



Genital Herpes

Genital herpes is caused by *herpes simplex virus*, type I or type II. Both types can infect the mouth (producing cold sores) or the genital area (genital herpes).

Symptoms

When a person is infected with the herpes virus, it may pass unnoticed. This is called subclinical infection. Therefore many people with genital herpes are not aware they have the infection.

When symptoms occur, they appear from time to time in episodes (also called outbreaks or attacks). After contracting the herpes virus, a person may experience an episode within a few days, but it may take much longer (sometimes years) before symptoms are noticed. Often, the person never develops recognisable herpes symptoms.

Most genital herpes outbreaks cause symptoms similar to the cold sores that many people experience on or around their lips. But with genital herpes, the "cold sores" usually appear on or near the genitals or anus. Sometimes they appear on the buttocks or thighs.

Outbreaks may produce small blisters, which break open to form shallow painful sores. These develop a scab after 1-2 weeks and then heal. Sometimes the first outbreak causes considerable pain and distress; future episodes are usually less severe.

Although herpes sores heal, the virus remains in the body and may produce more sores later. These are called recurrent outbreaks.

Recurrent Outbreaks

These usually occur on or near the same part of the body as the first attack, but are often shorter and not as painful. They may be triggered by general illness, stress, menstruation or sexual activity, but often no trigger can be identified.

In most cases, recurrent outbreaks become less frequent with time and may eventually stop altogether.

Recurrent attacks are caused by reactivation of virus already present in the body - not by being re-infected.

Transmission

The virus is spread by skin-to-skin contact. Cold sores on the mouth are a potential source of genital infection during mouth-to-genital contact (oral sex).

Because recurrent herpes may cause few symptoms or pass unnoticed, it is possible to pass on the virus even when there are no visible blisters or sores.

Once you have a herpes infection, you probably cannot be infected again by the same strain of herpes virus.

Diagnosis

Herpes is diagnosed by taking a sample from an infected area during an outbreak. The herpes virus will usually grow from a swab taken from a ruptured blister. The test will identify the strain (type 1 or type 2) of the herpes virus. Type 1 genital herpes tends to cause fewer recurrences than type 2.

Blood tests may assist diagnosis in some cases, but the results can be difficult to interpret. A blood test can only tell that you have been

infected with the herpes virus in the past. It cannot tell you:

- which part of your body is infected (i.e. whether you are carrying the virus on your lips or genitals)
- whether you will develop any symptoms of genital herpes
- if symptoms you have experienced are due to herpes

Your doctor can advise if a blood test would be helpful.

Treatment

Iodine paint (Betadine) will dry out the blisters and help prevent secondary infection. Salt baths may help ease discomfort, and passing urine in a warm bath may help if urination is painful. Aspirin or paracetamol will help relieve pain.

Anti-viral medication may be prescribed by a doctor. It will reduce the severity of an outbreak if taken early in infection (preferably within three days of symptoms appearing).

If outbreaks are frequent, medication can be taken continuously. It does not get rid of the virus from the body, but it prevents most outbreaks.

Antiviral drugs include aciclovir (Zovirax), famciclovir (Famvir) and valaciclovir (Valtrex).

Preventing transmission

Transmission of herpes to another person is most likely to occur when you have oral, genital or anal sex a few days before, or during, an outbreak.

It is possible to transmit infection even if there are no obvious blisters, sores or other symptoms.

When condoms are used properly, they stop transmission of the virus across the skin that they cover. If you do not have any blisters or sores, it is an individual decision whether to use condoms when having sex. Many factors may influence the decision, so you may wish to discuss this with a doctor or health adviser.

Herpes and pregnancy

In pregnant women, herpes infection may be transmitted to the baby at delivery, causing serious illness. This is not common, but the obstetrician should be told of past genital herpes infections so the risk of this complication can be minimised.

Coping with herpes

Much anxiety and fear has been caused by genital herpes, and many people are alarmed by the diagnosis. Genital herpes blisters are cold sores in the genital area, and should not be regarded as a source of shame or guilt, or a serious barrier to sexual and other loving relationships.

If you are having difficulty coping with the diagnosis of herpes, a doctor or health adviser can tell you about counselling services that are available. There are also numerous support groups on the internet. (See the web sites listed below.)

More information

The Herpes Handbook by G Biro

Gore & Osment, publisher

The Truth About Herpes by S Sacks

Gordon Soules Book Publishers Ltd

Excerpt and ordering information available on the world wide web at: home.istar.ca/~viridae/

STD Services web site: www.stdservices.on.net/std/herpes

Australian Herpes Management Forum web site : www.ahmf.com.au

American Social Health Organisation Herpes Resource Center: www.ashstd.org/herpes/hrc.html

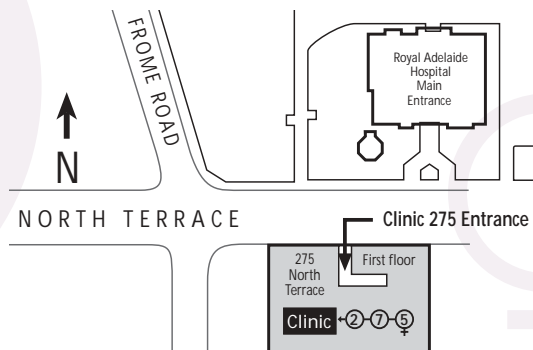
International Herpes Alliance:
www.herpesalliance.org

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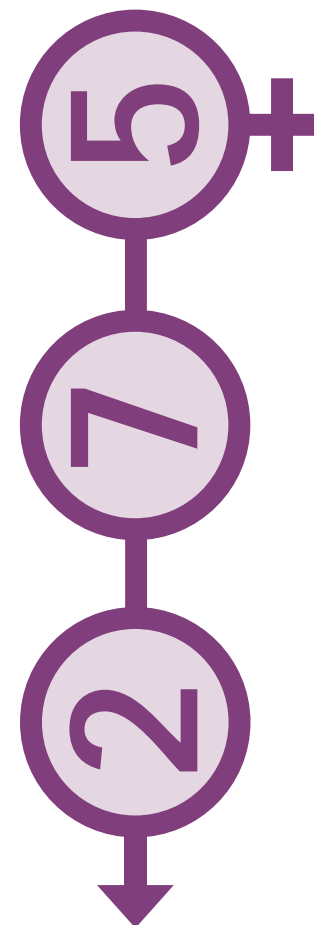
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STD Services June 2007



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Sexually Transmitted Diseases Services

Royal Adelaide Hospital

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