Coronavirus (COVID-19) FAQs

Find answers to some of the most common questions about COVID-19.

You can also learn more about the new coronavirus on our COVID-19 page.

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About COVID-19

What is COVID-19?

COVID-19, otherwise known as coronavirus disease 2019, is a new infectious disease that affects your lungs and airways.

It is caused by a previously unknown virus called SARS-CoV-2. The virus is part of a family of coronaviruses which are responsible for lots of different illnesses from the common cold to the flu. But this new strain can be more severe in some people.

When did COVID-19 start?

The virus was discovered in Wuhan, China in December 2019 and has since spread around the world. It was declared a pandemic by the World Health Organization in March 2020.
Symptoms and treatment

What are the common symptoms?

The main symptoms of COVID-19 are:

- fever
- dry cough
- tiredness
- loss of taste or smell

Some people experience other flu-like symptoms, including: nasal congestion, conjunctivitis (red eyes), sore throat, headache, muscle or joint pain, skin rash, nausea or vomiting, diarrhoea, chills or dizziness. These symptoms can be managed at home and you will usually get better within a week.

Not everyone who has COVID-19 will have symptoms. You can still pass COVID-19 on even if you don’t have symptoms. That’s why it’s important to follow advice to stop the virus from spreading.

What happens in serious cases of COVID-19?

In some cases, people will become more seriously ill with COVID-19. Symptoms of severe COVID-19 include shortness of breath, loss of appetite, chest pain or a high temperature. If you experience any of these symptoms, it’s important to seek medical care. In critical cases, COVID-19 can lead to death.

When do symptoms start to appear?

The average time for symptoms of COVID-19 to develop is five to six days, but it can take up to 14 days for people to show symptoms.

What should I do if I think I have COVID-19?

If you think you have COVID-19, stay at home and call your local health service for advice. They will give you advice and tell you what to do and where to go, including if you need to take a COVID-19 test and how to do it. Do not visit your clinic as you could pass the virus onto others.

The people you live with will also need to stay home for at least 14 days from when you first developed symptoms. Avoid close contact with others in your household while you’re ill. Stay one metre apart, or in another room if possible. If you live with someone who’s more vulnerable, try to arrange for them to stay elsewhere. You can also wear a medical mask to reduce the risk of infection.

Ask friends or neighbours to bring what you need, and leave it outside. Do not invite other people to come to your home to help look after you, as you will be putting them at risk of getting the virus.

Most people will recover from COVID-19 by themselves, without the need for hospital treatment. Call your local health service immediately if your symptoms don’t improve after seven days, or if you have difficulty breathing or pain in your chest.
Do I need to get tested for COVID-19?

If you have symptoms of COVID-19 or have been in close contact with someone who has symptoms or has tested positive, call your health care provider to see if and when you should take a test.

The availability of tests for COVID-19 will vary depending on where you live. In places where access to testing is limited, priority may be given to people with severe symptoms, health workers and people with a higher risk of getting ill.

While you’re waiting for your results, it's important that you stay at home and ‘self-isolate’. If your test result is positive, continue to self-isolate and call your health care provider for further advice. If your result is negative, it does not mean you are immune and you will still need to follow the prevention advice.

Does COVID-19 need treatment?

The majority of people who get COVID-19 recover at home, without needing special treatment, usually within about seven days.

Most people will only have mild symptoms similar to the common cold. Resting, drinking lots of liquids, and taking paracetamol or other home remedies can help with symptoms.

Around one in five people will become severely ill and develop difficulty breathing, in which case they will need hospital care. A small number of these people will become critically ill and need intensive care.

Who is more vulnerable to COVID-19?

Anyone can get COVID-19 and become seriously ill. The likelihood of developing severe illness is higher for people over 60 and those with certain underlying health issues, including high blood pressure, heart or lung problems, diabetes or cancer are at a higher risk of developing serious illness.

People with a weakened immune system - for example if they are having chemotherapy treatment for cancer, or have a low CD4 count as a result of HIV - are also at a higher risk of serious illness.

Is there a cure or vaccine for COVID-19?

So far, no drugs are proven to specifically treat or prevent COVID-19. As scientists and doctors continue to learn more about COVID-19, our knowledge of, and ability to treat and prevent the virus will improve.

Are anti-HIV and anti-malaria drugs effective against COVID-19?

As yet, there is no strong evidence that antiretroviral drugs used to treat HIV can be used to treat COVID-19. Several studies have shown promising results, however, the certainty of the evidence is very low due to limitations in the studies.

Clinical trials are also underway with two anti-malaria drugs – chloroquine and hydroxychloroquine. So far, we don’t have evidence that these are effective at treating or preventing COVID-19. Taking any drugs without medical supervision is potentially very dangerous.
Remember, taking any of these drugs without medical supervision is potentially very dangerous.

I am already taking anti-malarial or anti-HIV drugs – can I get COVID-19?

Yes you can. There is no evidence that people already taking anti-malarial or anti-HIV drugs will have any level of immunity to COVID-19. You should continue to take any medication you have already been prescribed and to follow the advice to prevent COVID-19.

Transmission and prevention

How is COVID-19 passed on?

COVID-19 is passed on through contact with respiratory droplets (droplets of saliva or mucus from the nose or mouth) from someone who has the virus. These tiny droplets are spread when an infected person sneezes, coughs, breathes, speaks or sings.

This mainly occurs when:

- People come into close contact with someone who has the virus and breathe in these droplets.
- These droplets land on nearby surfaces and objects. The virus is then spread when another person touches the droplets and then touches their own face, particularly eyes, nose or mouth.

Is COVID-19 passed on more easily indoors?

There is evidence that COVID-19 is passed on more easily in certain settings where people are closer together, especially in indoor, crowded and poorly ventilated spaces that involve close contact, such as restaurants, gyms, nightclubs, offices and places of worship.

Can COVID-19 be passed on through sex?

COVID-19 is not a sexually transmitted infection. However, having sex with someone means getting very close to them, which can spread the virus. It can also be passed on through saliva when kissing. Some initial evidence has found COVID-19 can be spread through poop (faeces), so rimming (performing oral sex on your partner’s anus) might increase your risk of getting the virus.

If you or your partner is feeling unwell, it’s best to avoid having any sexual contact – including kissing and cuddling.

Learn more on our sex and COVID-19 page.

Can COVID-19 be passed from mother-to-child?

Emerging evidence suggests that it may be possible for mothers to pass on COVID-19 to their babies through pregnancy or birth, but this is uncommon. However, this is still being investigated.

Pregnant women should continue to follow advice to protect themselves from the virus, and seek medical care straight away if they have symptoms.

There is currently no evidence that COVID-19 can be passed on through breastfeeding.
How can I stop the spread of COVID-19?

The main ways you can stop the virus spreading are:

1. Keeping a one metre distance from people as much as possible, and even more when you are indoors.
2. Wearing a face mask when you are around other people.

Other prevention measures include:

- avoiding places that are crowded, confined or involve close contact, especially indoors
- washing your hands regularly with soap and water for at least 40 seconds. If you don’t have access to clean water and soap, use an alcohol-based hand sanitizer and keep rubbing it into your hands for 20 seconds
- avoiding touching your face
- sneezing or coughing into a clean tissue, and then throw it away and wash your hands. If you don’t have a tissue, use the inside of your elbow to cover your mouth
- regularly cleaning and disinfecting surfaces
- staying at home if you feel unwell, and calling your healthcare provider for advice.

When should I wear a face mask?

The World Health Organisation now recommends using face masks when you are not able to stay at least one meter away from others. This includes when you’re on public transport, inside shops, or any other time when you’re in a confined or crowded space.

Depending on where you live in the world, there may be laws requiring you to wear face masks in other situations. It’s important to know and follow the local guidance.

What type of face mask should I wear?

There are two types of face masks, fabric masks (which you can make yourself) and medical masks (which are in short supply and needed by healthcare workers).

Non-medical fabric face masks

- prevent the wearer from passing COVID-19 on to others
- should be worn in situations where it’s hard to maintain physical distancing of one meter or more
- should be made from multiple layers of fabric – see the WHO’s recommended fabric face mask materials
- are for healthy people to wear, because there is evidence that some people infected with COVID-19 have no symptoms but may still be able to transmit the virus
- do not protect you from getting COVID-19, so it’s important that you maintain social distancing and don’t rely on only a fabric mask for protection.

Medical masks
• prevent the wearer from getting infected and from passing COVID-19 on
• are in short supply globally and should be prioritised for health workers, people with COVID-19 symptoms, and those caring for people with COVID-19 symptoms
• should be used by at-risk groups (including those aged over 60 and anyone with pre-existing medical conditions), when they cannot guarantee a distance of one meter from others.

How do I wear a face mask safely?

Both fabric and medical-grade face masks are only effective when used correctly. Make sure your mask fits closely, covering your nose, mouth and chin. Clean your hands before and after touching the mask.

Masks should be used alongside other prevention measures, such as physical distancing where possible, frequent handwashing and avoiding touching your face or mask. The World Health Organization has a series of videos and infographics on how to wear different types of masks.

**HIV and COVID-19**

**Are people living with HIV more at risk?**

There is currently no evidence that people living with HIV are at a higher risk of being infected with coronavirus, the virus that causes COVID-19 illness. Our understanding of the risk of developing severe COVID-19 in people living with HIV is evolving. Current evidence suggests that HIV is less of a risk factor for severe COVID-19 than other health conditions, such as high blood pressure, heart disease, lung disease, cancer, diabetes, or being over a certain age.

People living with HIV who have a compromised immune system may be at greater risk and should take extra steps to prevent infection. This includes people with a low CD4 count (<200 copies/cell), a high viral load or a recent opportunistic infection.

The best way to stay healthy is by taking your antiretroviral treatment.

To find out more, read our [coronavirus and HIV page](#).

**How can people living with HIV prepare for COVID-19?**

People living with HIV should follow the general prevention advice for COVID-19. It’s also important to:

• continue taking your antiretroviral treatment (ART) as prescribed to keep your immune system healthy
• stock up on ART so you have at least a 30-day supply, ideally three months if possible
• make sure your immunisations/vaccinations are up to date (such as flu and pneumonia vaccines)
• have a plan in place for staying at home, including how you will get hold of food and medicine and how to contact your healthcare facility if necessary
• take care of yourself by eating well, exercising as best you can (even at home), and looking after your mental health.
HELP US HELP OTHERS

Avert.org is helping to prevent the spread of HIV and improve sexual health by giving people trusted, up-to-date information.

We provide all this for FREE, but it takes time and money to keep Avert.org going.

Can you support us and protect our future?

Every contribution helps, no matter how small.

PLEASE DONATE NOW

1. Royal College of Obstetricians and Gynaecologists (2020) 'Coronavirus infection and pregnancy'
2. ibid.

Sources:

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