Fact Sheet

Genital herpes

What is genital herpes
Genital herpes is a common infection caused by the herpes simplex virus. It is important to remember that herpes simplex is a localised skin problem and generally doesn’t have serious consequences apart from recurrence.

There are two types of herpes simplex virus; HSV-1 (type 1) and HSV-2 (type 2):
• HSV-1 is the virus that most commonly causes cold sores on the lips or face. Up to 80% of Australian adults carry HSV-1
• HSV-2 is the virus responsible for most genital herpes and is most commonly transmitted through sexual contact. Approximately one in eight sexually active Australians has genital herpes

How did I get it?
The virus enters the body through small cracks in the skin or through the soft lining of the mouth, vagina, anus, urethra (the tube for urine) and under the foreskin.

It can be passed from one person to another by close genital or oral skin-to-skin contact.

Who did I get it from?
You may never know who you caught the virus from; herpes can stay dormant in the body for a long time, and many people do not realise they carry herpes. It is important to know that genital herpes can occur even in a long-term monogamous relationship; it does not mean that you or your partner has been unfaithful.

What are the symptoms?
Most people who are infected by herpes have mild symptoms or no symptoms, but some people are affected severely. Symptoms vary from person to person, but the classic symptoms of genital herpes are:
• stinging or tingling in the affected area
• small fluid-filled blisters which usually burst within a couple of days, leaving small painful red sores

A first episode of genital herpes can be severe, with associated flu-like symptoms such as fever, headache and swollen glands and can sometimes cause difficulty passing urine.

Recurrent episodes are usually milder and clear up more quickly. HSV-1 tends to be associated with less severe and less frequent recurrences compared to HSV-2. Recurrent episodes usually last for 7-10 days. Most people find that the recurrences tend to become milder and less frequent over time, and many people will eventually have no symptoms at all.

What tests are there for genital herpes?
The best test is a swab taken from a blister or sore to check for herpes simplex virus in the laboratory.

A blood test to test for herpes antibodies can sometimes be helpful, for example if you have a partner and are unsure if they are at risk of catching herpes from you, or if your doctor strongly suspects you have herpes but your swabs are repeatedly negative. However, a blood test does not tell you whether your genital symptoms are due to herpes or to something else, and it is not as good as the swab for diagnosing genital herpes, especially as it can take 3-6 months for the antibodies to show up in your blood after you are infected with the virus.

How is genital herpes treated?
A first episode of genital herpes is usually treated with anti-viral tablets prescribed by your doctor. It is best to start these within 72 hours of the symptoms starting. This will help clear your symptoms more quickly. The virus then becomes dormant and remains inactive in the body. Most people will have at least one recurrence of symptoms in their lifetime. You may not require treatment for recurrences if they are mild. If you have frequent or severe recurrences then there is treatment that can be taken to control this. This treatment can be:
• ‘episodic’ where anti-viral tablets are taken only at the time of an outbreak
• ‘suppressive’ where a low dose anti-viral tablet is taken daily for six months or more

You should make an appointment to talk to a doctor about treatment if you have frequent recurrences.
Can I do anything else to ease the symptoms of genital herpes?
The following measures can help ease the pain and help the healing process:
• Gently bathe the area using cotton wool and a warm salt solution (1 tsp to 2 cups water)
• If urinating is painful, pass urine in a warm bath
• Use a mild pain relieving drug if needed eg paracetamol or ibuprofen
• Try a local anaesthetic ointment such as lignocaine (available from a pharmacy), be careful just to pat this gently on the affected area and do not rub

How can I prevent passing the virus onto my partner?
It is important to tell your current partner(s) if you are diagnosed with herpes so they can be aware of the risk of transmission and you can discuss ways to reduce the chance of this happening. Don’t have sex when you have blisters, sores or symptoms; you are most infectious at this point.

In most people the body can shed the herpes virus from the skin even when there are no symptoms or signs of herpes simplex. However, if you wear condoms this reduces transmission by at least 75%, so it’s recommended to use condoms whenever you have sex, even if there are no sores or symptoms present.

Sometimes people take suppressive anti-viral therapy to help prevent transmission. You can talk to your doctor about this in more detail. Sometimes blood tests can help you know whether your partner is at risk of infection from you.

You cannot pass on genital herpes from hugging, sharing baths or towels, from swimming pools, toilet seats, or from sharing cups, plates or cutlery.

What about pregnancy?
Having herpes will not affect your chance of falling pregnant - it has no effect on fertility.

If a woman develops her first outbreak of herpes less than six weeks before she gives birth, then there is a risk of transmitting herpes to the baby during delivery, and obstetricians usually advise delivery by caesarean section.