

# *How You Feeling?*

## *A Long-Hauler's Journey*

by

**David Stahler Jr.**

### **I.**

There it is again. Not the monkey on my back, but the monkey in my lungs. The shadowy homunculus that, like an unwelcome deadbeat relative, showed up months ago and now lies sprawled across a bed of scarred alveoli, eating chips and drinking beer and watching bad TV. It comes and goes to the rhythm of its own capricious whims, but it doesn't seem to want to really leave. Over three months have come and gone, and my lungs still hurt, my breathing still feels labored at times, and this thing—whatever it is—continues to occupy territory not only in my chest but in my head, jockeying for space with a thousand articles chronicling the broader pandemic still sweeping the land, the blossoming economic destruction following in its wake, and the ravings of a bloviating, orange-faced lunatic who, like the illness in my lungs, continues to find novel ways to wreak all kinds of havoc.

It started slowly, as these things do. Distant blips against a backdrop of white noise. I'd been following news of a novel coronavirus with mild but growing concern: a few stories in January about the Chinese quarantining Wuhan, a city of millions; a website from Johns Hopkins featuring a global map of the virus with a few isolated clusters of dots here and there. It was spreading, but it still seemed far away as February rolled along. Years ago, H5N1—an avian flu with a 50% mortality rate—had terrified me before

fizzling out like a dud firework, leaving me a little chagrined. A slew of others followed: SARS, H1N1, MERS, Ebola, none of them landing a real blow beyond the limited confines of their native regions. So as I paid attention to the novel coronavirus stories, I reminded myself that my fear of contagion had always proved unfounded, and I did my best to tamp down my anxiety. Like those other viral outbreaks, this too would pass and leave us untouched. Closer to home, there were plenty of diversions. Our son was getting ready to hear back on his college applications. There was ski season and playoff football, an impeachment trial.

But by early March it was clear COVID had come to stay. It was also clear that the president was doing jack squat about it and that we were about to be viciously screwed by a highly contagious virus that was now deadlier than it had seemed back when it was confined to Hubei province. I consumed media like never before, grew obsessed. The stories coming out of Italy were increasingly apocalyptic. My old anxieties were reawakening with every news cycle.

My wife and I prepared our son and daughter at dinner one night early in the second week of March. "Things are going to change," I told them, trying to balance gravity with calm. "There's a good chance life is going to be a lot different over the coming months. But we're here together, and we'll keep you safe." They in turn were quiet, poised. They didn't ask many questions, which was good. I didn't have many answers.

The rest of the week unfolded with an increasing sense of surreality. I attended a series of solemn staff meetings at the high school where I teach English in the Northeast Kingdom of Vermont. Scenarios were discussed, preparations laid out for the possibility of a shutdown. One day we were thinking in terms of weeks, the next in terms

of days. On Thursday, March 12, the announcement was made. Our boarding students—about 15% of the student body—were being sent home. Immediately.

The decision seemed shocking at first blush. There were few cases in New England and none in Vermont. It was a major blow. All of us were upset. Some angry. A few questioned the urgency, the impetus to make such a major, disruptive decision in the absence of real information. Not me. I'd been reading the articles and knew what was coming. Hard as it was, the school was making the right decision.

I broke down for the first time on the drive home from school. Nothing major. Just a wave of tears and a few sniffles. But I rarely cry. My son, a senior at the school where I teach, asked me what was wrong.

"I'm just sad, that's all," I mumbled. He was quiet and kind. He understood.

I kept thinking about the fact that I wouldn't see my boarding students for the rest of the school year, and since many were seniors, it was likely I'd never see them again. As it turned out, it was the last day I'd see any of my students in person. It was all over for us. We just didn't know it yet.

The next day, as our boarding students scrambled to pack and staff scrambled to book their flights, our day students stayed home to practice "distance learning." I sat in my classroom, trying to navigate a digital learning management system I'd only ever used as a gradebook, and watched the posts trickle in on the discussion boards I'd set up. I was trying to wrap my head around what we would do in class next week. I believed I had to prepare for the possibility that we might have only another week together, two at most.

"Let's go out to eat," I said when I got home that afternoon.

My wife, Erica, was a little surprised at first at my proposal. We'd just been talking in the days before about how we had to prepare to hole up and avoid social contact. We'd been buying supplies throughout the week—rice, cans of food, toilet paper. Silly in hindsight, but the kind of thing you do when you don't know what to do. We wanted to be ready for when the time came. But who knew how long we had? It was still hard to reconcile the mundane world we continued to live in with the strangeness of what was coming, what might already have arrived. The virus, an invisible menace, seemed at once both far away and everywhere around us.

"You never know," I joked. "It might be our last chance to eat out for a while."

She agreed. We went to a local gastropub in the ski town next door. It was packed. I drank a couple of good beers, ordered a fancy Scotch egg as an appetizer, ate fish and chips. We indulged. Through my buzz I looked around at all the faces. People were laughing. The voices were loud and close. Was the mood more festive than usual? Did all of us sense the finality of these days? It seemed as if we were already secretly mourning what we hadn't yet lost. Or maybe already yearning for what we were about to lose.

I'm still not sure when it really started. Maybe it was later that night, Friday the thirteenth. Maybe the next day. At some point, I felt a tightness in my chest. I didn't think too much of it. It felt like the mild asthma I get when I cross paths with certain cloying scents or when I'm coming down with a cold. Besides, I was preoccupied with school and worrying about my parents. Long retired and in their mid-seventies, they'd gone on a two-week trip—first out to Montana to see my brother and his family, then down to Arizona to see my mother's oldest brother. I'd tried the weekend before

to convince them to cut their trip short. It was growing clearer how dangerous the airports were. They demurred, but as events accelerated, they decided to fly home from Arizona a day early.

By the next morning, Sunday, the tightness in my chest had worsened. There was a little wheeze at the end of every breath. By midday, the coughing had started. I drove to school to join the crowd saying goodbye to the last wave of dorm kids while the bus waited to take them to Logan Airport. Students and staff alike were crying, laughing, singing songs—all the things we do to fight back the shock when life catches us unprepared. Word was spreading that the governor would be making an announcement about a statewide school closure that afternoon. New Hampshire had already declared a shutdown. It was a pretty sure bet we were next.

I stopped by my parents' house on the way home. They had just returned the night before. Dad was gone, but Mom was upstairs in the small study off her bedroom. It was the first time I'd seen her in two weeks.

"I better not hug you," I said. "I think I'm coming down with a cold." I kept my distance while we chatted. My breathing had gotten worse. I coughed into my elbow and used my inhaler. We talked about the virus. I was used to talking about the virus by now. She worried about my health. "I know," I joked. "Bad timing."

Word came that night that the governor had ordered all schools closed by Wednesday, but mine had decided not to wait. Students were to stay home. Faculty would come in Monday and Tuesday for meetings and to gather materials, and that would be it. Everything was a scramble. We watched the governor give an address on a projector screen in the library on Monday. The

strangeness of the previous week was only amplified now as the reality of what was unfolding fell as a pall upon us.

I coughed. I coughed into my elbow at the meetings and made jokes about getting a cold and "bad timing." I used my inhaler. I used it again later. Was it helping? I wanted to think so. Monday flew by. Tuesday was the first day I began to wonder. Midmorning, sitting at my desk in my classroom, surrounded by papers and books as I rushed to put materials together for the weeks to come, I suddenly stopped. A wave of dizziness hit me. I gripped the desk and tried to ride out the faraway feeling, like I was being pulled outside myself. Was I going to pass out? Was I going to throw up?

After about ten minutes, it passed. I shook it off as just part of the cold. Later I felt better. It almost seemed like I'd imagined it. The same held true for my breathing. My symptoms came and went. I would feel the tightness in my chest and get hit with coughing spasms, then an hour later it would go away, the way your dreams melt before you open your eyes in the morning dark. Every time it came back, I pushed it away. I was just getting a cold. The asthma that typically preceded the normal cold symptoms—the stuffy nose, the fluid in the sinuses, the sneezing—hadn't retreated yet, but it was only a matter of time.

The week went on. Wednesday, I started working from home and struggled not to feel overwhelmed by the job of teaching in a whole new way, by the feeling of losing my students, by the slurry of COVID articles I was still gulping down in between bouts of schoolwork. I had diarrhea out of the blue Thursday night. That was strange. My asthma—a phantom—lingered, worsened, faded, disappeared, then returned. The cold I was expecting didn't come. That was strange too.

In the back of my mind, I started to wonder. What if I was getting *it*? The thought would come, leave me dizzy, then go, just like my asthma. It seemed impossible. A few cases had popped up in other parts of Vermont, but there weren't any cases yet in our county. *Wouldn't it be funny?* I thought. It wouldn't be funny at all, of course. So I kept beating the thought back, because it was preposterous, ludicrous, absurd. Surely, my COVID-related media intake was feeding my paranoia. I was giving in to anxiety, to the shadow of the strange days we all now lived in.

It was just bad timing. Nothing more.

## II.

Hell Week started Sunday, March 22. It was a beautiful day. Sunny, warmish for March in Vermont. The day before we'd gone on a family walk with my parents and my brother's family, all of us in the sun on our dirt road. It was first time we'd been together in weeks. The state was requiring nonessential businesses to shut down and a stay-at-home order was on the horizon. We kept our distance but laughed and enjoyed each other's company beside the receding snowbanks and fields turning brown against the melting drifts. I hid my cough as best I could and wondered if they noticed. I kept telling myself I didn't feel great, but I didn't feel bad either—just stuck in the same limbo of tightness and cough that had plagued me the week before.

That all changed the next day. Erica and I were walking our dogs, heading back up the road to the house. The sun was warm, but there was a sharpness to the air when the wind picked up. I kept zipping and unzipping my jacket with every rise and fall of the breeze. Suddenly, my body slowed. Inside my chest, a blanket was slowly wrapping itself around my lungs. That same

feeling of dizzy detachment that had hit me at school on Tuesday grew stronger with every step.

"I don't feel very good," I said.

"What's wrong?"

I was too fuzzy to explain. I didn't want to talk. I was in a tunnel far away. "Just don't feel well."

I don't really remember much of the rest of the day other than the growing awareness that whatever was hitting me wasn't a cold.

Cotton candy lung. That's what I'd called it ten years earlier when a cold gone awry had morphed into bronchitis. I had the same feeling now. You take a breath, but your lungs already feel full, stuffed with something light and fluffy—pink fiberglass insulation, poly pillow stuffing, downy packing. The feeling grew Sunday into Monday.

"Do you think I should call Corner Medical?" I asked Erica when she got back from grocery shopping that afternoon. I wasn't even sure whom to talk to. My primary care physician was on medical leave, recovering from hip surgery, and I didn't know any of the other doctors in the community practice.

"Um, *yeah*," my wife said.

I dithered. *Maybe I should wait another day. Maybe I'll feel better.* I hated contacting the doctor's office in general, never knowing where the threshold was to justify a call. And deep down I always worried about looking like a hypochondriac, even though I rarely got sick. Now, with COVID blasting across the news and my symptoms mirroring the illness in nearly every way, I felt even more self-conscious about calling. I knew I didn't have it. I couldn't. It was all just a coincidence. Why risk looking like a hysteric?

It didn't help that the symptoms seemed to come and go almost by the hour. Like fickle Vermont weather, the storm would roll into my lungs, blanketing me with a panicked feeling of claustrophobia, only to roll out again to sunny clarity and relief, leaving me doubting it had ever really been that bad.

I broke down and called around 4:30 p.m. An intense bout of dizziness persuaded me. The office was closed, so I left a message. That night, another wave of diarrhea hit, several rounds over the course of an hour. I regarded the novelty with a kind of bemused detachment. It had been years since I'd experienced any GI symptoms, and now it was twice in one week. I recalled articles I'd read over the weekend identifying them as emerging symptoms of COVID. Again, a kind of denial came over me. It was just a weird coincidence. Or worse—maybe these articles were having a subliminal effect on me. Maybe I was making myself sick through the power of suggestion. It was, of course, an absurdly irrational thought, narcissistic even, to believe my mind capable of such a thing. But as I would learn over the ensuing weeks, illness can do funny things to your mental state.

A foot of snow fell overnight. I awoke on Tuesday to stuffed, raw lungs, waited around an hour for Corner Medical to return my call before deciding to go out and snow-blow the driveway.

"Maybe you shouldn't," my wife said. My stoicism didn't impress her.

"I'll go easy," I promised.

As I coughed and hacked my way into my snow pants and boots, I knew she was probably right. But the job needed doing, and it was my way of proving to myself that I wasn't really that sick. I was the boss.

I kept my promise and went slow; my body didn't give me a choice. Turned out, it was

the boss of me. Erica flagged me down halfway through. Corner Medical was on the phone. They weren't allowing anyone with respiratory symptoms to come into the office. Could I do an online teleconference at 11:30?

I agreed and finished the yard. I was drenched in sweat but didn't feel too bad. At this point, I'd gotten used to the tight chest and the feeling that I was breathing with just half a lung.

I couldn't figure out how to use the app for the video chat, so Dr. Scott just called me. I'd never met him, but my father had seen him a few times and liked him. He had a Tennessee accent and an amiable, businesslike voice that sounded exactly like Tommy Lee Jones's, so that's who I imagined I was talking to as we discussed my illness. Once I'd run through the list and progression of my symptoms, his voice changed. He spoke more quickly; his tone grew clipped and concerned.

"Okay, I think you may have coronavirus, David. The symptoms all match up. The diarrhea has me particularly concerned—we're seeing that in quite a few patients. Any fever?"

No. No fever. It was the one symptom I hadn't shown yet. I'd started checking the previous Thursday as the thought that I could have COVID started creeping into the back of my mind. It was a degree or so elevated, but nothing extreme.

"Well, that's good," he said. "If your breathing gets worse or your fever hits 100.3, you need to go to the hospital right away."

"Can't I get tested?" I asked. My heart was pounding, my mind still reeling from his earlier words. *I think you may have coronavirus.* The thought I'd been pushing away—this alternate reality in which I had

the very virus I'd been reading so much about and fearing from a distance—was even more surreal now that I was hearing it spoken by a doctor. I was in a movie scene with shocking lines that sounded like they were coming off a script, a table read with Tommy Lee Jones, and I could already tell I hated this movie.

“I'm afraid we don't have enough tests in Vermont right now. If you had a fever, we could get you one. But for right now, you're out of luck. In the meantime, you have to quarantine. All of you in the household. Don't leave for fourteen days for *any* reason. You have anyone who can bring you food?”

I said my brother could help us out. “That's good,” he said. He prescribed a course of doxycycline in case it was just a bronchial infection. He wished me well, reminded me to go to the ER if I got worse, and that was it.

The rest of the day continued to unfold in a fearful state. Erica and I told the kids what was going on—or what we thought was going on. Two weeks earlier, in that long-ago before time, I had told them a virus was coming and life was going to change. Now it had come. It was here. In our house. Maybe. Just like then, they seemed relatively unfazed. We were all kind of that way. Or maybe we were just plain old fazed.

Erica started going around the house wiping down countertops, door handles, appliances. We talked about how I should isolate myself from the rest of the family, as Dr. Scott had recommended. We decided I'd try to limit myself to my office and our bedroom as much as possible. I would use only the bathroom in our bedroom. Erica would sleep in my son's room; Julian would sleep on the downstairs futon. Wearing a mask didn't even enter into the equation. At this point the CDC was still saying masks were ineffective at stopping transmission.

It all seemed so ludicrous. After ten days of me coughing around everyone, of all of us cooking and eating and sleeping and watching movies together in the same house, the idea of sequestering myself and rubbing down doorknobs with Lysol wipes felt purposeless. No one else seemed particularly sick. My daughter, Maida, had “caught a cold” well over a week ago—we now remembered keeping her home from school the day before I first started showing symptoms because she had bouts of wooziness. Erica had been experiencing a mild but distinct and unusual tightness in her chest and a slight cough for the last nine days. The day after my call with Dr. Scott my seventeen-year-old son, Julian, would develop swollen and inflamed gums for several days like he once had when he six years old and caught a strange virus. Of course, all these symptoms now made us wonder. But no one else was hacking a dry cough or struggling to breathe like I was. No one else had even a low-grade fever or fatigue or GI symptoms. It seemed impossible that they wouldn't have absorbed a serious viral load over the last ten days and already been infected. But isolating me was an action we could take, so we did it.

There was something else I realized I needed to do. Now that it seemed plausible, if not likely, that I had COVID, my mind started racing back over the last ten days. I thought of being in school the previous Monday and Tuesday, of coughing, of touching door handles and tables and chairs. I'd been washing my hands—we all had been—but what if that wasn't enough?

I emailed my head of school, the assistant head of academics, and our dean of faculty and told them what was going on. The assistant head, my friend Adam, immediately emailed back to ask where I had been at school and when. I'd been back only once since our last official workday—

the previous Saturday, the day before my illness took off, the day of our family walk. I'd gone into town to get groceries for my parents, hoping to help keep them safe, and realized I'd forgotten hand sanitizer and disinfecting wipes. We'd just been given supplies of both items right before going into shutdown, so I popped into my classroom to fetch them for my truck. I figured they weren't doing any good locked away at school. I'd just bring them back when we returned. Whenever that was going to be.

Adam immediately informed all employees that the main building was closed to all entry until further notice. The school was already undertaking a "deep cleaning" and systematically shutting down of all of its buildings, but my email expedited the process. I winced, thinking of my colleagues, who were now cut off from their classrooms and the scanner/copier in the faculty room days earlier than planned.

The rest of the week was a foggy slog of misery. I sweated through my sheets Tuesday, Wednesday, and Thursday nights, waking every hour to find my pillow wet, my chest drenched and throat parched, doing my best to guzzle water, too out of it to have the presence of mind to take my temperature and register the fever I surely had.

Wednesday was the worst day of all. It started off okay—as most of the days throughout my illness did for some reason—before taking off mid-morning. By lunch, I felt like I had a stack of encyclopedias sitting on my chest. Even lying down—a usual source of relief—brought no comfort. Walking up the stairs left me dizzy and gasping. Momentary ease came every few hours when the phantom menace in my lungs loosened the thick belt it had squeezed around my upper torso a notch or two (apparently, even viruses need a break now and then). But that was the day I started to

wonder where all this was going. I tried not to panic. Several times I came close to calling in and having Erica bring me to the ER. But going *there*—both the physical place and what it meant as an abstract concession to my condition—was just as frightening as what was happening to my body. It meant giving in to, creating even, a reality that I didn't want to inhabit.

I didn't really fear that I wasn't going to pull through. I wasn't even in the hospital yet, let alone connected to oxygen or a ventilator, which in those early days seemed to offer a promise of rescue. For the most part, I was too preoccupied with my symptoms to worry much about dying. But once in a while, a moment of terror would wiggle its way into my consciousness, usually triggered by something I'd read online: stories in the *Washington Post* or *New York Times* of younger, normally healthy victims whose cases blew up out of nowhere and sent them crashing; Facebook posts about struggling relatives; charts highlighting troubling mortality stats and blooming infection rates. Twitter, a dirty drug, was the worst. Like any addict, I absorbed its flow with a blend of relief and torment, increasingly the latter. A random tweet caught me Wednesday night as I was lying in bed: "Lost the first person in our office today. 47 years old with 2 kids." I read it over and over. *I* was 47 years old. *I* had two kids. A wave of nausea hit me.

I felt powerless. I'd been taking Zicam three times a day for almost two weeks, hoping that the remedy that had always helped me keep the common cold (another kind of coronavirus) at bay would do the same for COVID. It didn't. I was taking doxycycline. Mucinex. Claritin. Albuterol. Nothing made a difference to my once-healthy body—the body that had hiked up through the snow to King's Ravine on Mt. Adams three weeks earlier, that had been skiing and

snowshoeing all winter, that stayed fit and treated itself with relative care—as the virus squatted within and slapped me with my own lungs like some middle school bully. *Stop hitting yourself. Stop hitting yourself. Stop hitting yourself.*

I called Dr. Scott again on Friday. Like the previous days, I'd started off feeling not too bad before cratering mid-morning. Then the intense compression around my lungs receded a little, but another wave of dizziness slammed me. Around 11:30 a.m., sitting at my computer, trying to work through the fog, I suddenly realized my face had gone numb. I touched it. I tried scrunching it back and forth, making faces. It felt stiff, plastic, like someone had shot me up with Novocain, like I was wearing a mask. It lasted about forty-five minutes. What did it mean? In hindsight, it probably should have scared me a little, but I was too detached to find it anything but weirdly funny. I wandered into my wife's office.

"My face feels numb," I said. I remember pacing, walking in and out of the room, still scrunching my features into scowls and grins, furrowing my brow and marveling at the sensation.

"Okay," Erica said slowly. Even in my fog I could tell she didn't know what to make of it either. She tried to stay calm. "You need to call Dr. Scott again."

The feeling had worn off by the time I heard back from Corner Medical. Tommy Lee Jones didn't have too much to say. He seemed to back off his earlier assessment of COVID due to my lack of fever. I told him I was still having breathing problems, a constant cough, and dizzy spells. He asked me if I needed to go to the hospital.

"I don't know," I said. The powerlessness I felt over my condition extended to knowing what to do about it. I was still struggling, but it didn't seem clear what they could do for

me or how being away from the comfort of home would really help. The one good bit of news was that the state had just announced they were loosening the testing restrictions. I asked again if I could get tested and mentioned the new guidelines I'd just seen online. Dr. Scott agreed to look into it. A half hour later I got a call back—my test was scheduled for next Monday. I was both relieved and anxious to find out.

My symptoms worsened as the day went on, but I managed to sleep through the night—nine hours—for the first time in several nights and woke Saturday morning feeling better than I had all week. I walked downstairs to see a young black bear likely not long from hibernation outside my office window. It sniffed the ground—half snow, half grass—then wandered off across the frozen pond under sun and blue sky into the woods. It felt like a good omen somehow. My phone chirped.

"How you feeling?" the message read.

It was Adam. Ever since my heads-up email on Tuesday, he'd been texting me first thing in the morning and usually at night, too. Always the same question: "How you feeling?" And I would always tell him. I found the ritual comforting; it offered a structure, a concreteness to an experience that was so internalized.

He wasn't the only one to ask, of course. I'd been on the phone with my anxious parents every day that week. I'd FaceTimed with my brother in Montana more than I had over the last year. Other friends had checked in as well. The fact that everyone was home with nowhere to go made it easy. And there was always the question. "How you feeling?" Over and over again I heard it, often as a way of greeting. And it wasn't just them. I was asking myself the same question constantly. My body, my lungs, had become a perpetual meditation. And while I



generally tried to put on a brave face, the answer was forever changing. “Getting better!” “Not doing so great right now.” “Think it’s clearing up!” “This thing just won’t stop.” It confused the hell out of me. I could only imagine what my family and friends thought.

Despite the ups and downs, heading out of Hell Week, I could feel myself on the upswing. My lungs were still inflamed, I still had a cough and shortness of breath, but the weight on my chest had eased up, I wasn’t getting hit with dizzy spells, and I generally felt “better.” And even though a flare-up on Sunday afternoon left me feeling like I’d just smoked three packs of Marlboros, I figured my illness was resolving. And I was alive. It had been a long, miserable two weeks, but I’d made it through to the other side. In a day or two the symptoms would go away like every other illness I’d ever had, and I could get back to normal living and not have to think about it again.

The next day I would be tested and find out if I’d actually had the suspected coronavirus or just some random lung infection. It almost didn’t seem to matter at that point; it was on its way to becoming a part of the past, just another puzzle piece in this riddle of a pandemic to look back on in wonder. COVID or not, I was so over it, so done with this virus. Little did I know, and as the coming weeks would show, it wasn’t done with me.

### III.

Driving to the hospital late Monday morning, I felt decent—the best I’d felt in over a week. It was the first time I’d left home since the shutdown started, and it seemed a little strange to be out in the world again. While the Northeast Kingdom of

Vermont isn’t exactly a bustling place, the roads still appeared emptier than usual.

I arrived at our local hospital and made my way through the drive-up test site—a series of red tents staffed by people garbed head-to-toe in white and yellow PPE plastic, rubber gloves, and face shields. The nasal swab burned and stung, but not as bad as I imagined it would, and was over quickly. Driving home, I felt almost upbeat as the sun came out and the vacant rainy road dried. I was still under the impression that this was over.

The next day saw a resurgence of lung inflammation, shortness of breath, and night sweats. The setback was a bit discouraging, but I tried to take it in stride. The morning after, Wednesday, April 1, opened with my friend Andy texting me an article from the *New York Times* about the inconsistency of COVID testing, with some scientists estimating a false negative rate of up to 30%. As if on cue, a few hours later Dr. Scott called to tell me my test had come back negative. He sounded happy. I wasn’t. I’d been hoping all along for a positive result. It says something about the absurdity of this pandemic that I would hope to test positive for a dangerous virus we knew almost nothing about, but a positive result would have offered not only an explanation, a justification even, for all the suffering, but also a certain kind of relief. I would no longer have to worry about the unknown. As far as I could tell, the virus had done its worst. Best of all, it brought the promise of immunity and the accompanying freedom to move about in the world like a normal person when so many others were still living in fear.

I asked Dr. Scott whether a nasal swab test on day seventeen could yield a false negative. He assured me that the tests were highly accurate, at least 95%. I didn’t

mention the *New York Times* article I'd read hours earlier.

"So if it isn't COVID and the antibiotics didn't do anything, what could it be?" I asked.

"It's probably just a random viral lung infection," he said. "It happens." He told me to finish out the fourteen-day quarantine just in case, then wished me well, and that was it.

Now, in addition to a dry cough, a tight chest, and burning lungs, I was left with uncertainty and doubt. About the validity of the test result, about my conflicted feelings toward my diagnosis. Everything I'd been reading about the virus and how it affected people, from the symptoms to the progression (a mild onset followed by intense illness in the second week), seemed to track perfectly with my experience, but the test suggested otherwise. Even worse, if this wasn't COVID, then what would the real thing do to me if I caught it, especially in this weakened state?

All the ironies of the day—April Fools' Day, no less—came crashing in. It certainly felt like the universe was playing a practical joke on me. I wanted to laugh, but I knew it would just make me start coughing again.

Early in the week, friends and family had been asking me about the test. I felt like an expecting mother. I joked about hosting a reveal party (via Zoom, of course).

"What color balloons should I get?" I asked Adam.

"Black," he texted back. "Either way, you can't go wrong."

After the result came back, some, like Dr. Scott, expressed happiness that it had come back negative; others doubted the result. To complicate matters, I actually took a second test. A Facebook post during Hell Week just

to let people know I was sick led to one of my former students reaching out. She and her husband, a physician, ran a family practice down in Florida. She said they'd just opened an account with a company in Texas to administer COVID home test kits. Would I like one? At the time, being unable to get tested locally and not knowing when that would change, I took her up on the offer. It was only after she'd shipped the kit out that I got scheduled for the nasal swab test. I'd planned on sending the kit back, but once my negative result came in, I decided to take it just to make sure. It was a different kind of test, requiring a sputum sample. Unfortunately, I had little sputum to cough up—the virus may have filled my lungs with cotton candy, but there wasn't much phlegm to be found. I did my best to hack up a meager sample that was mostly saliva and sent it away at the end of week three.

Besides the usual questions—"How you feeling?" "Did you get your test back?"—I was hit with another question over and over: "Where do you think you got it?" The question always put me a little on the defensive. In my more paranoid moments, it felt like an expression of doubt, just another way of asking, "How could you *really* have COVID when no one else around here has it?"

So here are my best guesses: During school vacation the last week of February, my wife and daughter took a three-day trip to New York City to see *Beetlejuice* on Broadway. A little early in the game, but considering it's now believed the virus was circulating around the city far earlier than originally reported, it's in the realm of possibility. Another possibility is a visit from a buddy from Brooklyn who came up later that week. Finally, a family from a town west of New Haven, Connecticut, came up the first full weekend in March and stayed in our vacation rental property at Burke Mountain.

On Sunday, March 8, I cleaned the condo an hour after they left—handled their wet towels, their bedding, touched the doorknobs, the stair railings. Five days later I began showing symptoms. I emailed them at the end of Hell Week and asked them how they were feeling. It was a little awkward asking, but I needed to know. A friendly young couple in their thirties, they said so far they were feeling fine. As with my test result, I was disappointed not to have clarity. I didn't yet know that an estimated 50%–80% of people infected with COVID can be asymptomatic. Despite their report, it seems the most likely possibility.

#### IV.

When spring comes, I always think of T. S. Eliot's famous line "April is the cruellest month." On Sunday, April 5—the beginning of week four—shit started to get weird. My lungs seemed to be slowly improving. But I was still having breathing problems, still waking up somewhat clear only to feel a thickening and burning as the morning slipped into afternoon. I was still hitting the albuterol, still with little effect, but I could breathe deeper than before and didn't have that claustrophobic feeling nearly as often. Things were looking up. That's when I started to notice my heart.

That Sunday I decided to take a nap. It was a cold, gray, sleety day, and I was tired. I'd noticed that morning that climbing the stairs not only left me short of breath—something I'd gotten used to—but also left my heart racing for several minutes afterward. I figured I was just out of shape. The virus had weakened me; I had to rebuild my strength. But lying down, I realized something felt different. I could feel my heart pounding, hear my pulse in my ears. On a whim, I later checked my resting blood pressure, normally a rock-steady 112/65. My

eyes widened at the readout: 138/87. Nothing crazy in the bigger scheme of things, I realize, but unusual for me.

The symptoms worsened over the next couple of days. At first I chalked it up to stress. But I wasn't feeling particularly anxious. Not consciously, at least. Then again, sudden chest pressure and heart palpitations out of the blue while grading papers at your desk tend to give you a certain amount of anxiety.

Tuesday was the first time I went into the hospital. The day hadn't started well, with a worsening in my lungs. The hoarseness that had recently begun creeping into my voice grew raspier. Late morning, a throbbing pain started in my chest. Then the palpitations. My heart raced, it skipped, it surged. Like my shortness of breath, the sensation seemed to come and go in random cycles. I canceled my daily online office hours at the last minute as a wave of dizziness came over me. I kept thinking I was going to pass out and considered the possibility that I was having a panic attack. I'd experienced a rash of them in my early thirties during a stressful period in my life—something a few months with a skilled therapist had helped me resolve—but this felt different. Those attacks had always centered around my stomach. No nausea plagued me now. I suddenly felt as if my body weren't my own but had been taken over by some malevolent force, my consciousness imprisoned in a darkened tunnel from which I could only watch.

"What do I do?" I asked Erica. I wondered aloud if I was having a heart attack. It seemed impossible, but I had never felt anything like this before. I hated the idea of going to the ER for something that would likely turn out to be nothing. It would be humiliating, not to mention expensive with my insurance's high deductible. But visions of me collapsing in front of my kids in the

living room on a sunny afternoon in early April kept popping into my head. If I died because I was too stubborn to go to the hospital, how stupid would I feel then? No, that just wouldn't do.

"Call Corner Medical and ask them," she said, ever the sensible one.

Trying to catch my breath, I called in and spoke to a nurse. I told her what I was feeling—chest pressure, shortness of breath, dizziness. She told me to wait a minute, then returned with an urgency in her voice. I needed to go the ER. Right away.

Even then, it took me fifteen minutes of pacing around like a loon, my wife and kids hollering at me to just go already, to make the decision.

"Fine, but you need to drive me," I told my wife. It was absurd to think I would drive myself, but I was still in the tunnel.

After passing through a couple of checkpoints and following the protocols, I ended up in a small waiting room at the ER, while Erica waited in the car. I was already feeling better again. My head was clearer, the pain in my chest had faded. I considered walking out the door to avoid the embarrassment. And there was something else I wanted to avoid. Though only a handful of coronavirus cases had come through our rural hospital, a handful was more than none. After weeks of isolating to avoid the virus, I had now brought myself to the one spot in our entire county where I positively knew COVID had been. And though I was mostly certain I'd had the virus, the negative test result nurtured that seed of doubt within me. Without knowing for sure, I still had to worry that I could be infected.

I forced myself to stay. I told myself I was erring on the side of caution, but deep down I felt it was a just punishment for not being

more patient at home, for overreacting, for panicking. I deserved to continue with the humiliation. So I stood alone in the middle of the room, not sitting, touching nothing, and waited until the nurse came for me.

Everyone was very kind and professional as they attached sticky pads with wires all over my upper body and inserted an IV port. A nurse asked me a whole range of questions; I told my story in a raspy voice. This was followed by a doctor who asked pretty much the same questions. I told my story again. A chest X-ray suggested possible pneumonia in the upper lungs, so they sent me in for a CT scan. The CT scan came back negative. A shift change brought in a new doctor, who said he wasn't really sure what was going on. His best guess was that a viral lung infection had aggravated my asthma and left my lungs inflamed. It didn't explain my high blood pressure or erratic heart rate, but otherwise it seemed like a reasonable diagnosis. He decided to put me on a four-day course of prednisone to reduce the inflammation.

On the way home I got word that the sputum test kit had come back negative. The news discouraged me, but I did my best to resign myself to the fact that it wasn't COVID—two negatives couldn't be wrong, could they? Underneath I still had my doubts about both tests, from the late timing of the testing to the methodologies to the media reports increasingly casting doubt on COVID testing in general.

I had never taken prednisone before; the steroid lived up to its reputation. I could feel each dose surge through my body and jack me up, leaving me hungry and irritable. As the days went by, I kept telling myself that it would take care of what was wrong with me, just like I had with the doxycycline during Hell Week. I told myself it was working, even as the tightness in my chest kept pushing me to use my inhaler. And in many

ways, I did feel better—I had more energy, and I didn't notice my fluctuating heart rate as much (probably because my whole body was vibrating). But the day after I swallowed my last dose, my symptoms took off again.

It was April 12, Easter Sunday. The beginning of week five. What would normally have been a larger family gathering was just the four of us, a pattern that had become familiar. My lungs grew more and more inflamed as the day wore on, my breathing shallower, bringing me right back to where I'd been at the end of Hell Week. Erica went all out and cooked an herb-crusting pork roast to celebrate, but by the time dinner came, I felt too sick to even want to eat. As the evening went on, the pain in my lungs seemed to gravitate toward the center of my chest and intensify; my blood pressure had shot up to 149/90.

At midnight I went upstairs. I was drained, and it felt good to get into bed. Aside from the Hell Week night sweats, sleep consistently offered respite from whatever the day brought. But as soon as I lay down, my heart took off. I could feel the fluttering surges in my chest, the pulse thudding in my ears. I sat up, and it seemed to offer some relief. I went downstairs and tried to read some news. It was all COVID stories. There was no escaping it. I didn't want to go back to bed for fear of triggering another round of palpitations, but I was so tired I decided to give it another try.

I don't remember if I lay back down again or not. I just remember sitting on the edge of the bed in the glow of my alarm clock, feeling my heart surging and trying to decide whether or not to have Erica take me back to the ER. My body was screaming out that something was seriously fucked up, but the rational part of my brain kept telling me that while, yes, something was wrong with my body, I wasn't about to die of a heart

attack. I just had to ride it out. I reminded myself what had happened the last time I went to the ER. Did I really want a repeat of that experience, only this time in the wee hours of the morning after an exhausting day?

I suddenly remembered the Xanax in my medicine cabinet. My doctor had prescribed it a few years back based on my earlier experience with panic attacks, and I'd maintained a small supply ever since. I never took it, but it was comforting to have around—a sort of “break glass in case of emergency” kind of tool. This seemed to qualify. I swallowed the pill, then got back into bed, sitting up on top of the covers in my bathrobe. Almost ten hours later I opened my eyes, still in the same position, sweaty, thirsty, and alive.

## V.

Monday morning I decided to stop taking albuterol. Some quick online research suggested that prolonged use could lead to heart palpitations and hypertension. I had been using it three to four times a day for a month straight, always to little—and usually short-lived—effect. I was excited to think I'd discovered the source of my bizarre cardiac symptoms. Still, after the previous night's fiasco and the failure with prednisone, not to mention the fact that I'd now been sick for over a month, I decided to schedule another appointment with the doctor. I was told I could meet via teleconference with either Dr. Scott on Tuesday or, if I was willing to wait another day, my primary care physician, Dr. Tom Broderick, who had just returned from medical leave. Tommy Lee Jones had been nice enough, but it would be a relief to see my usual doctor again, for a fresh perspective if nothing else.

People were still asking me the same question: “How you feeling?” At this point, I didn’t even know what to tell them. Better, worse, the same—it was all blending together, and the more time passed, the less credibility I felt I had.

The next day, I decided I’d had enough. The snow had melted and the lawns needed their spring raking. It was a beautiful afternoon, so I went out and got to work. I told myself I would only go for ten minutes. I love spring raking, gathering the dead grasses and fallen twigs, the spruce cones and maple seeds, flattening and spreading the dark soil of winter mole mounds until the lawn is a smooth, pale patch with flecks of green as the first grasses sprout. I was sweating and breathing hard, but I kept going. It was the first time in over a month I’d done anything physical besides taking slow walks on the road like an old man. Thirty minutes later I decided not to push my luck any further. My heart was pounding, and I was gasping for breath.

It took almost twenty minutes for me to recover, but as the afternoon progressed, something strange happened. By evening I felt—for the first time in over a month—that I could take a deep breath. No pain, no wheezing. I felt weirdly normal.

On Wednesday I teleconferenced with Dr. Broderick. I’d known Tom for some time and had taught both his children. He listened patiently as I told him everything that had happened over the last four and a half weeks. When I finished, he shook his head.

“What you’ve just described is a textbook case of coronavirus,” he said.

“You think so?” I asked. After so much uncertainty, the emphatic response caught me off guard.

He shrugged. “I guess it’s possible it was just a normal respiratory illness, but not likely based on what you’re telling me.”

“What about the fact that I never had a high fever?” I asked. It was one of the few sticking points in my mind.

He waved it away. “We’re seeing plenty of cases with no fever now,” he said. “I think your tests were false negatives. We’re seeing lots of those, too.”

It felt good to hear another person—a physician, no less—confirm what seemed so obvious to me despite my doubts. We chatted some more. Tom told me he would eventually have me take a serology test to check for antibodies, but I would need to wait several months for a reliable test to be developed. I told him about my raking triumph.

“Be careful,” he warned. “You have to take it easy now. Don’t overdo it.”

We agreed to check back in a week. It was another beautiful afternoon, and I was still riding high from yesterday’s exercise. I decided to try another round. I thought I’d stumbled on a breakthrough, just as I had quitting the albuterol. I went a little longer this time, raked a little more aggressively, driven by the perverse need to push myself, to see how far I could go. In the back of my mind, I knew I was disregarding Tom’s advice, but my Icarus complex got the better of me. Like the day before, huffing lungs and a racing heart were followed by clear breathing and exhilaration. But the relief turned out to be short-lived. By evening I could feel my chest tightening up again, triggering another setback.

The ups and downs continued through the week-long interval between my initial appointment with Tom and the follow-up. The illness was beginning to take a mental toll. Earlier in the week, I had convinced

myself that stopping albuterol had fixed my cardiac symptoms. But as with the antibiotics and the prednisone and the raking, my body wasn't buying what my mind was selling. The pressure in my chest, the periodic heart palpitations, and the elevated blood pressure hadn't gone away. They were less severe than what I'd experienced Easter night, but the symptoms weighed on my mind.

Nothing I tried seemed to work. As week five drifted into week six, I found myself feeling increasingly trapped by the virus and overtaken by mood swings. Certain songs or news stories would push me to the point of tears in ways that startled me. Once or twice I found myself crying for no particular reason. The virus had turned me uncharacteristically maudlin. I didn't like it one bit.

As my body cycled, so did my mind. A kayak trip on the Clyde River with my friend Gary that Sunday offered a brief respite and the promise that I was leaving the illness behind. Moving a heavy fallen branch in my woods a couple of days later left me dizzy, with my heart racing in my chest for over fifteen minutes, and brought me back to a despair tinged with fear. What the hell was going on with my body? This was far beyond anything I'd ever experienced.

"How you feeling?" The question had become a mockery. I dreaded being asked now, torn between a desire to tell the truth and the fear of being dismissed. Sometimes I wasn't even sure what the truth was. It was two steps forward, one and nine-tenths back. "Still struggling a bit," I'd say after a bad day or two, and shrink a little at the look of disappointment on people's FaceTime visages. "I think I've turned a corner," I would tell people after a couple of good days. "I think it's behind me," I would say, and I would actually believe it because it

seemed absurd that any virus could last this long. Like a lover in a rocky relationship, I kept being seduced and deceived over and over, a chronic dupe. When I felt sick, I looked forward to the days when I would feel better, when the pressure in my chest wouldn't be so heavy, when I would breathe a little easier. But when those days finally came, I would have trouble savoring them, never knowing how long the taste of health and healing would last. I tried to be objective, reminding myself that my progress, as slow as it was, was real, that I had to think in terms of weeks—or longer—but every setback made it harder to feel like I would ever be normal again. The hardest part was reminding myself that, yes, eventually I would get better. But the longer this dragged on, the harder it was to believe.

During my follow-up the next Wednesday, I told Tom about the lingering symptoms in my chest. He was concerned and suspected my body's battle with the virus might have left me with a strained heart. To rule out anything serious, he scheduled an echocardiogram, a stress test, a 24-hour heart monitor, and blood work.

"In the meantime," he cautioned, "take it easy. I *mean* it. Don't do anything overly physical. You need to let your body heal."

I promised. Considering what I'd been feeling over the last week, it seemed stupid not to, especially with the tentative but severe-sounding diagnosis.

Week six gave way to week seven. I rested. Winter's late shedding had finally started to gain some momentum, and the days were getting longer. I took to evening strolls in the woods as the sun was setting and the first thrushes and robins called out for mates; I noticed the swelling buds and sprouting ferns. On a rational level I knew it was unlikely I was in any real danger, but over the last six weeks I'd come to doubt my

body, probably for the first time in my adult life. The bout with panic attacks years ago had made me question my mental health, but my body had always been strong. Now in my late forties, I felt betrayed by how it had responded to the virus, though deep down I knew that such thinking was vanity, just another form of denial—of aging, of entropy, of nature itself. Those peaceful twilights, still free of the blackflies that would soon come nattering about the ears, offered welcome relief after a cold, icy spring as I worked through my self-pity and came out the other side. Watching the world come back to life helped. Nature’s renewal was its own kind of therapy now. Maybe April wasn’t the cruelest month after all.

On Tuesday, April 28, I went through my battery of cardio tests. By then, most of my symptoms had faded, and I was on a major upswing. The tests all came back clear, with no abnormalities in my heart functioning. To my surprise, I crushed the stress test, going sixteen minutes on the treadmill before calling it quits. The blast of exercise, coupled with the relief of knowing my heart was still strong, gave my mood a much-needed boost. A day passed, then another and another, and I continued to feel mostly “normal.” I told Tom the good news on Friday—a three-day stretch. He asked if I would be interested in trying an asthma drug in the meantime to help my lungs recover. I asked if I could wait a week and see how this went—I had a really good feeling about it this time. He agreed. Week seven gave way to week eight, and still all was calm and clear. It had taken nearly eight weeks, but I’d finally kicked it.

Then came Wednesday.

## VI.

It was May 6. That afternoon I realized I had a sore throat, which grew worse toward

evening. The next day I began to “feel” my lungs again—I hadn’t noticed them in almost a week. At my now-weekly Friday follow-up, Tom put me on Symbicort, a twice-daily inhaler. By the next week, a second wave had swooped in. It was now week nine, and for about five solid days my lungs turned to fire—almost every breath hurt, the worst I’d felt since Hell Week. That Friday, I finally met with Tom in person after a morning chest X-ray ruled out pneumonia.

We gathered out in the parking lot, masks on, the two of us along with Erica. He assessed all my vitals. Everything checked out. The worst of the inflammation had receded, but the hit had left my voice raspy and it still hurt a little to breathe.

Earlier that day, Tom had spent time on the phone reviewing my case with a pulmonologist friend. He was frank with me, as always. “Look, short of a lung biopsy, I’ve given you every test I can think of, and we’ve pretty much ruled everything out. I still believe you had COVID early on and that you’re now dealing with what we’re calling post-COVID syndrome. For reasons we don’t understand, your body is still acting as if it has the virus.”

There wasn’t a lot more he could tell me. “We’re in the infancy stage of understanding this disease,” he explained. Even through my mask, he could see my deflation, and he tried to reassure me. “I really believe, though, you’ll recover from this eventually. It may just take a long time.”

I did my best to force myself to believe in my eventual recovery. But after coming so far and believing, after a week of relative normalcy, that I was over it, it was hard to be sucked back into the grinder. It felt like starting all over again.

The second wave lasted about a month. In week ten the inflammation died down to



where it no longer hurt to breathe, leaving me with thick lungs and a mild shortness of breath. In week eleven the thickness cleared enough that I could take a full breath, but I still felt a sharp pain around my sternum and the small of my back if I breathed deeply. In week twelve I felt close to normal, though I continued to get what I came to call the “daily thickening”—clear lungs in the morning, with an onset of mild to moderate shortness of breath by late morning, which worsened in the afternoon, then cleared out in the evening. Fortunately, this second wave didn’t see a return of any cardiac symptoms.

Little by little I continued to improve. Along the way, I began to test my body more—aside from my daily walks, I started doing more spring chores: cleaning the garage and entryway of a winter’s worth of mud, road salt, and firewood debris; mowing the lawn with my walk-behind Honda, an hour-long dash; mowing the hilly orchard lot and beyond the backyard pond. It felt good to move again, to sweat, to feel my heart pound and this time know it was because I’d set it pounding.

I joined an online support group during this second wave. Weeks earlier I had read about it in the *New York Times*: a Slack group called Body Politic, started by a person like me—someone who had been hit hard by an initial bout of the virus and who had struggled to recover her health. I’d resisted joining at the time—it seemed a capitulation to the disease, just one more way of acknowledging my failure to overcome it on my own. It was mildly traumatic at first, reading through all the testimonials and stories of people who were caught in the throes of a long recovery. It was also chilling to read so many descriptions that matched my own experience with this “long-tail” form of COVID, often symptom for symptom, stage for stage, sometimes down

to the week or even day. But it was comforting, too. I felt less alone. Other people—often formerly healthy, active people like me—were going through the same thing I was going through. Not just the normal stuff, such as the shortness of breath, the lung inflammation, and the chronic cough, but the weirder stuff too—the chest pressure, heart palpitations, numbness. Other people were worried about how their family and friends perceived their seemingly endless cycling of symptoms. Other people were trying to make sense of this virus that seemed to toy with you like a cat with a mouse, this baffling disease that made you question not only your body, but in your darker moments your mind as well. It wasn’t just me. I wasn’t crazy after all.

The stories also made me realize that things could be a lot worse. Plenty were having an even more difficult time of it, struggling with debilitating fatigue and neurological pain, with perpetual fever and brain fog. I was fortunate that my symptoms seemed concentrated around my lungs and, for a limited time, my heart. Finally, there were also stories from people who were emerging from their symptomatic purgatories and regaining their old strength. Those helped too.

It also helped that around this time articles about the experiences of COVID patients with lingering, persistent symptoms began appearing in major media. Articles from *The Guardian*, the *Washington Post*, Vox, and smaller-market papers profiled patients with strikingly similar experiences to mine. *The Atlantic* ran an excellent story about the “long-haulers,” as we were coming to be called. One of the many things this experience has taught me about being sick is there’s a desire to be known, to be understood. Even for those experiencing an established disease like cancer or Crohn’s, it’s hard for others to completely understand

what the sufferer is going through. As someone who lives with frequent migraines, I've had a taste of this. But when it comes to a "novel" virus that humanity has never encountered before, I suspect it's even harder. These emerging stories in the media have helped illuminate an aspect of the pandemic few are aware of, one that is easy to overlook in the midst of myriad statistics charting infections, hospitalizations, and deaths.

Wading out of this second wave, I began to get a better sense of my condition and to discover my limits. The day after my son's graduation early in week thirteen, I spent four hours stacking almost two cords of green split maple and yellow birch. As if on cue, my lungs rebelled later that night, tightening up in a way I hadn't felt in a while, setting me back a whole week and taking several days to clear back out again.

And now, here I am, reaching the end of June, the end of week fifteen. I've mostly plateaued. Most of the time I feel pretty good, though every day I still experience some form of the daily thickening, especially if I push myself too far physically. I still don't know exactly where my exertion threshold lies, but I've learned my body will make me pay for anything more than a few hours of real activity. Besides the degree to which I can feel my lungs, I can gauge my health by the level of raspiness in my voice—a signal, along with a mild but persistent sore throat, that the inflammation has crept into my larynx.

I've learned other things as well. Besides developing a greater empathy for anyone struggling with a chronic illness, I've learned to appreciate my health and to have a clearer understanding of what it means to be healthy. We take our bodies for granted. Health means freedom—the freedom to forget about our bodies, to not even feel them beyond our normal sensory inputs.

Health is the freedom to exist only in our consciousness, in that indefinite space behind our eyes, as the philosopher Alan Watts once put it. It is only when we suffer illness or injury that most of us really notice our bodies. It's only in the losing that we understand loss. This isn't a bad thing—we should all wish for such freedom. But we should never take it for granted.

These are the things I've learned, the things I know. What's harder is all the things I don't know. Two are most pressing.

First, I don't know how long this will continue, how long I will linger in a persistent asthmatic state, with impaired lung functioning and a life of limited activity. I'm hoping for six months—another thirteen weeks or so—to be back to normal. In my darker moments, I worry that it will be much longer. In my darkest moments, I worry that it will be never, that this is the beginning of a diminished life of periodic and persistent pulmonary assaults that will chip away at my scarred lungs before finally catching up with me for good and dealing me an early, unpleasant death. Grim, I know. Fortunately, those moments are few and far between. And when they come, I always push them aside.

Second, and more importantly, I still don't know for certain if I have—or rather had—COVID. I know that I was sicker than I've ever been in my life, that my body has never felt the way it's felt over these last three months. I know that my symptoms, especially in the heart and lungs, and the progression of my illness have tracked almost perfectly with what so many who tested positive have experienced, and that I became sick just as this virus was taking off in the Northeast. I know that it's believed that many coronavirus test results are false negatives and that many people who eventually tested positive for COVID were diagnosed only after multiple failed tests. I

know that so many long-haulers have played the same mental games I have, sometimes winning, sometimes losing.

But I still don't really, truly, actually *know*. And it's maddening. It would be an absurdly cruel coincidence if, after everything, it turned out—as Dr. Scott suggested early on—that I simply had a random bad respiratory infection. But at this point I can't rule out the possibility. And I've always done my best to be mindful of the power of what psychologists call motivated cognition—our deep-seated need to believe what we want to believe, to see life through the lens of our desires and make the facts fit our biases as we rationalize away our experiences. If I'd gone through all this before COVID, would the experience have been the same? Or rather, how would it have been different? The question haunts me.

And yet I *believe* I had COVID. I never wanted it to begin with. The very idea terrified me at the start of this journey. Now I'm just terrified of being wrong in my belief, of looking like a fraud both to myself and to others. But sometimes I wonder if it even matters—in a very real way I had, am still having, a “COVID experience.” Sometimes I think maybe that's enough. But deep down, I know it's not. The truth is that it does matter, at least to me. Certainty would justify the suffering, would offer the stamp of authenticity. There's nothing worse than a phony. I know there's something warped about this line of thinking, but I can't help it. Chalk it up to just another symptom of the plague, one that plagues the mind, dragging it down the rabbit hole into a labyrinthine warren of doubt.

Aside from waiting and hoping to feel better, I can only wait and hope that a reliable serology test for antibodies will come along sooner rather than later. A positive result would offer a kind of validation, some sense of closure, and help

inform my treatment moving forward. I'd like to believe a negative result give me, if not validation, at least a similar sense of closure, but even in that I can't be sure.

For now I'll wake up every morning and ask myself the same question: “How you feeling?” And hopefully the answer will continue to be the same: “Better.”