

# Nutritional considerations:

## During and after Coronavirus (COVID-19) illness

Malnutrition and frailty often co-exist. With the additional Covid19 symptoms, in particular a persistent cough, high temperature and taste changes, you may find it hard to tempt your patients to eat and drink enough. Here are some simple ideas on ways to support your residents at this time:

### **Cough and shortness of breath**

If your patient is experiencing shortness of breath they may find oral and fluid intake difficult, try the following:

- Offer a teaspoon of honey if they are coughing as and when required.
- Encourage small frequent meals.
- Easy to chew, soft and bite-sized or minced and moist diet maybe easier to manage.
- Adding extra sauces e.g. gravy, white sauce, custard and cream.
- Encourage small amounts of fluid frequently.
- Positioning the patient upright.
- Reduce temperature of their room by opening window.

### **High temperature**

- Ensure adequate fluid intake – aim for at least 6-8 drinks a day.
- Offer at least two ‘nourishing drinks’ daily, such as chilled milkshakes, fruit juice or hot chocolate.
- Enrich whole milk by adding skimmed milk powder to provide extra calories and protein.

### **Taste changes and dry mouth**

It is usual for patients to experience a loss of taste and smell but these will return over time.

- **If the strong flavours from hot meals** are offputting– try cold foods such as salads, sandwiches, cheese and biscuits and yogurts.
- **Make food easier to eat** – try adding sauces such as gravy, white sauce, custard, mayonnaise and cream.
- **Loss of taste** – try to add cooking sauces, herbs, spices, pickles, mint sauce, chutney, apple sauce, salt and pepper in cooking.
- **Loss of smell** –encourage oral intake and try to reassure that these symptoms will improve.

### **Eat little and often**

- Try to have 3 meals each day plus 3 snacks and nourishing drinks between meals. If you cannot eat a full meal, eat a small amount every 2-3 hours.
- Eat what you fancy and if your appetite is better at certain times of the day, aim to eat more at these times. Cold foods can sometimes be more appetizing than hot foods.
- If you add extra sauces or gravy to your meals they may be easier to eat.
- Choose foods and drinks that are ‘nourishing’, ie high in calories and protein such as ‘whole’ milk and other full fat dairy products.
- Drinking during meals may make you feel full so try and wait until after you have finished eating to have a drink.

### **Protein**

Many patients will suffer weakness due to muscle loss so it is important to increase their protein intake. Sources of protein are found in meat, fish, eggs, milk, yoghurt (especially Greek), beans, pulses, nuts, tofu, cheese and homemade milkshake.

#### **Homemade milkshake recipe**

250ml full fat (whole) milk, add 3 level tablespoons (18g) milk powder and 4 teaspoons (16g) milkshake powder (e.g. Nesquik™ or supermarket-own brand).

**Method:** Mix all ingredients together, blend until smooth. Serve chilled.

**Fortified milk recipe** (use instead of regular milk in your drinks, cereals and in cooking)

1 pint of whole milk (blue top) 4 level tablespoons (24g) of milk powder e.g. Marvel® (skimmed) or Nido® (whole milk powder) or supermarket brand.

**Method:** Mix the milk powder with a small amount of milk. Whisk in the rest of the milk, use!

### **Vitamins and minerals**

If your resident has a reduced intake they may find it difficult to get enough vitamins and minerals from their diet. If they are not able to go outside their vitamin D requirements may be higher due to reduced sun exposure please consider the following:

- Current guidelines are 10 micrograms of vitamin D a day. Or if intake remains reduced, consider a complete A-Z multivitamin and mineral supplement which provides 10 µg vitamin D.
- 5 portions of fruit and vegetables daily.

### **Visiting**

As care home residents are no longer able to have physical visits from family and friends they may feel lonely and be missing their loved ones – this may affect their appetite, especially if they do not understand why no-one is coming to see them. Where feasible, encourage family and friends to keep in touch via telephone, Skype or Zoom calls or to send photos and letters. Residents may lose weight, especially if they enjoyed food treats that visitors used to supply.

**This leaflet is not suitable for use in someone with a diagnosed unsafe swallow / dysphagia.**

**Think, Food First!**

Leaflet given out by \_\_\_\_\_

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