**Nutritional support for patients recovering from COVID-19: A consensus process with health and social care sector and patient representatives**.

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COVID-19 infection presents with highly variable symptoms many of which can affect nutritional status, such as taste changes, gastrointestinal symptoms, breathlessness, and fatigue. Therefore, diet plays a role in the treatment and recovery from COVID-19. For patients with long-COVID recovery may take months or years, and has a major impact on patients' everyday life, putting pressure on health and social care services. Despite the growing amount of research and the important role of nutrition, available information is highly variable in quality and accessibility. The aim of this project was to map out the evidence and support available and guide decision-making in the nutrition and dietary aspects of care for adult patients recovering from COVID-19.

We used nominal group technique to gain consensus from both healthcare professionals and patients recovering from COVID-19 on what is needed to support both patients and professionals in terms of nutritional care. We adapted data collection due to lockdown restrictions by holding virtual expert panels; one panel for professionals and one for patients. Information for silent generation was e-mailed to participants ahead of Zoom (zoom.us) meetings; a whiteboard functionality replaced a flip chart, and Mentimeter (mentimeter.com) was used for anonymous voting and ranking of ideas. We held a total of six meetings (three with each panel), collected votes from each panel and thematically analysed final discussions held among both panels.

Professionals spoke about a lack of awareness and resources to address dietary issues. Patients felt that optimal nutritional intake would be an important part of recovery, but struggled to identify reliable sources of information. Healthcare professionals were not able to provide the information they desired. Both groups recognised that support for nutritional care may need to be provided by non-professionals, particularly in the community and that there is a need to identify and train these people to empower them to deliver nutrition care, as well as pateints recovering form COVID-19. Both groups stated that improvements were necessary in health services for people with long-COVID in relation to nutrition and that since COVID-19 presents with highly variable symptoms and severity, a highly flexible and adaptable resource is needed to support nutritional care.

In response to these findings we have developed a virtual knowledge hub to provide appraised and updated information mapping out nutritional support for COVID-19 recovery ([www.plymouth.ac.uk/research/dietetics-and-health/covid-knowledge-hub](https://www.plymouth.ac.uk/research/dietetics-and-health/covid-knowledge-hub/)). The information is organised in two parts; one targeting patients and one for professionals. Each section starts with the relevant consensus statements generated by the expert panels, which guided the content. The content for professionals includes identification of those in need of nutritional care, assessing nutritional needs, advice on first line and more advanced dietary modifications, monitoring nutritional status and dietary change, managing symptoms linked to nutrition, and challenges for the delivery of nutritional care. For patients content includes identifiying nutritional risk, managing symptoms and nutrition, improving dietary intake, understanding the evidence, where to find additional support, and finding a registered dietitian or nutritionist.

In response to themes and questions generated by the patient panel we also organised a series of public talks by experts within the field, which are freely available and incorporated into the knowledge hub. These include “Is there an anti-inflammatory diet?”, “Is there a link between food and my symptoms?”, “Psychological well-being and communicating with healthcare professionals”, and “Diet & COVID”.

These outputs could encourage others to roll out locally adapted care pathways linked to these resources, and thus optimise recovery and reduce the likelihood of further deterioration in patients recovering from COVID-19. This demonstrates a strategic and evidence based approach to address the current crisis and future problems from a nutritional perspective.