

Symptoms

High Temperature (Fever)

What is fever like in COVID-19?

Fever is not necessarily a bad thing. It's a normal response to infection, as raising your body temperature helps your immune system fight it off.

If you're under 65, having a temperature over 37.8°C is likely to be a sign of COVID-19. If you're over 65 or very thin, your normal body temperature is likely to be lower, so a reading over 37.4°C should be considered to be a potential symptom.

You can measure your temperature at home using a thermometer. An in-ear thermometer is best but an oral (mouth) thermometer is fine.

Other devices like smartphones may not be so reliable.

If you don't have a thermometer, the key sign to look out for is feeling hotter than usual, particularly on your chest or back. You may also be shivery or have chills.

It's also important to know that there is no one 'normal' body temperature, so get in the habit of checking yours regularly to know what's usual for you. Body temperature can also be affected by hormones.

When does fever happen in COVID-19?

When it does occur, fever usually happens in the first week of illness and tends to go quite quickly. However, some people with long-lasting symptoms (long COVID) have reported having recurring fever/chills.

How common is fever in COVID-19?

Fever is a reasonably common symptom of COVID-19, affecting an average of four in ten (40%) of children and adults at some point in their illness.

Importantly, this means that most people (60%) with COVID-19 will not have a fever, even though it is considered to be one of the three 'classic' symptoms of the disease, along with persistent coughing and loss of smell (anosmia).

Fever usually occurs along with other symptoms, and only around one in twenty people with COVID-19 experience fever as their only symptom.

What other symptoms of COVID-19 are common alongside fever?

Fever is highly likely to occur alongside fatigue (tiredness) and headaches. It often comes together with persistent coughing, chest pain, shortness of breath, sore throat, skipped meals, unusual muscle pains, dizziness and diarrhoea.

What should I do if I have a fever and think it might be COVID-19?

If you have a high temperature, even for just a short time, it could be COVID-19. You should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.
- Book a COVID test as soon as possible, either through the app or the NHS.

A fever is your body's natural response to infection, so it doesn't necessarily need treating with drugs. If you are an adult and have a fever with COVID-19 you should:

- Get lots of rest
- Stay hydrated by drinking plenty of fluids
- Wear light clothes and avoid bundling yourself up in jumpers and blankets
- Take paracetamol or ibuprofen if you are feeling very uncomfortable, especially if your fever is stopping you from eating or drinking

Loss or change in taste & smell

What is anosmia like in COVID-19?

If you have anosmia or a change in your sense of smell, you may notice that that you can't smell strongly scented things like coffee or flowers (or candles!). You may also notice that food tastes different from normal or seems tasteless .

It's easy and quick to test your sense of smell every day using simple household items .

When does anosmia happen in COVID-19?

Anosmia or changes in smell tend to be an earlier symptom of COVID-19, and last an average of five days. However, some people report losing their sense of smell for several weeks.

How common is anosmia in COVID-19?

Anosmia is one of the commonest symptoms of COVID-19, affecting an average of six in ten (60%) adults aged 16-65 at some point in their illness. It is less common for children (35%) and affects around half of adults over 65 with COVID-19.

For a significant proportion of people with COVID-19, anosmia is the only symptom they experience. 22% of children, 38% of adults aged 16-35, 30% of adults aged 35-65 and 15% of over 65s

What other symptoms of COVID-19 are common alongside anosmia?

Anosmia or changes in smell are likely to occur alongside fatigue (tiredness) and headaches. It can also come together with fever, sore throat and a persistent cough. Older people are also likely to skip meals and have unusual muscle pains.

What should I do if I have anosmia and think it might be COVID-19?

If you have lost your sense of smell or taste or things smell different to normal you should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.
- Book a COVID test as soon as possible, either through the app or the NHS.

Although it can be frustrating to experience, there is no specific medical treatment for anosmia. If your sense of smell is not coming back quickly, smell training might help - find out more from AbScent or Fifth Sense.

Headaches

What are headaches like in COVID-19?

Even though headaches are a less well-known symptom of COVID-19, they are one of the earliest signs of the disease and more common than the 'classic' symptoms of cough, fever and loss of smell (anosmia).

It's important to remember that headaches are very common, especially as many of us are staring at screens for so long each day. So although many people with COVID-19 experience headaches, most people with a headache will not have COVID-19.

Researchers have been investigating how to tell the difference between COVID and non-COVID headaches. They've found that COVID-19 headaches tend to:

- Be moderately to severely painful
- Feel 'pulsing', 'pressing' or 'stabbing'
- Occur across both sides of the head (bilateral) rather than in one area
- Last for more than three days
- Be resistant to regular painkillers

We aren't sure why COVID-19 causes headaches. It may be the virus directly affecting the brain. Or it could be related to being ill, such as dehydration or hunger caused by not eating and drinking normally.

When does a headache happen in COVID-19?

Headache tends to come on at the very start of the illness, and usually lasts for an average of three to five days. But some people can suffer from COVID-related headaches for much longer, and these are commonly reported in people with Post COVID syndrome (Long-COVID). Our data shows that these headaches often come and go, but thankfully they gradually reduce over time.

How common is a headache in COVID-19?

Having a headache is a very common symptom of COVID-19 for all age groups. On average, around seven in ten adults who are ill with COVID-19 will have a headache. It's slightly less common in children, affecting around six in ten children.

Around 15% of people who were ill with COVID-19 reported a headache as their only symptom.

What other symptoms of COVID-19 are common alongside a headache?

A headache is highly likely to occur alongside fatigue and loss of smell (anosmia). It often comes together with symptoms like a sore throat, fever, unusual muscle pains, a persistent cough and dizziness.

What should I do if I have a headache and think it might be COVID-19?

If you have a headache it could be COVID-19, especially if you have lost your sense of smell and feel very tired. You should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.

If your headache is very painful, you can try taking paracetamol or ibuprofen.

You should get urgent medical help if you have breathing problems, are suddenly confused, or your lips or face are turning blue.

Unusual tiredness (fatigue)

What does fatigue feel like in COVID-19?

Even though fatigue is a less well-known symptom of COVID-19, it's one of the early signs of the disease and more common than the 'classic' symptoms of cough, fever and loss of smell (anosmia).

Fatigue in COVID-19 is not the same as normal feelings of being tired or sleepy. It's a type of extreme tiredness or feeling 'wiped out' that persists despite resting or getting a good night's sleep.

If you have fatigue, you may notice it occurs even after small tasks and limits your usual day-to-day activity. It can feel difficult to walk up stairs, do normal chores or even to get out of bed. Fatigue related to COVID-19 can also make it hard to concentrate or remember things - people sometimes describe it as having 'brain fog'.

It's important to remember that feeling more tired than usual is common when you're fighting off any infection, not just coronavirus. And many of us have also seen dramatic changes to our lives including our routines, how we work, and look after children and older relatives, which may also affect how tired we feel. So although many people with COVID-19 experience severe tiredness, most people who feel tired or worn out will not have COVID-19.

Developing fatigue after viral infections is very common. We aren't sure why this happens, but it may be the result of the immune response not returning to normal after the infection has been dealt with.

When does fatigue happen in COVID-19?

Fatigue is an early symptom of COVID-19, commonly occurring within the first seven days of the illness. On average, it lasts for five to eight days but some people can suffer from COVID-related fatigue for up to two weeks or much longer.

Fatigue is a common symptom for people with long COVID, or post-COVID syndrome. The good news is, that in most people it does go away eventually.

How common is fatigue in COVID-19?

Feeling fatigued is a very common symptom of COVID-19 for all age groups. On average, around eight in ten adults who are ill with COVID-19 will experience fatigue. It's slightly less common in children, affecting around half of those with COVID-19.

While 82% of app contributors who tested positive for coronavirus reported fatigue, just this symptom alone is not a sure sign of having COVID-19. Only 13% of people who were ill with COVID-19 experienced fatigue as their only symptom.

What other symptoms of COVID-19 are common alongside fatigue?

Feeling fatigued is highly likely to occur alongside headaches and loss of smell (anosmia).

Across all ages, fatigue sometimes comes together with symptoms like fever and a sore throat. In adults, fatigue is also reasonably common alongside a cough and unusual muscle pains.

Depending on your age and sex, you should contact your doctor if you have multiple different symptoms of COVID-19 in the first week of being ill.

What should I do if I have fatigue and think it might be COVID-19?

If you're feeling newly fatigued it could be COVID-19, especially if you also have a headache and loss of smell. You should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.
- Also log your health daily in the app, if you're not already, to help us understand more about how COVID-19 affects people and contribute to life-saving scientific research.

Fatigue can be very debilitating. It's important to listen to your body and not push yourself into doing more than you're able to. However, maintaining a routine of small, regular tasks has shown to help maintain fitness and improve tiredness levels.

Sore throat

What is a sore throat like in COVID-19?

Even though a sore throat is a less well-known symptom of COVID-19, it's an early sign of the disease and reasonably common in children and adults up to the age of 65.

People using the app have reported having a sore throat that feels similar to what you might experience during a cold or laryngitis.

COVID-related sore throats tend to be relatively mild and last no more than five days. A very painful sore throat that lasts more than five days may be something else such as a bacterial infection, so don't be afraid to contact your GP if the problem persists.

It's important to remember that sore throats are common and caused by lots of respiratory illnesses such as normal colds. So although many people with COVID-19 experience sore throats, most people with a sore throat will not have COVID-19.

When does a sore throat happen in COVID-19?

A sore throat is an early symptom of COVID-19, usually appearing in the first week of illness and improving quite quickly. It feels worse on the first day of infection but gets better on each following day.

On average, a sore throat will last two to three days but can last longer in adults (up to seven days compared to five days for children). If your sore throat is persisting, it's unlikely to be COVID-19.

How common are sore throats in COVID-19?

Almost half of people who are ill with COVID-19 will experience a sore throat. However, it's more common in adults aged 18-65 (49%) and than in the elderly (37%) or those under 18 (40%).

Around 11% of people who were ill with COVID-19 reported a sore throat as their only symptom.

What other symptoms of COVID-19 are common alongside a sore throat?

A sore throat is most likely to occur alongside many other symptoms of COVID-19. People reported a sore throat with varying combinations of symptoms, some of which are associated with a higher risk of needing hospital support.

Having a sore throat together with loss of smell (anosmia) is more likely to be COVID-19 than a regular cold.

Over the age of 16, a sore throat is associated most of the time with fatigue and headaches, and sometimes with a hoarse voice and light-headedness. Across all ages, a sore throat is reasonably common alongside a persistent cough and fever.

What should I do if I have a sore throat and think it might be COVID-19?

If you have a sore throat it could be COVID-19, especially if you have lost your sense of smell, you should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.

To help soothe a sore throat and shorten how long it lasts, you can:

- gargle with warm, salty water (children should not try this)
- drink plenty of water
- eat cool or soft foods
- avoid smoking or smoky places
- suck ice cubes, ice lollies or hard sweets – but do not give young children anything small and hard to suck because of the risk of choking
- rest

Sudden Confusion (delirium)

What is delirium like in COVID-19?

Delirium is a particularly important symptom of COVID-19 for elderly people, especially those who are frail. There are two types of delirium, which both show a new change from a person's normal behaviour.

The first is hyperactive delirium, where someone abruptly changes in their character and starts acting strangely. They may be agitated or distressed, or even aggressive. This sort of delirium is obvious to those caring for them because of what they say or do.

The second type is hypoactive delirium, which is more common and harder to spot. People with hypoactive delirium become withdrawn and less responsive or engaged in what's going on around them, and sometimes drowsy. They can also become incontinent, because they don't realise they need the toilet, and stop eating and drinking. Sometimes a person with delirium can be disoriented in time or place, which is not always obvious unless they are asked directly.

Delirium is a common response to infections and other new illnesses, especially in older people, and is not the same as ongoing brain problems like dementia or Alzheimer's disease. It can be triggered by things like dehydration, a disrupted balance of salts (electrolytes) in the body, low oxygen levels and some drugs such as painkillers and steroids.

When does delirium happen in COVID-19?

Delirium tends to come on a few days into the illness, and usually lasts for a day or two, but may go on for longer.

How common is delirium in COVID-19?

The chances of having delirium with COVID-19 vary by age. In our app data, only around 6% of children who are ill with COVID-19 have delirium, while around 15% of adults aged 16-65 and nearly 20% of those over 65 report it.

Delirium is the only symptom of the disease for around one in five older patients who are hospitalised with COVID-19, so it's very important to keep an eye out for the signs in older relatives or people you are caring for.

What other symptoms of COVID-19 are common alongside delirium?

Delirium is highly likely to occur alongside fatigue, headache and loss of smell (anosmia). It often comes together with symptoms like a sore throat, skipped meals, fever, unusual muscle pains, a persistent cough and dizziness.

What should I do if I have delirium and think it might be COVID-19?

If you or someone you live with or care for becomes suddenly confused you should get medical help, especially if they are frail and elderly. You should also:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.

Shortness of breath

What is shortness of breath like in COVID-19?

COVID-related shortness of breath makes you feel like you need to catch your breath when doing simple tasks such as getting up, walking to a different room or using the bathroom.

You should also look out for having to take extra breaths mid-sentence, or feeling breathless during a normal conversation.

People with shortness of breath can become hypoxic (not getting enough oxygen) without knowing it, because they don't necessarily feel out of breath when at rest.

If you find yourself feeling short of breath you can buy or ask your GP for a pulse oximeter to measure and monitor your blood oxygen levels.

When does shortness of breath happen in COVID-19?

Shortness of breath usually occurs a week after initial infection. It's associated with having a more serious case of COVID-19 and needing hospital support. For those who go to hospital, their shortness of breath tends to get worse before improving.

The older you are, the longer you might experience shortness of breath and the longer it takes for you to get over it.

For those who get it, children have shortness of breath for an average of two days but it can last up to five.

Adults aged 16-35 have shortness of breath for three days on average but it can last up to eight, while people over 35 years old tend to have shortness of breath for five days but can take 12-13 days for the symptom to clear. It's also a symptom experienced by people with long COVID.

How common is shortness of breath in COVID-19?

Feeling short of breath isn't a common symptom of COVID-19. It's slightly more common in 18-65 years olds, with 7 in 20 reporting a shortness of breath compared to roughly 2 in 20 for children and roughly 5 in 20 over-65s.

People experiencing shortness of breath tend to have multiple other COVID-19 symptoms, be older and frailer, and more likely to be overweight and have pre-existing conditions such as diabetes or lung disease.

Only 2% of people who were ill with COVID-19 reported a shortness of breath as their only symptom.

What other symptoms of COVID-19 are common alongside shortness of breath?

If you have shortness of breath associated with COVID-19, it's very likely you'll also experience five to seven other symptoms alongside it. These other symptoms can include fatigue, headache, loss of smell (anosmia), persistent cough, unusual muscle pains and chest pains.

It's important to be aware that when clustered with a lot of other symptoms, particularly diarrhoea and abdominal pains, shortness of breath was associated with a higher risk of needing hospital support, especially in older people or those needing support usually.

What should I do if I have shortness of breath and think it might be COVID-19?

You should get urgent medical help if you have breathing problems, are suddenly confused, or your lips or face are turning blue. If you are experiencing shortness of breath when doing small tasks, buy or ask your GP for a pulse oximeter to monitor your blood oxygen levels at home. If you have shortness of breath alongside other symptoms of COVID-19, especially abdominal pains and diarrhoea, you should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.

Having an underlying lung condition can increase the risk from COVID-19.

Chest pain

What are chest pains like in COVID-19?

A small proportion of people with COVID-19 can experience significant chest pains, which are mostly brought on by breathing deeply, coughing or sneezing. This is likely caused by the virus directly affecting their muscles and lungs.

When do chest pains happen in COVID-19?

It's not clear exactly when chest pains start to appear in COVID-19. They can come on at any time during an infection and have also been reported to occur intermittently in people with long COVID or post-COVID syndrome.

On average, chest pains last three days in all age groups, but can take longer to pass the older you are. For example, COVID-related chest pain lasts up to four days in children or seven to eight days in adults.

If you know you have COVID-19 and experience new severe chest pain during the course of your illness you need to get urgent medical help. This is because secondary events such as pulmonary embolism and heart attack have been reported as a consequence of COVID-19 and need urgent treatment.

How common are chest pains in COVID-19?

Chest pains aren't a common symptom of COVID-19 but are more common in adults (28%) than children (10%).

Only 2% of people who were ill with COVID-19 reported chest pains as their only symptom.

What other symptoms of COVID-19 are common alongside chest pains?

Chest pains are most likely to occur alongside other symptoms. It's important to be aware that when clustered with a lot of other symptoms, particularly shortness of breath, abdominal pains and confusion, chest pains were associated with a higher risk of needing hospital support, especially in older people.

In milder cases, chest pains usually appear alongside headaches and fatigue.

What should I do if I have chest pains and think it might be COVID-19?

Never ignore chest pains. Dial 999 if you have pain or pressure in the chest that makes it hard for you to breathe, move, speak or perform basic activities such as walking up the stairs.

Even if you're not worried, call 111 to make sure it's nothing serious. If you have chest pains alongside other COVID-19 symptoms, you should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.

Muscle pain

What are muscle pains like in COVID-19?

People using the app have reported feeling muscle aches and pains, particularly in their shoulders or legs.

COVID-related muscle pains can range from being mild to quite debilitating, especially when they occur alongside fatigue. For some people, this muscle pain stops them from doing day-to-day tasks.

It's important to remember that new muscle pains can appear for lots of reasons. For example, many of us have been working from home using a temporary desk and screen setups that may be far from ideal.

So although people with COVID-19 sometimes experience unusual muscle pains, most people with new aches and pains will not have COVID-19.

When do muscle pains happen in COVID-19?

Unusual muscle pains can be an early symptom of COVID-19, often appearing at the very start of the illness.

Usually, it lasts for an average of two to three days but can take longer to go away the older you are. This is commonly up to four days for children, five days for adults aged 16-35, seven days for adults aged 35-65 and up to eight days for adults over 65.

Unfortunately, COVID-related muscle pains can sometimes last much longer, and are commonly reported in people with long COVID or post-COVID syndrome.

How common are muscle pains in COVID-19?

One out of three people who are ill with COVID-19 will have unusual muscle pains. It's more common in adults aged 16-65 (41%) than children (15%) or those over the age of 65 (36%).

Only 2% of people who were ill with COVID-19 reported muscle pains as their only symptom.

What other symptoms of COVID-19 are common alongside muscle pains?

Unusual muscle pains are most likely to occur alongside other symptoms. Across all ages, most of the time muscle pains happen alongside fatigue and sometimes with fever, feeling dizzy or light-headed and skipping meals.

Other symptoms common alongside unusual muscle pains depend on age. For example, getting headaches with muscle pains is very common in people under 65. Loss of smell (anosmia) also tends to occur alongside unusual muscle pains in adults, but is less common in adults aged over 65.

What should I do if I have muscle pains and think it might be COVID-19?

If you've got new, unusual muscle pains it could be COVID-19, especially if you also have a headache and fatigue. You should:

- Follow the NHS guidelines and self-isolate at home to help protect the people around you and the wider community.

Having unusual muscle pains can be very debilitating. It's important to listen to your body and not push yourself into doing more than you're able to.

Make sure you give yourself enough time and rest to get better if your muscle pains are caused by COVID-19, which can take a week or more to go away.

Runny nose

Is a runny nose a symptom of COVID-19?

April 23, 2021

This article has not been updated recently

COVID-19 is a complex disease with many different symptoms.

While most of us are aware of the three 'classic' signs of cough, fever and loss of smell (anosmia), thanks to millions of contributors

In the early days of the pandemic, it was thought that having a runny nose was *not* a symptom of COVID-19, and was much more likely to be a sign of a regular cold.

A runny nose could be a symptom of COVID-19

During the recent winter wave, we noticed that a runny nose was the second most commonly reported symptom in the app after headaches.

And nearly 60% of people who tested positive for COVID-19 with loss of smell also reported having a runny nose.

So while we can say that many people with COVID-19 have a runny nose, it's more difficult to say that having a runny nose is a definitive symptom of COVID-19 since they are so common, especially in the winter.

While symptoms like cough, fever and loss of smell are common in those who test positive for COVID-19, we found that having a runny nose and sneezing was only very slightly more common in people who tested positive for COVID-19 than those who tested negative.

The likelihood that your runny nose is caused by COVID-19 is influenced by how prevalent the disease is at the time.

Our data shows that when rates of COVID-19 are high, the chances that a runny nose is due to coronavirus infection is high. But when rates of COVID-19 are low, it's less likely to be a symptom and more likely to be due to another cause such as a cold or allergy.

Even so, it's always best to be on the safe side by self-isolating and getting tested if you develop a runny nose, especially in combination with any other key symptoms of COVID-19.

Being alert to all the symptoms of COVID-19 and getting tested promptly will protect your loved ones and the wider community, helping to spot and contain new cases and bringing the pandemic to an end.