



COVID-19 MYTHS

UNT SYSTEM COLLEGE OF PHARMACY I COMMUNITY RESOURCES

MYTH 1: If I don't have a fever, I don't have COVID-19.

A fever is roughly 100.4° F sustained over an hour, or greater than 100.9° F. Patients who are found to have SARS-CoV-2, which causes <u>coronavirus disease 2019</u> (COVID-19) can have different symptoms. Some studies have shown that only 44 - 65% of patients initially have a fever, though it may develop later in the infection.

Conclusion:



MYTH 2: I should stop taking my blood pressure medication to keep from getting COVID-19?

There has been a theoretical debate about the role of a specific class of high blood pressure medication called an ACE inhibitor. There is no data indicating help or harm of this class of medication in the setting of COVID-19. However, a recent study found a possible association between patients on ACE inhibitors and a lower risk of death from COVID-19. In addition, there is clear harm possible if the medication is discontinued without physician supervision. The American Heart Association recommends that patients do NOT discontinue their chronic ACE inhibitor medication.

Conclusion: Not enough data, but don't

stop your medications!

MYTH 3: I should avoid NSAIDS like Ibuprofen if I think I have COVID-19

The FDA has announced they are not aware of any scientific evidence supporting the need to avoid non-steroidal anti- inflammatory drugs (NSAIDs) such as ibuprofen. The WHO originally advised avoiding the use of NSAIDs until they could investigate. They have since reversed their decision and agree with the FDA that there is not enough scientific literature to support that NSAIDs should be avoided. If you use an NSAID, be aware that it can mask symptoms of an infection such as a fever.

Conclusion: Not enough data

MYTH 4: Everyone should take hydroxychloroquine for COVID-19. What do you have to lose?

Hydroxychloroquine has a long list of possible side effects and has limited science to support that it works against SARS-CoV-2. This medication should only be taken in the setting of a clinical trial for COVID-19 to ensure appropriate monitoring for side effects such as life threatening abnormal heart rhythms and irreversible vision loss. Do not start this medication without a discussion of side effects with your healthcare provider.

Conclusion:



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