

## Genital herpes – the basics

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Genital herpes is caused by two viruses called Herpes simplex, types 1 and 2. The viruses are very similar and both can cause blisters or ulcers. When these occur on the face they are known as ‘cold sores’ and when they occur on the genitals they are called ‘genital herpes.’ However, both viruses can be caught on other parts of the body. This means that genital herpes and cold sores on the face can be caused by either Herpes simplex 1 or 2.

Most people who catch herpes don’t develop any sores and so don’t realise they’ve been infected. In people who do develop sores, the first illness can last from a few days to several weeks. Some people start with flu-like symptoms, followed by tiny bumps on the skin which turns into blisters or ulcers. The ulcers then slowly heal. In most people symptoms appear between two days and two weeks after catching the virus. However, some people develop sores months or even years after catching the virus.

After infecting the skin cells, this virus travels up the nerve to the nearest nerve ganglion (a sort of nerve ‘junction box’ near the spinal cord) where it stays. Here, it is out of reach of the body’s natural defence mechanism (the immune system). In those people who develop sores on their skin some of the virus travels back down the nerve, then into the skin. This is usually the same area of skin where the virus was first caught, although if the virus goes down a different branch of the nerve it can cause sores in a slightly different patch of skin.

A person who has caught herpes may also have caught other infections and so it makes sense to have a full screen at a sexual health clinic. Some family doctors also offer this service.

### **How common is genital herpes?**

Herpes infection is very common. In the UK, most people (about 70%) will have been infected with either type 1 and/or 2 by their 25th birthday. In some countries the number of people infected is much higher than in the UK.

### **How do you catch genital herpes?**

Herpes spreads by skin to skin contact, through touching or rubbing. This can happen during any kind of sex: vaginal, anal and oral. If a person has skin sores there is a high risk of them passing on the virus. In almost all cases herpes is only found on one area of a person’s body. If your partner’s herpes is in the skin of his penis, you can only catch the virus

by contact with this part of his penis. Similarly, if your partner's herpes is in the vulval skin, you can only catch the virus by touching that part of her vulva. Many cases of genital herpes occur when a person has infection around the mouth and kisses their partner's genitals. Herpes cannot be caught from towels, swimming pools, saunas or from toilet seats.

### ***What would I notice if I had genital herpes?***

Most people with herpes infection don't realise they have it. This may be hard to believe if you have painful sores, but only 1 person in 5 with herpes knows that they have it. If you do get symptoms these can start with a flu-like illness. An area of skin on the genitals then becomes red and bumps develop which change into blisters or spots. These then break open to leave painful ulcers. Some people get swollen glands in the groin. After several days the ulcers may develop crusts and after a few weeks the skin heals completely. It is very rare for herpes to leave scars, although dark-skinned people may sometimes be left with pale patches in the affected area of skin.

### ***How do I get tested for genital herpes?***

The doctor or nurse will take a swab from a sore. The sample is then tested in the laboratory. There is a blood test for herpes simplex but it is not usual for clinics to do it for people who have no symptoms. This is because herpes is not an important medical condition and people who have no symptoms do not need treatment. However, the herpes blood test can be helpful in certain situations. You can discuss this with your doctor.

### ***How is genital herpes treated?***

It's not always necessary to treat it. If this is the first time you have had herpes, a course of antiviral tablets may be helpful. However, if you've had the sores for more than six days, the treatment probably won't help as your immune system will have started to kill the virus in the skin. The doctor will advise you about this. Painkillers such as paracetamol and anti-inflammatory tablets can be used to ease any pain. You should keep the sores clean by bathing them with salt water every day.

If the sores are near your urethra (from where you pass urine or pee) it may be painful to pass urine. Sitting in a warm bath when you pass urine may help to reduce the pain. Your doctor may give you lidocaine anaesthetic gel to numb the skin and make peeing more comfortable. You can buy lidocaine gel from the chemist without a doctor's prescription.

### **Important information about your treatment**

If your doctor gives you treatment, this should make the sores less painful and help them to heal more quickly. All treatments from sexual health clinics are given to you in the clinic, free of charge.

### **Will my genital herpes come back?**

In some, but not all, people the herpes sores come back (recur). However, such recurrences are usually much less painful and smaller in size than the first episode. Recurrent genital symptoms occur more often with type 2 infections than with type 1.

### **How is recurrent genital herpes treated?**

Most people find that recurrences don't happen very often. If herpes does come back, it usually causes only minor symptoms and heals up quickly, even without treatment. However, a small number of people will find that recurrences can become troublesome. In this situation, taking antiviral treatment can be helpful. Some people choose episodic treatment, which means taking medication for a few days when herpes recurs. Other people will choose suppressive treatment, which means taking medication every day for a few months in order to prevent recurrences. The doctor or nurse in your sexual health clinic can help you to choose which treatment is best for you.

### **What about my partner?**

Testing for genital herpes is not a routine part of a sexual health screen, so if your partner has never had any signs of genital herpes, it is not essential for them to attend a sexual health clinic. However, if your partner is pregnant, or if your partner thinks they may have had genital herpes, or is worried about your diagnosis, they should attend the clinic for advice.

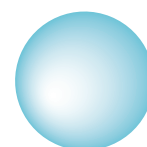
### **When can I have sex again?**

#### **Same sexual partner**

If you and your partner have the same virus you cannot pass it back to each other. You can start having sex again when you feel comfortable about it.

#### **New sexual partner**

If you are planning to have sex with a new partner and have just had your first episode of herpes you should wait until your skin has fully healed. Delaying sex in this way makes it much less likely you might pass on the



virus to your partner. However, it is still sometimes possible to infect your partner even when you have no sores on the skin. Using condoms every time you have sex makes it less likely you can pass the virus on. It has been found that people who tell their partners that they have genital herpes are less likely to pass on the infection. The clinic doctor or sexual health adviser can give you advice about the best way to tell a partner.

### ***Can I pass the virus on if I have no symptoms?***

If your partner has not been infected with HSV in the past, it is possible for you to pass the virus on to them even if you have no blisters or sores. This is because of 'asymptomatic shedding' (when small amounts of virus are on the skin). The risk is much greater in the first few months after you catch herpes. Asymptomatic shedding happens less over time and is rare after two years. However, after this time it is more common in people who have frequent recurrences. Using condoms offers some protection to your partner.

### ***What happens if my genital herpes is left untreated?***

First episode genital herpes will heal up even if you have no treatment. However, this will take longer than it would have done if you started treatment soon after developing sores.

### ***Can I catch herpes again?***

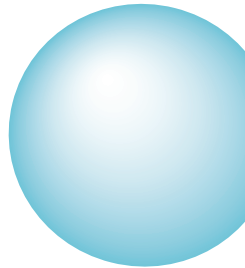
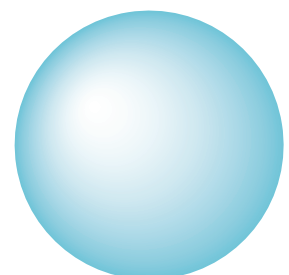
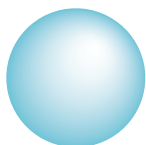
This is very unlikely. Most people only catch herpes once, in one part of their skin. However, there is a risk of infecting other parts of your own skin by touching or scratching herpes blisters or sores and then scratching the skin somewhere else on your body. This risk is greatest when herpes sores develop for the first time.


Catching type 1 herpes does not protect people from catching type 2 (and vice versa). However, if someone does catch the other type of herpes virus, that person often has few (if any) symptoms.

### ***Genital herpes in pregnancy***

#### ***First episode genital herpes before 28 weeks of pregnancy***

Women are recommended to re-start antiviral medication from week 36 until the baby is born. The woman should expect to have a normal vaginal delivery if that is what she and her midwife/obstetrician had planned.





If a woman then goes into labour before 32 weeks (six weeks premature) the baby may need to be delivered by caesarean section because there is a risk of the baby catching herpes during a normal vaginal delivery. Your obstetrician will discuss this with you.

### **First episode genital herpes after 28 weeks of pregnancy**

Women are advised to continue antiviral medication until the baby is born. The baby may need to be delivered by caesarean section. This is because there is a risk of the baby catching the virus during a normal vaginal delivery. Aciclovir, one of the treatments for herpes, is safe to use in pregnancy.

### **Recurrent genital herpes in pregnancy**

Having recurrent genital herpes during pregnancy does not harm the baby in any way. Antibodies produced by the woman's immune system against the virus offer some protection for the baby. Doctors may advise the woman to take antiviral medication from 36 weeks of pregnancy until the baby is born, to prevent a recurrence at the time of delivery. A woman who has a genital herpes recurrence (even if she is in labour at the time) will usually have a normal vaginal delivery.

### **The Herpes Viruses Association (HVA)**

The HVA is a patient support group which for many years has helped and advised people with herpes infection.

HVA Helpline	0845 123 2305 (weekdays only)
HVA e-mail	info@herpes.org.uk
HVA Website	www.herpes.org.uk

This leaflet was produced by the Clinical Effectiveness Group of the British Association for Sexual Health and HIV (BASHH). Its contents are based on the 2014 UK National Guideline for the Management of Anogenital Herpes and also 'Management of Genital Herpes in Pregnancy' produced jointly by BASHH and the Royal College of Obstetricians and Gynaecologists (2014).

### **More information**

[www.bashh.org/guidelines](http://www.bashh.org/guidelines)

