

She's also had waves of new symptoms, like a fast heart rate, and the loss of taste and smell, which luckily have now come back.

The worst, she said, is unrelenting fatigue.

Thompson is still off work and daily tasks are often tough. On the bad days she can't even hold her phone.

"It's never critical but it is debilitating," she said. "I'm not good."

Before COVID, she was healthy and active. Constantly on her feet as a chef, she could "haul a 50-pound bag of potatoes up stairs."

Despite a couple of emergency room visits, Telehealth and phone appointments, a few blood tests, a lung X-ray, and an echocardiogram, she still doesn't have answers.

There are some doctors trying to figure out what's going on with people like her. A massive multi-province study, starting in Ontario, hopes to recruit 2,000 COVID survivors and follow them over time, using questionnaires and blood tests to understand their range of experiences. It will examine antibodies, how the immune system responds, genetics, and blood clotting. Interested patients can contact the team at cancov@uhn.ca.

"There are huge variabilities and the problem is we currently cannot tell which ones are going to get really really sick and which ones may just have the flu kind of symptoms," said Dr. Angela Cheung, an internal medicine specialist at University Health Network and professor of medicine at the University of Toronto.

"We don't know the whole picture right now and that's why we're doing the study."

While there are some patients who don't have symptoms and statistically most just have mild ones, "it's not only a respiratory illness, the virus can effect other systems and some people have sort of prolonged, sort of residual type symptoms," she added.

It's true that older people and those with underlying medical issues are more likely to die, or end up in intensive care.

"However, we have seen young people who have been really really sick and they don't have anything. They don't smoke, they don't vape, they don't have diabetes, they don't have high blood pressure and they're not on medications," she said.

It's an observational study. But it will also connect patients to care, lung tests for example, if they need them, and "if we find out that a certain medication or supplement or something may be helpful, we would actually offer that as well."

There are about 80 long-haulers who have reached out wanting to be in the study, but only 11 of them have positive test results, Cheung said.

So the researchers are going back to their ethics board asking for approval to do research antibody tests on these people so they can include them.

But that leaves those like Thompson still in limbo, on the waiting list for the cross-Canada study, unable to get care now and in a situation she describes as "a waking nightmare." She was tested in April, but by that point it was already negative.