Those don’t require a lot of cleanup,” says Marije Zwart, a woman with ME/CFS in Friesland, the Netherlands.

## Let food be thy medicine

It can feel natural to reach for fatty, sugary foods when seeking comfort. But Friedly points out that many post-COVID-19 symptoms may be caused by inflammation. An anti-inflammatory diet high in fresh produce, lean protein, and healthy fats encourages long-term healing.

Converting meals into snacks helps too. “One hallmark of POTS is that you need to eat smaller meals,” says Siegelman of how a rush of food can cause the body to overwork, accelerating heart rate and then flaring symptoms like post-exertional malaise and headaches. It can also overwhelm blood sugar—another inflammatory factor that’s especially risky around food-laden holidays. To keep these as consistent as possible, eat small meals or snacks every few hours.

If you’re unsure about how foods trigger specific symptoms, Taylor encourages food journaling. “A lot of symptoms that come from food are not immediately obvious—most of them are gradual and subtle,” she warns. “Start watching timelines.” Record your meal intake and when symptoms arise. If you suspect a correlation, try the component ingredients again. Observe if the flare repeats. Remove the item if so.

And if you’re having trouble with getting your appetite back after COVID-19 or regularly too exhausted to prepare, eat, and digest food, consider the “blend and sip” routine: Keep protein shakes and vitamin drinks nearby. Ask a friend to make and portion out [blended soups](#). Freeze [smoothie packs](#) to blend as needed. Talk to your local juice joint about daily pickups. Or let a [customizable smoothie delivery service](#) ease preparation. The goal is to provide a nutrition baseline and increase metabolism, so every sip counts.

## Spice it up

Don't know what to eat when everything tastes bad because of long COVID-19? You're not alone—a loss of taste or smell is a common and frustrating symptom. Some lose the ability to identify any concentration of flavor. Others have trouble recognizing specific ingredients, herbs, and spices. And then there's parosmia, where you wrongly identify one flavor as another.

There are a few running hypotheses as to why this happens. One is that the SARS-CoV-2 virus concentrates in the nasal passages and then crosses the blood-brain barrier where olfactory processing happens. “That is shut down by the autoimmune response,” says Taylor—a loss of smell is the result of a localized attack by our immune system's defense. Another theory is that the virus binds to the ACE2 receptor protein lining many cells in the nasal passages. “Your olfactory nerves come in around the roof of your nose. These other cells support those nerves. Those cells are infected and then inflamed after COVID,” explains Siegelman. “They can heal,” he stresses. But how long it takes to regain a sense of smell after COVID-19 differs for all patients.

While you wait, identify which specific flavor loss feels most accurate for you. Then embrace a new style of eating to suit. Alternate hot cooked proteins, raw veggie salads, fried chips and treats, and puréed soups to provide constant texture sensation. Use red pepper flakes and hot sauces to take food from bland to flavorful. Combine hot and cold ingredients for sensation too. And remember that we eat with our eyes first—a little flare in presentation never did anyone wrong.

## Embrace self-care—and hope

Derrick suggests envisioning bodies as fueled by a gas tank: Healthy people can function on half a tank and then level up with a good night's sleep. But people with long COVID-19 and ME/CFS require a full tank to get through the day and need much more time to refill. To apply this mentality, plan extended periods of time to recharge between activities and schedule regular self-care. “Do a little bit of what we call habit stacking, where you tack something helpful on top of something you're already doing,” Derrick says. Going to a medical appointment? Schedule a massage or therapy for that day too. Big dinner party on the horizon or planning to tackle a hefty new recipe? Make sure a restorative practice or extended time in quiet comes before.

Shijing Jia, M.D., a Michigan pulmonologist with long COVID-19, encourages a consistent increase of activity but warns not to be dissuaded by setbacks. “It's important to keep pushing daily but also to rest when your body needs it,” she says. And while creating new routines can feel like major life overhauls, Friedly promises hope on the horizon. “Don't think that having COVID longer term is a lifelong sentence,” she says. “For a lot of people it's a wake-up call that we need to take better care of ourselves in general.”