



“BRAIN FOG,” MEMORY PROBLEMS, AND OTHER NEUROLOGICAL ISSUES AFTER COVID-19

LONG COVID ESSENTIALS: A SERIES BY The Sick Times × LONG COVID JUSTICE

Neurological symptoms like memory loss or other cognitive dysfunction (sometimes called “brain fog,”) are very common after COVID-19.

These symptoms can happen to anyone of any age group. Brain fog and other neurological symptoms can make daily life, school and work difficult. There are no approved treatments for these symptoms, but there are some ways you can help manage them.

* SIGNS OF “BRAIN FOG” OR COGNITIVE DYSFUNCTION

- **Forgetfulness:** Having more trouble than usual remembering where you put your keys, what you just said in a conversation, or the name of an old friend.
- **Problems with executive function:** More difficulty than usual making plans, completing complex tasks, managing finances, or managing your time.
- **Difficulty concentrating or paying attention:** Trouble concentrating on tasks at work, sitting through movies, or remembering what someone said a moment ago in conversation.

* OTHER NEUROLOGICAL SYMPTOMS

People with Long COVID can develop other symptoms that affect the brain and nervous system such as pain, internal tremors, tingling, and numbness throughout the body. Other neurological symptoms include headaches, problems with balance, and sensitivity to light and sound.

Some people may also lose their sense of [taste and smell](#). Unlike other symptoms that often don't resolve on their own, people [may recover taste and smell over time](#).

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* SYMPTOM MANAGEMENT

There are some strategies and providers you can use to help manage these symptoms/conditions.

- [Pacing](#): Planning and spacing out physical and mental exertion throughout the day can help you manage some of these symptoms, as they may be a result of post-exertional malaise (PEM), or worsened symptoms after physical, emotional or mental activity. This can include even very mild activity.
- Medical conditions like [dysautonomia](#), [mast cell activation syndrome \(MCAS\)](#), [myalgic encephalomyelitis \(ME/CFS\)](#), and others that overlap with Long COVID could make neurological symptoms even worse. It is often very hard to find a specialist to diagnose these conditions. However, if you are able to get a diagnosis, it could help with accessing treatments and resources.
- Occupational therapists and/or speech/language pathologists, especially at Long COVID clinics, can help implement strategies to adjust to or work around cognitive symptoms.
- Although there are currently no approved treatments, medical providers might suggest supplements or drugs off-label, like [guanfacine](#) or [low-dose naltrexone](#).

* RESOURCES

- [Helpful video on cognitive dysfunction](#) – Long COVID Physio
- [Cognitive dysfunction info page](#), includes some potential treatment options – MEpedia
- [Cognitive dysfunction resource page](#) – World Health Organization

* **FULL SERIES OF FACTSHEETS WITH LINKED RESOURCES + MORE:**

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* **QUESTIONS?** connect@s4hi.org



This series was designed by people living with Long COVID and associated diseases. Each resource sheet has been reviewed by patient and medical experts. This is an informational resource, not medical advice. Publication date: 9/16/2024.