

GENITAL HERPES





HERPES GENITAL

What causes genital herpes?



Page 4

Is genital herpes a common problem?



Page 5

How does genital herpes spread?



Page 5

What will I see or feel if I have genital herpes?



Page 5

What will start an outbreak?



Page 6

How often does genital herpes recur?

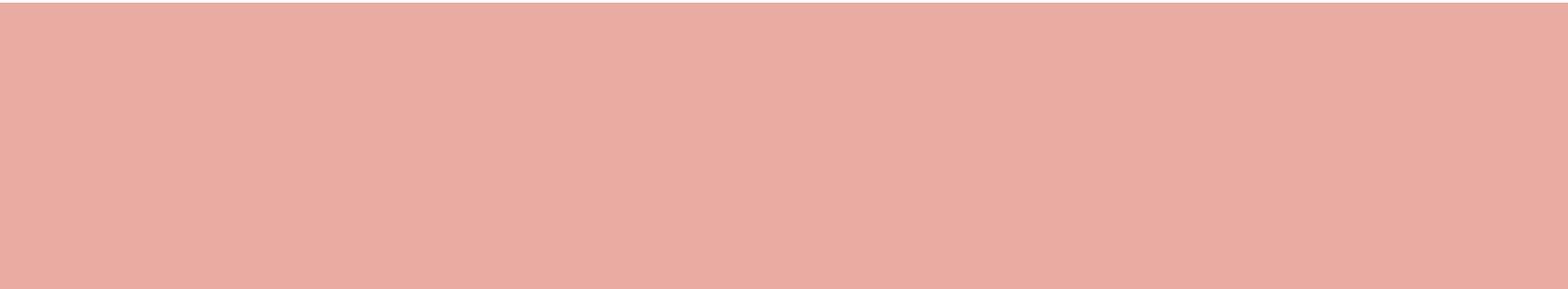


Page 6

If I have oral herpes simplex or “cold sores”, will I be susceptible to genital infection, and if so will it be any worse?



Page 6





HERPES GENITAL

How is genital herpes diagnosed?



Page 7

Who is at risk for genital herpes?



Page 7

Who is at risk for more frequent recurrences of genital herpes?



Page 8

How is genital herpes treated?



Page 8

What should I tell my new partner if I have genital herpes?



Page 8

What if someone with genital herpes is pregnant? What will happen to the baby?



Page 9

How can I protect myself from herpes?



Page 9

What can I do?



Page 10



WHAT CAUSES GENITAL HERPES?

Genital herpes is an infection caused by herpes simplex viruses. Both HSV- 1 and HSV-2 contribute to the prevalence of genital herpes, although HSV-1 is more often associated with oral-oral transmission of herpes on the mouth/lip (“cold sores”) and HSV-2 is almost entirely sexually transmitted through genital skin-to-skin contact. HSV-2 is the most frequent cause of genital herpes.

WHAT CAUSES GENITAL HERPES?

Genital herpes infection is common in the United States. CDC estimates that approximately 50 million persons in the United States are infected with genital HSV-2. It is one of the most common sexually transmitted infections worldwide. The global prevalence of genital herpes is increasing with approximately 140 million people aged 15–49 years infected with genital HSV-1 infection and an estimated 417 million infected with HSV-2 internationally.

Genital herpes is an infection caused by the herpes simplex viruses.

IS GENITAL HERPES A COMMON PROBLEM?

It is one of the most common sexually transmitted infections worldwide. In North America, 16% of sexually active adults are infected with HSV-2; in parts of Africa, up to 70% of women & 45% of men are infected. Generally, it is more common in women (21%) than in men (11%).



HOW DOES GENITAL HERPES SPREAD?

It is spread through contact with an infected partner. Up to 80% of those infected are unaware of their infection, as they usually have few symptoms. They may feel genital irritation, but may

blame it on soap, toilet paper, sanitary toilet paper, sanitary napkins, lack of lubrication, vaginal dryness, shaving, thong underwear, tight jeans, urinary tract infection, or hemorrhoids.

WHAT WILL I SEE OR FEEL IF I HAVE GENITAL HERPES?

This will depend on whether this is your first outbreak, or if it is a recurrent outbreak. First outbreaks are referred to as “primary” outbreaks. First, groups of blisters of varying sizes appear on the genital skin. Over a few days, these blisters break open, leaving small, raw ulcers that can be very painful, often with severe burning, especially during urination. The glands in your groin may become swollen. You may have a fever with muscle aches, headaches, and flu-like symptoms. These symptoms usually resolve in a week or so.

Symptoms of recurrent infection are milder and do not last as long. First, there is tingling and irritation, usually near the site of the original infection. There often are just a few blisters that break down into sore ulcers. This episode lasts just a few days to one week. There may be a low-grade fever or “flu-like” symptoms. Many of these recurrent outbreaks are minor, non-specific and are often mistaken for the various problems listed above. It is the repeated pattern that is the best clue to the diagnosis.

WHAT WILL START AN OUTBREAK?

This varies from person to person. The most common factors that may trigger herpes are:

- Stress and fatigue
- Illness (especially a viral infection)
- Menstrual period (and perhaps the rubbing from pads and tampons)
- Surgery (a different kind of stress)
- Irritation in the vulvar area

HOW OFTEN DOES GENITAL HERPES RECUR?

HSV-2 recurs in 90% of people in the first year after primary infection. Patients can have 5-8 recurrences or even more within the first year. With time, these recurrences become less frequent. HSV-1 will recur about 60% of the time, but less frequently as time passes.

IF I HAVE ORAL HERPES SIMPLEX OR “COLD SORES”, WILL I BE SUSCEPTIBLE TO GENITAL INFECTION, AND IF SO WILL IT BE ANY WORSE?

If you have a history of recurrent cold sores due to HSV-1, you will have milder symptoms and signs of HSV-2 in the genital area. It does not stop you from getting HSV-2.

HOW IS GENITAL HERPES DIAGNOSED?

Genital herpes is suspected when your health care-provider recognizes the typical changes on the skin. Several laboratory tests can confirm the diagnosis. If the lesion is new (in the first 1-2 days), a swab can be taken from your lesion to be tested for the virus (a viral culture or a nucleic acid amplification test). Blood tests can also confirm your exposure to the virus. This is helpful when you see your health care-provider after the lesions have healed. This is called a type specific serology for HSV. This test is useful when there is a suspicion for HSV but without a visible outbreak, when the lesions are not typical or even obvious, if you are planning to get pregnant, or if you have a new sexual partner.



WHO IS AT RISK FOR GENITAL HERPES?

Anyone who is sexually active is at risk. Women are at higher risk than men of contracting HSV-2 from an unprotected, infected sexual partner.

WHO IS AT RISK FOR MORE FREQUENT RECURRENCES OF GENITAL HERPES?

Those who are immuno-compromised (weakened immune system), particularly those with HIV disease, active cancer, or on special medicines that suppress the immune system, are at higher risk of frequent recurrences.

HOW IS GENITAL HERPES TREATED?

There is no cure for genital herpes, but it can be controlled or minimized. This is done with the use of anti-viral drugs, such as acyclovir, valacyclovir, and famciclovir. These are oral (taken by mouth) medications. They can help the sores heal faster, and if taken daily, can decrease recurrences.

This suppressive approach (to stop recurrences) is recommended for those with frequent outbreaks (more than six outbreaks a year), painful recurrences, and to prevent transmission to an uninfected sexual partner. This should be discussed with your healthcare provider. Topical therapies (ie. those that are applied to the skin) are expensive, and of very limited value.

WHAT SHOULD I TELL MY NEW PARTNER IF I HAVE GENITAL HERPES?

Honesty is the best practice. If the new partner is told and preventive measures are taken, then the partner can be protected. This can be a difficult discussion but an important one.

If the partner is unsure as to whether he or she has had herpes simplex, a blood test can be done and advice given through the care-provider.

WHAT IF SOMEONE WITH GENITAL HERPES IS PREGNANT? WHAT WILL HAPPEN TO THE BABY?

The greatest risk to the baby is when a PRIMARY infection occurs during pregnancy. Even then, the outcome depends on when in pregnancy the primary infection is diagnosed. It's important that the health care provider is notified as soon as the pregnant woman realizes that she may have an infection. In rare circumstances, a herpes infection acquired in pregnancy can lead to a miscarriage, prematurity, or severe infection in the baby. If an infection occurs near or at delivery, the health care provider will probably suggest a cesarean section. Daily oral antiviral medications can decrease the likelihood of an outbreak, and therefore transmission to the baby, when started at the 36 weeks of pregnancy. If you or your partner have a history of genital herpes infection, please discuss this with your health care provider when you start your pregnancy care.

HOW CAN I PROTECT MYSELF FROM HERPES?

Do not have sexual contact with someone with open sores around their mouth, or on his or her sexual organs.

1 Use latex (or non lambskin) condoms for sexual activity. Spermicide with or without a condom is not recommended, since the spermicide can cause vaginal irritation and fissures, which can increase the risk of vaginal transmission of infections.

2 Taking anti-viral medication can reduce but does not eliminate the risk of transmission from person to person.

WHAT CAN I DO?

Most people feel angry, frustrated, and scared when they find out that they have genital herpes. You are not alone. You are not at fault. It is usually passed from person to person unknowingly. People with genital herpes can live a normal life. By talking to a health care provider, you can learn about the infection's natural history and the treatment options.

Learn how to manage the virus. Keep a diary of the dietary and lifestyle factors that trigger an outbreak for you, and avoid these where possible. Take care of your overall health by eating a healthy diet, exercising regularly, getting plenty of sleep, and managing your stress.

Make sure you have a strong support network around you. If you are not comfortable discussing your situation with someone close to you, speak to your doctor, a counselor, or join a herpes support group. Remember, overcoming the emotional effects of genital herpes is often much more challenging than managing the physical symptoms, so take the time to learn about the condition and express your feelings and emotions along the way.

There are very good herpes resources at



<https://ashastd.org>

*International Society for the Study of Vulvovaginal Disease
Patient Information Committee
Revised 2021*