COVID-19 Therapeutics Myths and Facts

How to dispel misinformation about treatments

**MYTH:**
I don’t need medication for a mild-to-moderate illness.

**PROVIDER ANSWER:**
Lots of us are used to waiting out similar cold and flu symptoms to see if they get “bad enough” to need treatment. COVID-19 is different: lots of us are still at risk of having our mild or moderate symptoms develop into something more serious. The treatments can keep you out of the hospital and prevent you from dying, and early evidence shows they may even reduce your chance of developing long COVID.

**MYTH:**
I’m not high risk.

**PROVIDER ANSWER:**
Most of us don’t think of ourselves as “high risk.” However, there are many factors that can make even very healthy people more susceptible to becoming very ill from COVID-19. The truth is: the majority of adults fit into one of these categories. They include:

1. Anyone over age of 50.
2. People living with diabetes, mental conditions (anxiety, depression, ADHD, and more), chronic lung disease (including asthma), chronic kidney disease, and cardiovascular disease.
3. People who are overweight, physically inactive, or who smoke.
4. People who are negatively affected by social determinants of health, such as race, ethnicity, socio-economic status, or limited access to healthcare.
5. People who are unvaccinated or not up-to-date with vaccinations.

Scan the QR code to read more about COVID-19 treatment resources.

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MYTH: Treatments have serious side effects.

PROVIDER ANSWER:
Of course, we all worry about side effects! Fortunately, most people have little-to-no side effects. In clinical studies of Paxlovid, side effects occurred for less than 10% of patients. The most common side effect of Paxlovid is an unpleasant taste in the mouth, which occurred for 6% of people; smaller percentages of people have experienced diarrhea (3%), hypertension (1%), and/or muscle aches (1%).

Abdominal pain and general malaise have also been noted outside of clinical studies. Some other medications may need to be adjusted while you are taking Paxlovid. If you cannot take Paxlovid for any reason, you may be offered molnupiravir (Lagevrio) instead. Molnupiravir has very few side effects, but you cannot take it if you are pregnant.

MYTH: Rebound caused by treatments is common and can be dangerous.

PROVIDER ANSWER:
Rebound has been in the news a lot! The thing that most people don’t realize is that viral rebound happens in people who don’t take treatments as well as those who do, and less than 1 in 5 people experience rebound. It does happen somewhat more frequently among people who take Paxlovid. For some people, taking Paxlovid will help you test negative sooner. But for some, the symptoms may return. The good news is that if your symptoms do return, they tend to be mild and do not require repeating the treatment.

HELPFUL RESOURCES FOR PROVIDERS:
- COVID-19 Therapeutics Decision Aid (hhs.gov)
- Underlying Medical Conditions Associated with Risk for Severe COVID-19 | CDC
- Information Sheet: Paxlovid Eligibility and Effectiveness (hhs.gov)
- Have questions? Email COVIDRxProviders@cdph.ca.gov