

Genital Herpes

Genital herpes is usually a sexually transmitted infection. Many people who are infected with this virus never have symptoms, but can still pass on the infection to others. If symptoms occur, they can range from a mild soreness to painful blisters on the genitals (vulva or penis) and surrounding area. A first episode of symptoms can last 2-3 weeks, but may be shorter. Recurrent episodes of symptoms then develop in some cases from time to time, but are usually less severe than the first episode. Antiviral medication can ease symptoms when they develop. Some people who have frequent recurrences of symptoms take antiviral medication each day to prevent symptoms from developing.

What is genital herpes?

Genital herpes is an infection of the genitals (penis in men, vulva and vagina in women) and surrounding area of skin. It is caused by the herpes simplex virus. The buttocks and anus may also be affected. There are two types of herpes simplex virus:

- Type 1 herpes simplex virus is the usual cause of cold sores around the mouth. It also causes up to half of cases of genital herpes.
- Type 2 herpes simplex virus usually only causes genital herpes. It can sometimes cause cold sores.

How do herpes simplex infections occur?

The herpes simplex virus is passed on by skin-to-skin contact. The virus can pass through the moist skin that lines the mouth, genitals, anus (and sometimes the eye). The skin of the rest of the body is less susceptible to herpes infection. Therefore, herpes simplex infection of other parts of the body is rare if the skin is not damaged or cut.

The first time you are infected is called the primary infection. This may, or may not, cause symptoms. Following a primary infection, the virus is not cleared from the body but lies inactive (dormant) in a nearby nerve. In some people the virus 'activates' from time to time, and travels down the nerve to the nearby skin. This causes recurrent symptoms of genital herpes if the primary infection was in the genitals, or recurrent cold sores if the primary infection was around the mouth.

The rest of this leaflet deals just with genital herpes. There is a separate leaflet that deals with herpes simplex infection around the mouth ('cold sores').

Who gets genital herpes?

Many people in the UK are infected with the herpes simplex virus in the genital area. However, about 4 in 5 infected people never have any symptoms, or only have one short bout of very mild symptoms which is not recognized as genital herpes. So, many people are not aware that they are infected.

However, if you are infected, you can still pass the virus on to others even if you have not had symptoms (see below). It is estimated that in at least half of people who develop genital herpes, the virus came from a sexual partner who did not know that they were infected with the virus.

What are the symptoms of genital herpes?

A first episode of symptoms

At first you may feel generally unwell with a mild fever, and aches and pains. Groups of small,

painful blisters then appear around your genitals and/or anus. They tend to erupt in crops over 1-2 weeks. The blisters turn to shallow, sore ulcers. The glands in your groin may swell and feel like lumps at the top of your legs. It is common to have pain when you pass urine, especially in women. A vaginal discharge may occur in women. The ulcers and blisters last up to 10-14 days, and then gradually heal and go without scarring.

Sometimes less typical symptoms occur. For example, you may just have a small raw area, one or two small ulcers, or just an area of irritation with nothing to see. Sometimes symptoms last just a few days.

Recurring episodes of symptoms

After the first episode of symptoms, further episodes of symptoms occur in some cases from time to time. These are called 'recurrences'. It is not clear why the dormant virus 'erupts' from time to time. Recurrences tend to be less severe and shorter than the first episode. It is more usual to have 3-5 days of symptoms with a recurrence, unlike the 2-3 weeks of symptoms that may occur during the first episode. A tingling or itch in your genital area for 12-24 hours may indicate a recurrence is starting. The time period between recurrences is variable.

Recurrences tend to become less frequent over time. In people who have recurrences, their frequency can vary greatly. Some people have six or more a year. For others it is less frequent than this. Many people do not have recurrences at all after a first episode of symptoms.

It is common not to get symptoms

Most people (about 4 in 5 infected people) never develop any symptoms when they are infected with the virus. (Or, they only have a short bout of very mild symptoms which is not recognized as genital herpes. For example, just a slight area of itch or a small red area which soon goes.) The virus stays inactive (dormant) in the root of a nerve that supplies the genitals, but never causes recurrent episodes of symptoms. However, even people who do not get symptoms may, on occasions, have virus in their genital area and therefore be infectious to their sexual partners.

Note: sometimes a first episode of symptoms appears months or years after being first infected. This is why a first episode of symptoms can occur during a current faithful sexual relationship. You may have been infected months or years ago from a previous sexual partner who did not realize that they were infected.

It is not clear why some infected people develop symptoms, some don't, and some have a first episode of symptoms months or years after first being infected. It may be something to do with the way the immune system reacts to the virus in different people.

What are the possible complications of genital herpes?

In a small number of cases the infection spreads to other areas of skin on the body. Occasionally, the blisters become infected by bacteria (other germs) to cause a spreading skin infection. Rarely, the herpes virus can cause encephalitis or meningitis (infection of the brain or the tissue surrounding the brain).

In some cases, people have the wrong idea about herpes simplex. Usually, this will be due to wrong ideas about the infection, thinking it is far worse than it really is. Good counselling is thought to help in these cases.

Note: genital herpes does not damage the uterus (womb) or cause infertility. Nor does it cause cancer of the cervix.

Do I need any tests?

Yes. A blister can be swabbed by a doctor or nurse to obtain a small sample to send to the laboratory. This can confirm the infection is due to the herpes simplex virus. Tests to look for other infections may also be done at the same time.

What is the treatment for genital herpes?

General measures that may help to ease symptoms when they occur

- Painkillers such as paracetamol may help to ease pain.
- If it is painful when you pass urine, it is often less painful if you pass urine whilst sitting in a warm bath.
- Anaesthetic ointment that you can buy at pharmacies (such as lidocaine) may relieve itching or pain. Some people also apply ointment about five minutes before passing urine if this is painful. Note: some people are sensitive ('allergic') to anaesthetic ointments, and the ointment sometimes makes skin symptoms worse in such people.
- An ice pack (ice wrapped in a tea towel) placed over the sores for 5-10 minutes may be soothing. Do not put ice directly onto skin as this may cause an 'ice burn'.
- Have lots to drink. This may reduce the chance of difficulty in passing urine which some people have due to pain.
- Do not use scented soaps, bubble bath, etc, as these may cause irritation. Gentle cleaning of the sores with just cotton wool and water is best. Gentle drying with a hair dryer on its lowest setting may be more comfortable than with a towel.
- Some people have found that placing cold, used tea-bags against the sores is soothing.
- When you resume sexual activity after an episode has cleared, it is a good idea to use a lubricant as some people find the friction of having sex may trigger a recurrence.

Antiviral medication

Antiviral medication does not clear the virus from the body. It works by stopping the virus from multiplying. Antiviral medicines include: aciclovir, famciclovir, and valaciclovir. Antiviral medication is most useful for a first episode of symptoms. It reduces the severity and duration of symptoms if it is started within five days of symptoms starting. A five day course of treatment is usual, but may be extended by a few days if blisters are still forming.

Antiviral medication may not be needed to treat recurrences. This is because symptoms are often much milder than the first episode, and usually last just a few days. However, if you tend to get bad symptoms during recurrences then a five day course of medication can be useful. To reduce the duration and severity of a recurrence, start the medication as soon as symptoms begin.

If you have frequent recurrences, an option is to take antiviral medication every day. In most people who take medication every day, the recurrences are either stopped completely, or their frequency and severity are greatly reduced.

Can genital herpes be passed on to others?

Yes. Herpes simplex virus is very contagious when blisters are present. Genital herpes is usually passed on by vaginal or anal sex. However, if you have a cold sore you may also pass on the virus to cause genital herpes by having oral sex ('mouth to genital sex').

When you have symptoms (during a primary episode or recurrence)

There is a high chance of passing on the virus if you have sex. It is best not to have sex from the time symptoms first start until they are fully over. If you do have sex, using a condom may not fully protect against passing on the virus as the condom only protects the area that is covered.

When you do not have symptoms (which is most of the time)

It is very unlikely that you will pass the virus on when you have sex. However, some virus will be present on the genital skin surface from time to time, although infrequently. So, there is still a small chance that you may pass on the virus when you have sex when you do not have symptoms. It is best to discuss things over with your sexual partner. Using a condom each time you have sex is thought to reduce the chance much further. Also, people who take antiviral medication long-term to prevent recurring symptoms have a reduced risk of passing on the virus.

Note: If your sexual partner already has the same virus then you cannot re-infect each other.

Genital herpes and pregnancy

A specialist will normally advise about what to do if you have genital herpes and become pregnant. The following are three main situations.

If you already have recurring genital herpes before becoming pregnant

In this situation, the risk to your baby is very low. Even if you have a recurrence of blisters during childbirth, the virus is rarely passed to the baby. (It is not clear why the risk is low, but it may be because you pass on some antibodies and immunity to the baby.) This very low risk is different to the high risk if you have a **first** episode or blisters during childbirth - before immunity has had a time to develop.

However, as there is a small risk to the baby, some doctors advise antiviral medication for the last four weeks of pregnancy to help prevent a recurrence during childbirth.

If you have a first episode of symptoms in the last third of a pregnancy

There is a chance that the virus will be passed on to your baby just before or during childbirth. The baby may then develop a very serious herpes infection. The risk is greatest if you have sores or blisters during childbirth, when there is about a 1 in 2 chance that the virus will be passed to the baby. A caesarean section is usually recommended. This would greatly reduce the chance that the baby would come into contact with the virus (mainly in the blisters and sores), and infection of the baby is usually (but not always) prevented.

If you have a first episode of symptoms earlier in pregnancy

In this situation, you may be advised to take a course of the antiviral medicine aciclovir. This helps the sores to clear quickly. (Strictly speaking, aciclovir is not licensed for use in pregnancy. However it is often used, and appears to be safe.) Sores or blisters are likely to clear before childbirth, and a normal vaginal delivery is likely to be safe for the baby. Some doctors also advise that you should also take aciclovir in the last four weeks of pregnancy to prevent a recurrence during childbirth.

Further help and information

If you suspect that you have genital herpes or any other sexually transmitted disease, then see your GP or contact your local Genito-Urinary Medicine (GUM) clinic. You can go to the local GUM clinic without a referral from your GP. You can ring the local hospital or health trust and ask where the nearest clinic is. It may also be listed in the phone book under 'Genito-Urinary Medicine'.

Other sources of help and information include:

Herpes Viruses Association

41 North Road, London N7 9DP

Helpline (local rate) 0845 123 2305 Web: www.herpes.org.uk

This patient support group offer help and advice. There is a page of frequently asked questions on their website and the helpline can answer individuals questions confidentially.

Society of Sexual Health Advisers

Their website www.ssha.info provides information and images on sexually transmitted infections and related issues for the public and professionals. Includes contact details of all the GUM clinics in the UK and Ireland.

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Comprehensive patient resources are available at www.patient.co.uk