

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](#).

[About COVID-19](#)

[Symptoms and treatment](#)

[Vaccine](#)

[Transmission and prevention](#)

[HIV and COVID-19](#)

About COVID-19

What is COVID-19?

COVID-19, otherwise known as coronavirus disease 2019, is a new infectious disease 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.

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 speech or mobility, confusion, chest pain or a high temperature. If you experience any of these symptoms, it's important to seek medical care straight away. 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.

Are there long-term effects of COVID-19?

Some people have reported experiencing continued symptoms after having COVID-19, such as fatigue, breathing problems and neurological problems. This includes people with less severe cases of COVID-19, as well as those who have needed hospital care.

Research is currently underway to better understand how many people experience long-term effects of COVID-19, and the nature of these symptoms.

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

If you think you have COVID-19, stay at home and self-isolate – even if your symptoms are mild.

Call your local health service for advice. They will tell you what to do, 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.

Do not leave your home for any reason, including going to work or school while you are self-isolating. 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.

If you have difficulty breathing and/or persistent pain in your chest, call your local health service immediately.

Most people will recover from COVID-19 by themselves, without the need for hospital treatment.

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. If you have tested negative but someone you live with has tested positive, you should continue to isolate.

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 15 in 100 people who get COVID-19 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 becoming severely ill is higher for people over 60 and those with certain underlying health issues, including high blood pressure, heart or lung problems, diabetes, obesity or cancer.

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 for COVID-19?

So far, no drugs are proven to specifically treat COVID-19. As scientists and doctors continue to learn

more about COVID-19, our knowledge of, and ability to treat the virus will improve.

Vaccine

Is there a vaccine for COVID-19?

Several COVID-19 vaccines are now being distributed around the world. Check the official advice where you live to find out when the vaccine will be available to you.

COVID-19 vaccines work by helping your body develop immunity to the virus that causes COVID-19. This means your body will be ready to respond faster to the virus if you are exposed to it, so you'll be less likely to get seriously ill.

Evidence shows the current vaccines can protect people from getting sick from COVID-19. However, we are still learning more about how effective they are at stopping the virus from being passed on between people. That's why it's important to continue to follow the prevention advice, even after having the vaccine.

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 COVID-19, and the virus gets into their mouth, nose or eyes.

These droplets can also 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 – without washing their hands first.

Is COVID-19 passed on more easily indoors?

There is evidence that COVID-19 is passed on more easily in indoor, crowded and poorly ventilated places where people are closer together for long periods of time. This includes 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.¹

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 strong evidence that COVID-19 can be passed on through breastfeeding.² However, due to the close contact involved, there is a risk that a mother could pass COVID-19 onto her baby by coughing, sneezing or breathing heavily while breastfeeding. If you have symptoms of COVID-19, consider wearing a face mask while breastfeeding, washing your hands before and after holding your baby, and regularly disinfecting surfaces you have touched to minimise the risk of passing the virus on.

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,
- getting a COVID-19 vaccine when you are offered it,
- avoiding touching your face,
- keeping indoor spaces well ventilated when you are inside with other people,
- 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,
- only meeting people outdoors, if you are allowed to meet with people from outside your household ,
- 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 recommends using face masks when you are not able to stay at least one meter away from others. This includes indoor public places such as shopping centres, religious buildings, restaurants, schools and public transport. Masks are also recommended in some outdoor places, such as busy markets, crowded streets and bus stops.

You should also wear a mask in rooms with poor ventilation, or if someone visits your home and you cannot keep a one-meter distance.

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 or buy) 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 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, people who have tested positive for COVID-19 or are waiting for their test results, 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)

Both fabric and medical-grade face masks are only effective when used correctly. Some general tips include:

- clean your hands before and after touching your mask,
- make sure your mask fits closely, covering your nose, mouth and chin with no gaps on the sides,
- don't wear a mask that is damaged, dirty or wet,
- have your own mask – don't share it with others,
- avoid pulling down your mask when talking to others,
- don't wear your mask on your chin, neck, forehead, around your arm or hanging from your ear.

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](#).

What if I have been in contact with someone who has COVID-19?

If you have come into contact with someone who has symptoms of COVID-19, call your health care provider to find out if you are able to take a test. If testing is not available where you live, you will need to self-isolate for 14 days. Make sure you cooperate with any contact-tracing procedures in your area to control the spread of the virus.

HIV and COVID-19

Are people living with HIV more at risk?

Our understanding of the risk of COVID-19 in people living with HIV is evolving. Current evidence suggests that HIV people living with HIV are at greater risk of becoming seriously ill, and dying, from COVID-19. However, HIV is less of a risk factor 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 (<350 copies/cell), a high viral load, a recent opportunistic infection, or a current AIDS-defining illness.

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, and any other medication you need to take, 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 (2021) '[Coronavirus infection and pregnancy](#)'
 2. *ibid.*



Sources:

WHO (2021) 'Coronavirus disease (COVID-19) pandemic'

WHO (2020) 'Coronavirus disease (COVID-19)'

Terrence Higgins Trust (2020) 'Don't hook up during the COVID-19 lockdown'

WHO (2021) 'COVID-19 vaccines'

WHO (2020) 'Coronavirus disease (COVID-19): Vaccines'

CDC (2021) 'Understanding How COVID-19 Vaccines Work'

WHO (2020) 'Coronavirus disease (COVID-19): Masks'

Hoffman C et al. (2020) 'Immune deficiency is a risk factor for severe COVID-19 in people living with HIV. *HIV Medicine*'