

STD/STI INFORMATIONAL FACT SHEET

GENITAL HERPES (jen-i-tl hur-peeZ)

What is genital herpes?

Genital herpes is a STD caused by herpes simplex viruses type 2 (HSV-2). The HSV-2 virus is easy to catch and, once in the body, will remain indefinitely. Although infected, most individuals have no or minimal signs or symptoms from HSV-2 infection. When signs do occur, they appear as blisters on or around the genitals or rectum. As blisters break, small tender ulcers (sores) appear that may take two to four weeks to heal when they first occur. Generally, another outbreak will occur a few weeks or months after the first. This outbreak is less severe and shorter than the first. Later outbreaks tend to decrease over a period of years even though the individual remains infected.

How common is genital herpes?

Genital herpes infection is common in the U.S. Nationwide, at least 45 million people ages 12 and older (or one out of five adolescents and adults) have had genital HSV infection. Genital HSV-2 infection is more common in women (about one in four women) than in men (nearly one in five). The male-to-female transmission is more likely than female-to-male transmission. Between the late 1970s and the early 1990s, the number of Americans with genital herpes infection increased 30 percent. From the mid-1990s to 2004, there was a 21 percent decrease in infection. However, millions of people still are infected in the U.S. annually and many do not recognize that they have herpes because they never had or noticed any symptoms.

How is genital herpes transmitted?

Genital herpes generally is transmitted, during sexual contact, from sores that the HSV-2 virus causes. This contact may include touching; kissing; and vaginal, anal, or oral intercourse. Skin also can be infected if it is cut, chafed, burned, or scraped. Although genital herpes is most contagious when sores are open and "weeping," transmission also can occur between outbreaks from skin that does not appear to be broken or to have a sore. Even so, genital herpes is not transmitted through casual contact such as hugging, shaking hands, sharing food, using the same eating utensils, drinking from the same glass, sitting on public toilets, or touching door knobs.

What are the signs and symptoms of genital herpes?

Most people with genital herpes have no symptoms or they have mild, unnoticed symptoms. However, if signs or symptoms occur, they will be more severe during the "initial herpes" episodes than in recurring outbreaks. The initial (or first)

outbreak usually occurs within two weeks after transmission. The earliest outbreaks may include blister clusters or open sores and flu-like symptoms such as, a fever, headache, chills, tired feelings, or swollen lymph glands (in the throat, groin, or underarms). The blisters and open sores typically heal within two to four weeks. Individuals generally average four to five outbreaks yearly. Signs and symptoms during later episodes may include blisters or open sores on the vagina, vulva, cervix, penis, buttocks, or anus; itching; pain in the infected area; inability to urinate if swollen sores block the urethra; or a burning feeling when urine passes over sores.

What are complications of genital herpes?

Genital herpes infection can be severe in people with suppressed immune systems. The suppressed immune systems can increase the risk of getting HIV or other illnesses. Also, other infections, surgery, stress, menstruation, sexual intercourse, and skin irritations may be factors that influence recurring outbreaks in later weeks, months, or years. The recurring outbreaks take a toll on infected individuals and can cause psychological misery on deep levels.

Babies born to a mother infected with HSV-2 are rare. However, if a first outbreak occurs during pregnancy, there is greater risk of transmission to the baby. If a woman has active genital herpes at delivery, a cesarean delivery is usually performed. To avoid infecting an infant, it is important that women avoid contracting genital herpes during pregnancy.

How does genital herpes affect a pregnant woman and her baby?

Most importantly, a woman should avoid becoming infected with genital herpes during pregnancy. A woman with recurrent herpes generally does not pass the infection on to the newborn. The most danger for the baby of an infected mother occurs during delivery if the mother is having the first outbreak of genital herpes. If there are herpes sores when labor begins, a cesarean section can be performed to avoid infection of the newborn. A fetus is rarely infected during pregnancy. In very rare cases, an infant may develop a life-threatening infection if there is contact with herpes sores.

How is genital herpes diagnosed?

Although symptoms related to HSV-2 are varied, health care workers can diagnose genital herpes through a physical examination of sores or an analysis of cultures from sores during an outbreak. Between outbreaks, a blood test may determine or confirm diagnosis of genital herpes. Other STDs, like syphilis, may look like genital herpes but need a different treatment.

What is the treatment for genital herpes?

There is no treatment to cure herpes. However, antiviral medications can speed healing of outbreaks and prevent outbreaks during the time period an individual takes medication. Daily suppressive therapy for genital herpes may reduce transmission to partners.

During outbreaks, infected persons may gain relief of pain or fever from warm baths, wearing cotton clothing to prevent chafing, placing cold compresses (or ice packs) on sores, or taking medications like aspirin, acetaminophen, or ibuprofen.

How can genital herpes be prevented?

As with other STDs, the best way to avoid transmission of genital herpes is to abstain from sexual contact, or be in a long-term, mutually monogamous relationship with an uninfected partner. If a person is sexually active, using a latex condom consistently and correctly can reduce the risk of (not guarantee protection from) genital herpes if the infected area is covered. It is important to note that a person can infect sexual partners even if the individual has no signs or symptoms of the disease.

Suggestions for helping infected persons reduce recurrences are to: take anti-herpes drugs (suppressive therapy) to help decrease the frequency and duration of outbreaks, maintain a good diet, get plenty of rest and sleep, and use effective stress management strategies. An infected person can help prevent transmission to another partner by ceasing sexual contact as soon as warning signs of an outbreak appear—do not have vaginal, anal, or oral intercourse, even with a condom. Genital herpes can spread in sweat or in vaginal fluids not covered by a condom. Waiting seven days after sores heal to resume sexual intercourse with a condom and continuous use of daily suppressive therapy is also recommended.

If a pregnant woman does not have genital herpes and her partner is infected, the couple should avoid unprotected oral, vaginal, and anal intercourse. An infected partner may consider suppressive therapy throughout the pregnancy to reduce the risk of transmitting the infection.

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For information about specific STDs/STIs, below are sources to use:

**Alan Guttmacher Institute
(AGI)**

120 Wall Street, 21st Floor
New York, NY 10005
Phone: 212/248-1111
Fax: 212/248-1951
<http://www.agi-usa.org>

**American Social Health
Association (ASHA)**

P. O. Box 13827
Research Triangle Park, NC 27709-
3827
Phone: 800-783-9877
<http://www.ashastd.org/>

**Centers for Disease Control and
Prevention – Sexually Transmitted
Disease - STD information and
referrals to STD Clinics**

CDC-INFO
Phone: 800-CDC-INFO (800-232-
4636); TTY: 888-232-6348 In English,
en Espanol
<http://www.cdc.gov/std/default.htm>

**CDC National Prevention
Information Network (NPIN)**

P.O. Box 6003
Rockville, MD 20849-6003
Phone: 800-458-5231;
Fax: 888-282-7681
1-800-243-7012 TTY
E-mail: info@cdcnpin.org

**The Henry J. Kaiser Family
Foundation**

2400 Sand Hill Road
Menlo Park, CA 94025
Phone: 650/854-9400
Fax: 650/854-4800
<http://www.kff.org>

National Herpes Hotline (NHH)

Open from 9 A.M. to 7 P.M., ET,
Monday - Friday.
Phone: 919/361-8488

**National HPV and Cervical
Cancer Prevention Hotline**

Open from 2 P.M. to 7 P.M., ET,
Monday - Friday.
Phone: 919/361-4848

**Planned Parenthood Federation
of America**

434 West 33rd St.
New York, NY 10001
212/541-7800
FAX: 212/245-1845
<http://www.plannedparenthood.org/>

**Sexuality Information and
Education Council of the United
States (SIECUS)**

130 West 42nd Street, Suite 350
New York, New York 10036-7802
Phone: 212/819-9770
Fax: 212/819-9776
<http://www.siecus.org>

Virginia Department of Health

109 Governor Street
Richmond, VA 23219
VIRGINIA STD/AIDS HOTLINE
Phone: 800-533-4148
<http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/factsheets.htm>