

# COVID-19 Factsheet

This is a general factsheet about COVID-19. It has some specific information for people with lung conditions, but most of the information will apply to everybody.

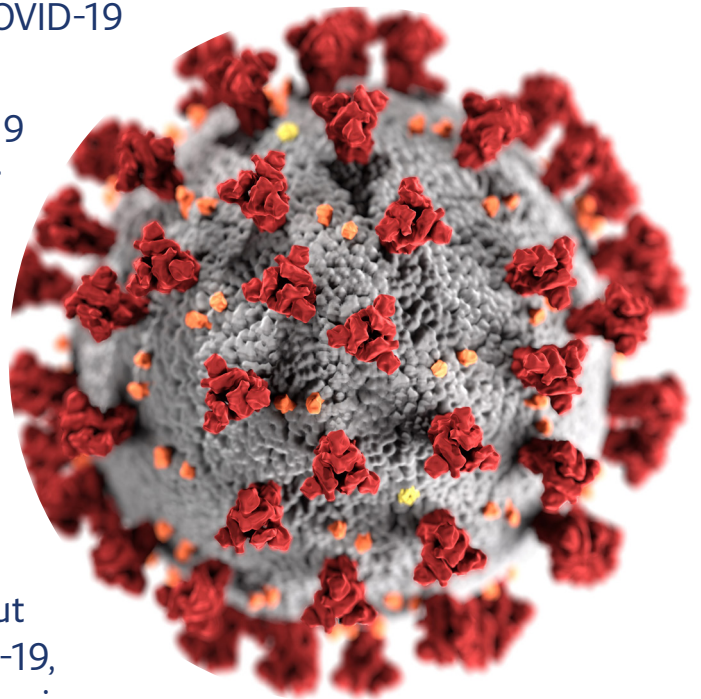
## What is COVID-19?

Coronavirus disease 2019 or COVID-19 is caused by the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-Cov-2). This virus had not been seen in humans until December 2019, when it was first reported in Wuhan, China.

Coronaviruses are a large and very common family of viruses that cause illnesses from the common cold to more serious diseases such as pneumonia and acute respiratory distress syndrome (ARDS).

The virus that causes COVID-19 is very contagious and the number of people getting COVID-19 rose rapidly around the world. The World Health Organization (WHO) declared COVID-19 a global pandemic on 11 March 2020.

How ill a person will get with COVID-19 varies a lot between individuals. Older people and people with underlying medical conditions are more likely to experience severe or life-threatening infections, but COVID-19 can have damaging effects on the health of anyone, of any age. This is why the COVID-19 outbreak has been taken very seriously. Other reasons for this are because we are still learning about the best way to treat people with COVID-19, and until recently, we have not had a vaccine.



## How does having a lung condition affect my risk of severe illness?

Having a lung condition or previously having a lung condition does not necessarily affect your risk of getting COVID-19. However, it may affect your recovery time or how severely you have COVID-19.

No matter what lung condition you have, you should continue with your medication, physiotherapy and any other forms of treatment as recommended by your doctor. You should not make any changes to your treatment unless your doctor advises you to.

If you have had a lung condition, have recovered fully and your breathing is no longer affected, for example from pneumonia, pneumothorax (collapsed lung) or punctured lung, then you are not at higher risk of complications from COVID-19.

Certain lung conditions can increase your risk of complications if you catch COVID-19. These include, but are not limited to:

- Severe asthma
- Bronchiectasis
- COPD
- Cystic fibrosis
- Emphysema
- Idiopathic pulmonary fibrosis (IPF)
- Immune disorders that have affected the lung (e.g. lupus, rheumatoid arthritis etc)
- Lung cancer



## What can I do to limit my risks of getting COVID-19?

These are some of the ways that you can limit your risk of catching and spreading COVID-19.

### **Social distancing**

While the rules may vary between countries, staying at least 1-2 metres away from people that you do not live with can prevent the spread of COVID-19. This is because

the virus is mostly spread through droplets and aerosols that can travel in the air and are breathed in. The further away from someone you are, it is less likely the droplets and aerosols will reach you.

This is especially important indoors. This is because, unlike outside, the air is not being constantly replaced with fresh air. Using fans or air conditioning does not help with this as they circulate the contaminated air and may spread the virus further. There is ongoing research to understand how long these droplets and aerosols stay in the air. We advise that you maintain social distancing and ensure all rooms have good natural ventilation such as open windows when you are around people who you do not live with.

## **Hand washing**

Washing your hands is one of the most important things you can do to stop the spread of the virus. Soap 'kills' the virus by breaking down its structure, meaning it can no longer cause harm.

Make sure to wash your hands thoroughly for at least 20 seconds with soap to kill the virus.

If you do not have soap and water immediately available, use an alcohol gel (hand sanitizer) with 60% alcohol or more. However, wash your hands with soap and water as soon as available. We have more information about proper hand cleaning technique on our website and the link is at the bottom of this factsheet.

## **Face coverings**

Face coverings can help to prevent the spread of coronavirus. They do this by catching the droplets and aerosols released when we cough, sneeze or speak that may carry the virus. When you cough, droplets are released from your mouth and may land on surfaces or be breathed in by other people. So, wearing a mask can help to protect other people if you are carrying the virus without knowing. You must be cautious and change your face covering immediately if it is damp or wet after sneezing or coughing as this may affect how well it works. Dry face coverings are always more efficient.

Even if you have a lung condition, you should be able to wear a face covering and there is no evidence that it will cause you harm. You need to make sure that both your mouth and nose are covered. You may find that it feels more difficult to breathe while wearing a face covering. There are things you can do to get used to wearing a face



covering and we have a lot more information about this on our face covering page, which is linked to at the bottom of this factsheet. Wearing a face covering is important for people with lung conditions. The symptoms of COVID-19 may be very similar to those of different lung conditions and it is easy to not realise that you have COVID-19.

## What are the symptoms? How do I know if I have COVID-19?

The symptoms of COVID-19 can vary from person to person, but there are symptoms that are more common than others. You may experience one or more of the symptoms listed below.

### Mild symptoms

#### Mild symptoms may include:

- Feeling very tired
- A fever (temperature over 38C)
- Headaches
- A sore or scratchy throat
- Loss of smell
- Loss of taste

#### Treatment:

- Get lots of rest
- Drink plenty of fluids
- Paracetamol can be used to control the fever
- Paracetamol can also be used as a pain killer

**When to contact a doctor:**

If you only have mild symptoms it is unlikely that you will need to go to the doctor. If your symptoms get worse suddenly or you are experiencing breathlessness, speak with your doctor over the telephone. If you have symptoms of COVID-19, you should self-isolate and if it is recommended in your locality, you should be tested for the virus.

## Moderate symptoms

**Moderate symptoms may include:**

- A fever (temperature over 38C)
- Aching muscles
- An ongoing cough
- Feeling breathless
- Headaches
- Feeling very tired
- Loss of appetite
- Loss of smell
- Loss of taste
- Diarrhoea

**Treatment:**

- Get lots of rest
- Drink plenty of fluids
- Paracetamol can be used to control the fever
- Paracetamol can be used as a pain killer
- If you feel out of breath, use the techniques in our factsheet for managing breathlessness, linked to at the bottom of this factsheet.

**When to contact a doctor:**

You only need to contact a doctor if the symptoms are not starting to improve after about a week or the symptoms get worse, particularly if breathlessness becomes a problem, such as not being able to walk up the stairs. You should contact your doctor via telephone and not try to attend the clinic in person. If you have symptoms of COVID-19, you should self-isolate and if it is recommended in your locality, you should be tested for the virus.

## Severe symptoms

The most severe complication of a COVID-19 infection is pneumonia. This means that the infection is in the lungs. Feeling very breathless might be the worst symptom.

In COVID-19, unlike some other lung infections, the symptoms are often at their worst about 1 week after the symptoms start and can take 2-3 weeks to improve in severe cases.

### **You are also likely to experience:**

- A high fever
- A cough
- The other symptoms described for moderate infections.

### **You may also experience:**

- Chest pain
- Feeling dizzy
- Feeling confused

### **When to contact a doctor**

Speak to your doctor if breathlessness is so severe that it limits what you can do, such as not being able to walk up the stairs without having to stop, or when other symptoms feel more severe than “flu”.

You should initially contact your doctor via telephone and not try to attend the clinic in person. If you have symptoms of COVID-19, you should self-isolate and if it is recommended in your locality, you should be tested for the virus.

Severe infections are likely to need time in hospital. After a severe infection you should expect to feel tired and still experience some symptoms for up to 6 weeks or more.

## Some less-common symptoms that we know of are:

**Chest pain** - Around 1 in 10 people might experience stabbing pains in the chest due to COVID-19. This is most likely caused by inflammation of the lining of the lung (sometimes called pleurisy), but pains in the chest muscles due to coughing and pain in the major joints are also common.

If you experience chest pains, it is important you discuss the pain with your doctor. This is because even though chest pain is a common symptom of COVID-19 there are other important things that can cause chest pain. Most symptoms will settle down by themselves, but some people will need a follow-up x-ray or scan and sometimes other investigations to check for complications. You should discuss these symptoms with your doctor.

**Long COVID** - Most people who recover from COVID-19 will have no symptoms after a short period of days to weeks. But you may find that you are experiencing symptoms for some time, even months after this. Some people may find that they start to feel better only to have their symptoms re-appear soon after. Taste and smell may take some time to return and some people find that their taste and smell is altered for a while after having COVID-19. You may also find that your symptoms are different from day to day. Be aware of these symptoms and if they start to get worse speak with your doctor.

Research is still being done to fully understand long COVID but if you think you are experiencing this, speak with your doctor to find out how they can help you.

**Neurological dysfunction** - A small number of people may experience memory loss, impaired consciousness and delirium, especially older people with previous neurological disease.

In mild cases, this may feel like brain fog, where your memory is a bit hazy and your thoughts may feel slowed down or harder to process than normal. This symptom can last for very different amounts of time in different people, from days to months.

These are some of the symptoms that you might experience with COVID-19. It is important to remember that everyone is different, and you may experience some of these and not others. COVID-19 is still a new disease and we are always learning about it. As more people have COVID-19 this list may have new symptoms added to it.

## What will happen if I have severe COVID-19 and I need to go to hospital?

Many people will not need to go to hospital but if you do, your breathing will be monitored, and it may need to be supported with oxygen. Sometimes it may be necessary to support you with a ventilator via a mask applied on your face to help you breathe better (artificial breathing). The hospital will want to help with any symptoms you may have. For more information about ventilation see our resources at the bottom of this factsheet.

People working in the hospital need to keep you and themselves as safe as possible. Because of this, they will be dressed differently to how you may have seen them before. They will be wearing a face mask, a plastic shield in front of their face or protective goggles. They may wear a disposable apron and likely protective clothing under that. This may look alarming, but it is for everybody's safety.



## Should I get vaccinated?

Vaccination is more important now than ever. Vaccinate yourself against the flu as you would do every year and check with your general practitioner about whether you should get the pneumococcus vaccination.

Vaccines against COVID-19 have been developed and are available. Each country is rolling the vaccine out in the most efficient way they can and will prioritise the people they see as most at risk of COVID-19, this will vary between countries. It will be important for as many of us who can, to have the COVID-19 vaccine. This is because vaccination does not just help to protect the person who is vaccinated, but also those around us who are not able to have vaccines, such as the very ill, the very young or old and those with conditions that affect the immune system.

You can learn more about vaccination and the COVID-19 vaccines in the resources at the end of this factsheet.



## How do I limit the spread of COVID-19 in the house when living with someone who is infected?

If you or someone you live with has COVID-19, where possible, the person with COVID-19 should isolate in a separate room and if they can, use a different bathroom. Throughout the day, improve home ventilation by opening windows.

Make sure everyone washes their hands with soap often. Clean surfaces that the infected person has touched, or been in contact with, using soap and water or an antiviral detergent. Wear a clean face covering if you must be in the room with the infected person and where possible, avoid contact with them. Change your face covering regularly.

## How do I look after my mental wellbeing?

The pandemic has been hard on everyone, all over the world and this can impact how we feel mentally as well as physically. It is really important to look after our mental health especially when we are not feeling well.

We have produced a factsheet about looking after your mental wellbeing for people with lung conditions which may be helpful. The link to it can be found at the bottom of this factsheet.

## What are the tests for COVID-19?

Two kinds of tests are available for COVID-19: viral tests and antibody tests.

A viral test tells you if you have a current infection. This is the swab test.

An antibody is a protein that is present in your blood and if it is present it might tell you if you had a past infection.



## Who should have a viral (swab) test?

- People who have symptoms of COVID-19.
- People who have been asked or referred to get testing by their healthcare provider, state health department or other authority.

Not everyone needs to be tested. If you do get tested, you should self-quarantine/isolate at home until you receive your test results and follow the advice of your healthcare professional.

You can visit your local or country specific health department's website to look for the latest local information on testing.

If you test positive, you will need to self-isolate and follow the advice in this factsheet about limiting the spread of the virus. Even if you have tested positive for COVID-19 and have recovered, you should continue to take steps to help slow the spread of COVID-19. Reinfection is not common, but it can happen, and you can still spread the virus by touching contaminated surfaces.

If you test negative, you probably were not infected at the time your sample was collected. The test result only means that you did not have COVID-19 at the time of testing.

## Who should have an antibody test?

- You may have one to see if you have had COVID-19. Your doctor may do this to understand more about any symptoms you still have.
- Because you are involved in research and they are monitoring how long you continue to have antibodies and in what quantities.

## How do I get back to daily living?



Most people who have COVID-19 will have a mild case. They will recover quickly and return to normal activities within a couple of weeks of getting sick.

Some people who have had moderate to severe COVID-19 may take a little longer to get back to full health.

It can be very frustrating when you are unable to

do the things that you are used to doing, whether this is going up your stairs without difficulty or walking to the shops, playing with your children, or training for a sport you love.

Take your time to get back to full health - try not to put too much pressure on yourself and rest when you can.

If you have had moderate or severe COVID-19 you may be able to get help from your doctor with physiotherapy or occupational therapy to help guide you back to daily living.

The effects of isolation and of COVID-19 itself can cause you to lose strength in your muscles, heart and lungs. This loss of fitness can make the recovery slower. Because of this, try to gently increase physical exercise after isolation from COVID-19 ends. For people with severe COVID-19, you may be invited to formal rehabilitation programmes.

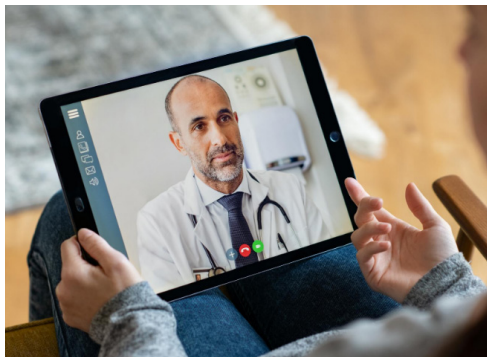


A healthy, balanced diet is important for general health and for recovery from COVID-19 too. Aim to eat lots of different colours of fruits and vegetables, at least 5-7 portions a day, but more is good too. If you have had COVID-19, you may not have felt very hungry and may have lost some weight. Make sure to eat what you can, and what is appealing to you while you get better. Foods high in protein, such as meat, fish, pulses, cheese and vegetarian meat substitutes are very important while you are recovering as they will help you to rebuild your strength.

There are links between vitamin D deficiency and more severe COVID-19. Anyone living in the Northern hemisphere (such as northern Europe) between October and March may be more likely to be deficient as we cannot make vitamin D from the sun during these months. People from black and minority ethnic groups are especially at risk of low vitamin D levels due to skin colour and certain cultural practices. People with larger bodies are also at higher risk of vitamin D deficiency. If you are concerned that you may be low in vitamin D, speak with your doctor. Vitamin D can be found in foods such as egg yolk, oily fish, fortified foods like cereal and some plant-based milks, red meat and liver.

## What about attending hospital appointments?

It is important to look after your overall health. Your regular or scheduled appointments are still important to attend but they may be slightly different. If you are required to attend an appointment, each hospital will have their own policies on patients attending during the pandemic. Some consultations are now taking place virtually, either over the phone or via a video consultation. Where this is not possible, or you need to attend a hospital appointment in person, then you should use the



advice above about how to minimise your risk. It is also likely that the hospital will contact you the day before your appointment to ask you questions and check whether you currently have any symptoms of COVID-19. For some appointments you may be asked to have a viral (swab) test to check whether you currently have coronavirus and then asked to stay at home and minimise any contact with others.

Lung function tests, such as spirometry, are still an important part of understanding lung disease and helping to manage it. You may still be required to attend for your lung function test. While there may be certain safety measures in place, how you perform these tests will not have changed much. The coronavirus is spread through droplets and aerosols in the air and lung function tests can increase the amount you release. However, most lung function tests are performed with a filter in place that is extremely efficient at removing virus particles. One change you may find is that you may be asked to stay on the mouthpiece with the filter attached for a little longer once you have finished the test. You may notice a difference in the appearance of the healthcare professional helping you to perform your lung function test. To minimise the spread of the virus they will be wearing additional protective equipment than they may have done before. This is likely to include wearing a face mask and a visor.

## How do I take part in research?

There is still a lot that we do not know about COVID-19. To help us learn more we need people to be involved in research. If you have had COVID-19, think you have had it, or have a lung condition and are interested in taking part in research about how the pandemic has affected people with lung conditions please contact us by emailing [info@europeanlung.org](mailto:info@europeanlung.org) to find out about ways you can get involved.

## Further information

**Handwashing** - [www.europeanlung.org/en/covid-19/what-is-covid-19/prevention](http://www.europeanlung.org/en/covid-19/what-is-covid-19/prevention)

**Face coverings** - [www.europeanlung.org/en/covid-19/covid-19-information-and-resources/wearing-a-mask-or-face-covering-if-you-have-a-lung-condition](http://www.europeanlung.org/en/covid-19/covid-19-information-and-resources/wearing-a-mask-or-face-covering-if-you-have-a-lung-condition)

**Managing breathlessness** - [www.europeanlung.org/en/covid-19/covid-19-information-and-resources/managing-breathlessness-at-home-during-the-covid-19-pandemic](http://www.europeanlung.org/en/covid-19/covid-19-information-and-resources/managing-breathlessness-at-home-during-the-covid-19-pandemic)

**What happens if I need to go to hospital** - [www.europeanlung.org/en/covid-19/covid-19-information-and-resources/covid-19-hospital-factsheets](http://www.europeanlung.org/en/covid-19/covid-19-information-and-resources/covid-19-hospital-factsheets)

**What is ventilation** - [www.europeanlung.org/en/covid-19/covid-19-information-and-resources/covid-19-symptoms](http://www.europeanlung.org/en/covid-19/covid-19-information-and-resources/covid-19-symptoms)

**What is ventilation like for the patient** - [www.europeanlung.org/en/covid-19/share-your-experiences/patient-stories/laura-rentoul](http://www.europeanlung.org/en/covid-19/share-your-experiences/patient-stories/laura-rentoul)

**Vaccine overview:** [www.europeanlung.org/assets/files/factsheets/vaccination.pdf](http://www.europeanlung.org/assets/files/factsheets/vaccination.pdf)

**COVID-19 vaccine Q&A:** [www.europeanlung.org/en/covid-19/covid-19-information-and-resources/covid-19-vaccinations-%E2%80%93-questions-and-answers-with-ers-president-anita-simonds](http://www.europeanlung.org/en/covid-19/covid-19-information-and-resources/covid-19-vaccinations-%E2%80%93-questions-and-answers-with-ers-president-anita-simonds)

**The European Medicines Agency:** [www.ema.europa.eu/en/human-regulatory/overview/public-health-threats/coronavirus-disease-covid-19/treatments-vaccines/covid-19-vaccines-key-facts](http://www.ema.europa.eu/en/human-regulatory/overview/public-health-threats/coronavirus-disease-covid-19/treatments-vaccines/covid-19-vaccines-key-facts)

**Mental wellbeing:** [www.europeanlung.org/assets/files/factsheets/Mental%20wellbeing/Mental-wellbeing-Factsheet%20-%20D07.pdf](http://www.europeanlung.org/assets/files/factsheets/Mental%20wellbeing/Mental-wellbeing-Factsheet%20-%20D07.pdf)



The European Lung Foundation (ELF) was founded by the European Respiratory Society (ERS) in 2000 with the aim of bringing together patients, the public and respiratory professionals to positively influence lung health.



This information was compiled with the help of Prof. James Chalmers, Prof. Anita Simonds, Dr Sabrina Bajwah, the ELF professional advisory committee and members of the ELF COVID-19 patient advisory group. **This factsheet was produced in January 2021.**