

Herpes

What is herpes?

Herpes is a contagious viral infection that affects an estimated 45 million Americans (more than one in five). The infection is caused by the herpes simplex virus (HSV). There are two types of HSV and both can cause the symptoms of genital herpes. HSV type 1 most commonly causes sores on the lips (known as fever blisters or cold sores), but it can cause genital infections as well. HSV type 2 most often causes genital sores, but it also can infect the mouth. The virus remains in certain body nerve cells for life, causing periodic symptoms in some people. Many people who are infected with HSV never develop any symptoms.

How is herpes transmitted?

The infection is usually acquired by sexual contact with someone who has genital herpes. People with oral herpes can transmit the infection to the genital area of a partner during oral-genital sex. Herpes infections also can be transmitted by a person who is infected with HSV but has no noticeable symptoms. Such asymptomatic shedding of the virus may be fairly common, occurring from 5 percent to 20 percent of the time in infected individuals.

What are the symptoms of herpes?

Symptoms of a first episode of genital herpes vary widely from person to person. They usually occur within two to 10 days of exposure and typically involve small red bumps that may develop into blisters and open lesions. These “bumps” appear at the site of infection, which may be in or around the vaginal area, the cervix, the penis, urinary tract of both men and women, and around the anal opening, buttocks or thighs. Sores also may appear on other parts of the body where broken skin has come into contact with HSV. Over a period of days, the sores become encrusted and then heal without scarring. Other symptoms of a first episode of genital herpes may include fever, headache, muscle aches, swollen glands in the groin area, painful urination or vaginal discharge.

Can herpes reoccur?

After invading the skin or mucous membranes, the virus that causes genital herpes travels to the sensory nerves at the end of the spinal cord. Even after the skin lesions have disappeared, the virus remains inside the nerve cells in a suppressed state. In most people, the virus reactivates from time to time. When this happens, the virus travels along the nerves to the skin, where it multiplies on the surface at or near the site of the original herpes sores, causing new lesions to erupt. It also can reactivate without any visible sores. At these times, small amounts of the virus may be shed at, or near, sites of the original infection, in genital or oral secretions, or from unapparent lesions. This shedding is rare, but it is sufficient to infect a sex partner.

The symptoms of periodic episodes are usually milder than those of the first episode and typically last about a week. A recurrent outbreak may be identified by a tingling sensation or itching in the genital

area or pain in the buttocks or down the leg. Sometimes no visible sores develop. At other times, blisters appear that may be very small and barely noticeable or may break into open sores that crust

over and then disappear. The frequency and severity of the recurring episodes vary greatly. While some people recognize only one or two recurrences in a lifetime, others may experience several outbreaks a year. The number and pattern of recurrences often change over time for an individual. Scientists do not know what causes the virus to reactivate. Recurrences are not predictable. Some people with herpes report that their recurrences are brought on by other illnesses, stress, exposure to sunlight, or menstruation.

How is herpes diagnosed?

The sores of genital herpes in its active stage are usually visible to the naked eye. Several laboratory tests may be needed, however, to distinguish herpes sores from other infections. The most accurate method of diagnosis is by viral culture. A blood test can detect antibodies to the virus, which indicate that the person has at some time been infected with the herpes virus, but it cannot determine whether a person has an active genital herpes infection. During an active herpes episode, whether primary or recurrent, it is important to follow a few simple steps to speed healing and to avoid spreading the infection to other sites of the body or to other people:

- Keep the infected area clean and dry to prevent secondary infection from developing.
- Try to avoid touching the sores; wash hands after contact with the sores.
- Avoid sexual contact from the time symptoms are first recognized until the sores are completely healed, that is, until scabs have fallen off and new skin has formed over the site of the lesion.

The oral medication, acyclovir, shortens the course of a first episode and limits the severity of recurrences if taken within 24 hours of onset of symptoms. People who have very frequent episodes of the disease can take oral acyclovir daily for up to one year to suppress the virus' activity and prevent most recurrences. Acyclovir does not cure herpes, but it interferes with the virus' ability to reproduce itself. Other drugs that work in a similar way are famciclovir and valacyclovir.

Does herpes cause any complications?

Genital herpes infections do not cause permanent disability or long-term damage in healthy adults. However, in people who have suppressed immune systems, herpes episodes can be long-lasting and unusually severe. Regardless of severity of symptoms, genital herpes frequently causes psychological distress in people who know they are infected.

A pregnant woman who develops a primary episode of genital herpes can pass the virus to her fetus and may be at higher risk for spontaneous abortion and premature delivery. If a woman has active genital herpes at delivery, a Cesarean delivery is usually performed. Half of fetuses/infants who acquire herpes in this manner either die or suffer neurologic damage. Early detection and therapy can limit many serious complications.

Genital herpes, like other genital ulcer diseases, increases the risk of acquiring HIV, the virus that causes AIDS, by providing point of entry for HIV. Persons with HIV can have severe herpes outbreaks, and this may help transmit both herpes and HIV infections to other persons.

Can herpes be prevented?

Not having sex is the best protection against herpes and other STDs. Having sex with only one uninfected partner who has sex with you is also safe.

How can I reduce my risk of getting herpes?

Latex condoms, when always and correctly used, can reduce the risk of genital herpes and other STDs, but only when the infected areas are covered or protected by the condom. Herpes lesions may occur in areas that can be covered or protected by a condom, but they also may occur in areas that cannot be covered or protected by a condom.

For more information about STDs, talk to your health care provider or call:

The State of Tennessee HIV/STD Hotline: 1-800-525-2437

(Monday through Friday 8:00 to 4:30 p.m. CST)

OR

The CDC National STD Hotline: 1-800-227-8922

Other Informational Links:

American Social Health Association

<http://www.ashastd.org/>

Centers for Disease Control and Prevention

<http://www.cdc.gov/STD/>

E-Cards, Centers for Disease Control and Prevention

<http://www2c.cdc.gov/ecards/index.asp?category=174>

Get Yourself Tested

<http://www.gytnow.org/>

National Institute of Health Medline

<http://www.nlm.nih.gov/medlineplus/sexuallytransmitteddiseases.html>

U.S. Department of Health and Human Services

<http://www.womenshealth.gov/faq/sexually-transmitted-infections.cfm>

World Health Organization

http://www.who.int/topics/sexually_transmitted_infections/en/