

# How to Handle Fever, Cough, and Body Aches If You Have Mild COVID-19

Use over-the-counter meds and DIY strategies the right way and know when you need medical attention

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Though some people with COVID-19 experience severe illness that requires hospitalization, “the vast majority will have mild symptoms that can be managed safely and effectively at home with simple supportive measures,” says Michael Hochman, M.D., director of the Gehr Family Center for Health Systems Science and Innovation at Keck Medicine of USC.

Still, even “mild” illness can leave you feeling awful, with fever, cough, sore throat, achiness, and shortness of breath, in addition to fatigue. Some people with COVID-19 have also reported experiencing gastrointestinal symptoms too, including nausea or vomiting and diarrhea.

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If you suspect you have COVID-19 and  
are experiencing these symptoms,  
you'll want to quarantine yourself,

rest, drink fluids, and keep an eye out for worsening fever and shortness of breath.

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And you might want to use over-the-counter medications to help reduce your discomfort.

But which medicine cabinet products should you use and which

should you avoid? There have been some confusing and conflicting reports. For instance, the World Health Organization initially recommended that people with COVID-19 symptoms avoid ibuprofen (Advil, Motrin, and others) based on a letter in The Lancet Respiratory Medicine in March that

hypothesized that the medication might worsen the effects of the virus.

That concern led many people to stock up on acetaminophen (Tylenol and others) instead, leading to shortages of that medication in many places.

But the WHO has since reversed that advice, and experts now generally say most people can use either acetaminophen or ibuprofen to treat fevers related to COVID-19.

Here's what you need to know about how to manage COVID-19 symptoms at home, including which OTC medicines work best—and how to use them safely.

## Ease Fever and Body Aches

Several types of OTC medicine can help to reduce the fever, headaches, and body aches that may come with COVID-19. That includes acetaminophen and ibuprofen, as well as other drugs related to ibuprofen, called nonsteroidal anti-inflammatory

drugs (NSAIDs), such as naproxen (Aleve and others) and aspirin.

“Acetaminophen and NSAIDs are equally effective at treating fever and mild aches,” says Dima Qato, Pharm.D., an associate professor of pharmacy at the University of Illinois at Chicago.

Some news reports, based on the March letter in *The Lancet Respiratory Medicine* and comments from France’s health minister, suggested that ibuprofen and other NSAIDs could worsen respiratory symptoms for people who were already sick with COVID-19. The letter noted that NSAIDs may increase levels of a substance called angiotensin-converting enzyme 2, which could, in theory, exacerbate symptoms.

But the WHO and the Food and Drug Administration currently say there’s no proof that this is true. “There’s not enough evidence right now to recommend against the use of NSAIDs,” Qato says.

According to the FDA website, "at this time, FDA is not aware of scientific evidence connecting the use of NSAIDs, like ibuprofen, with worsening COVID-19 symptoms." The agency did say it's looking into the issue further and recommended that consumers read the Drug Facts label on all OTC drugs fully before use.

Opting for acetaminophen over an NSAID may be a reasonable first step for most people with COVID-19 for another reason, especially older adults. That's because they may be more prone to some of the side effects associated with NSAIDs, says Hochman. These include an increased risk of bleeding and ulcers in the stomach.

NSAIDs may also raise blood pressure, and some nonaspirin NSAIDs have been linked to an increased risk of heart attack and stroke for this reason. The American Heart Association says that people with heart concerns should limit or avoid NSAIDs, especially if their blood pressure is

uncontrolled.

Acetaminophen is safe for most people, although those with liver problems should not take it, says Qato. If you opt for acetaminophen, read the packaging for the recommended dose.

The FDA recommends that adults take no more than 4,000 mg per day of acetaminophen, though many physicians, including Hochman, counsel patients not to exceed 3,000 mg per day when possible to further reduce any potential risk of liver damage.

Shortages seem most common for Tylenol itself; generic versions may be more readily available.

If you're not getting enough relief from acetaminophen alone, it's fine for most people to alternate doses of acetaminophen with an NSAID, but check with your doctor before doing so, especially if you have a history of heart issues or ulcers.

To do this, Hochman recommends

taking an NSAID at the halfway point between doses of acetaminophen.

“That’s when the benefits of acetaminophen are most likely to wear off,” he says. Make sure to stick with the recommended dosage for each medication, following the instructions on the label.

And always check with your doctor if you’re unsure which medicine to use.

Keep up with nonmedication strategies, too. Hydration is key if you have a fever, notes Robert McLean, M.D., a primary care physician in New Haven, Conn., and president of the American College of Physicians.

“People don’t realize how dehydrated they can get when they’re running a fever. If you’re dehydrated, you’ll feel even worse,” says McLean, who adds that prolonged dehydration also can damage the kidneys.

Make sure you’re drinking at least five to six large glasses (100 to 120 ounces) of water each day if you have a fever, McLean recommends.



Sometimes placing a cool cloth or wash towel on your forehead or the back of your neck can feel soothing and help ease fever. Taking a cool shower or sponge bath can help too, McLean says.

## Coping With a Cough

If your cough won't quit, you're probably tempted to turn to an OTC cough medicine. But a 2014 review by the Cochrane Collaboration found that there's not much evidence that these are effective.

In fact, it's better to first try nondrug solutions, Hochman says. Take a warm shower with steam, drink a warm cup of herbal tea, or consume a couple of spoonfuls of honey, he recommends.

Those strategies may help to calm a sore, inflamed throat, a less common symptom of COVID-19 but one that can trigger more coughing. And some research suggests that honey may help

ease coughing a bit, at least in children.

“Throat lozenges may also be comforting to patients experiencing sore throats,” says Mary Ann Yehl, D.O., medical director for ambulatory quality at AtlantiCare Regional Medical Center in New Jersey.

If you decide to take an OTC cough medicine because, say, your cough is so frequent you simply can't rest,



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ingredient is dextromethorphan (Delsym, Robitussin, and more), recommends Barbara Young, Pharm.D., editor of patient medication information for the American Society of Health-System Pharmacists. That might help suppress the dry cough that's typical with COVID-19.

And note that the FDA recommends against the use of OTC cough medicines for children younger than 2.

# Managing Nausea and Stomach Upset

Several reports have suggested that gastrointestinal distress may be fairly common with COVID-19 and that these symptoms can sometimes show up before a fever or cough. In late April the CDC reported that about a quarter of patients hospitalized with COVID-19 in March reported diarrhea, nausea, or vomiting at hospital admission. An earlier study from China suggested that upward of one-third of COVID-19 patients may experience diarrhea.

Some OTC medicines can help ease nausea, including aluminum and magnesium antacids such as Mylanta and Maalox. Others, such as loperamide (Imodium), can lessen diarrhea. Some meds, such as bismuth subsalicylate (Pepto-Bismol), can do both.

Such meds are generally safe to use following the dosing directions on the product packaging, though loperamide can cause some troublesome side

effects, including abdominal discomfort and even drowsiness or dizziness, particularly in the elderly, says Hochman.

Still, these remedies probably won't completely stop diarrhea or vomiting. And that may be a good thing, according to Hochman. "For some bacterial GI infections, purging is part of the body's strategy to rid itself of the infection. This may be true for viral GI infections—including COVID," he says.

If you're feeling too sick to eat solid foods, try soups, broths, juices, or drinks such as Pedialyte, which can help replace electrolytes you may lose. As with fever, vomiting or diarrhea can also lead to dehydration. The amount and color of your urine can be a good barometer of hydration, says Hochman. "Dark urine and low quantities of urine indicate you are falling behind," he says.

A bland diet can also help to ease nausea and diarrhea. For patients recovering from stomach upset,

Hochman recommends the BRAT diet (bananas, rice, applesauce, and toast). These low-fiber, bland, starchy foods can help to make stools firmer and replace nutrients the body has lost.

## What About Multi-Symptom Meds?

Combination medicines that contain two or more active ingredients with different actions seem like a convenient way to treat multiple symptoms—for instance cough plus congestion or fever along with a runny nose.

Such products are generally safe for young, healthy people, says Hochman. But all medications have potential side effects, so it's better not to take a drug for symptoms you don't have.

For instance, many OTC cough medicines contain both the suppressant dextromethorphan and the expectorant guaifenesin. You probably don't need the latter, says

Qato. Expectorants are used to break up mucus congestion in the airways, not typical in COVID-19, which usually comes with a dry cough.

Some multi-symptom relief combos also have diphenhydramine, an antihistamine that causes drowsiness, so it may be in “nighttime” formulas. Others may contain pseudoephedrine, a decongestant. Those ingredients can cause substantial side effects, particularly in older adults. Diphenhydramine can cause confusion, dizziness, and drops in blood pressure, and pseudoephedrine may worsen high blood pressure and glaucoma.

It's wiser to use a separate medication for each symptom so that you don't accidentally take too much of any one ingredient, Hochman says. For instance, many multi-symptom remedies contain acetaminophen, and if you're using acetaminophen separately, it can be easy to get more than is recommended. And that can be toxic to the liver.


When it comes to multi-symptom meds, “older adults and people with underlying medical conditions—such as high blood pressure or diabetes—should be really cautious with these products,” Hochman says.

## If Symptoms Get Worse

If milder symptoms aren’t improving after several days, you feel like they may be worsening, or you’re experiencing shortness of breath, call your doctor, McLean says. Nausea or vomiting to the point you’re unable to keep fluids down is another good reason to call the doctor, Hochman adds. Many doctors’ offices are offering alternative options for visits via phone or video.

A lot of states, hospital systems, and local health departments also have COVID-19 hotlines set up that can help you decide whether you need to be tested for the coronavirus or should go to a hospital for treatment. “Calling

first can help you avoid a needless trip to the ER,” McLean says.

And know when you need to seek emergency help.  “If you are experiencing trouble breathing, pain or pressure in the chest, new confusion or inability to arouse, or bluish lips or face, call 911 immediately for medical attention,” Yehl says.