Genital herpes is caused by the herpes simplex virus. The virus can affect the mouth, the genital area, the skin around the anus and the fingers. Once the first outbreak of herpes is over, the virus hides away in the nerve fibres, where it remains totally undetected and causes no symptoms. However, in some people, it may come back (recur) on the skin surface, at or near the place where it was caught. This may be when the person is ill or run down. Some people never get another outbreak.

There are two types of the herpes virus. Either type is infectious, but:

- Type I infects the mouth or nose. It is more likely to recur than if Type II infects this area.

- Type II infects the genital and anal area, it is more likely to recur than if Type I infects this area.

Genital and anal infections used to always be caused by Type II, but Type I is becoming more common in these areas, because more people are having oral sex.
Signs and symptoms
Both men and women may have one or more symptoms, including:
- an itching or tingling sensation in the genital or anal area
- small fluid-filled blisters. These burst and leave small sores which can be very painful. In time they dry out, scab over and heal. With the first infection they can take between 2 and 4 weeks to heal properly
- pain when passing urine, if it passes over any of the open sores
- a flu-like illness, backache, headache, swollen glands or fever
At this time the virus is highly infectious.
Recurrent infections are usually milder. The sores are fewer, smaller, less painful and heal more quickly, and there are no flu-like symptoms.

How herpes is passed on
Herpes is passed on through skin contact with an infected person. The virus affects the areas where it enters the body. This can be by:
- kissing (mouth to mouth)
- penetrative sex (when the penis enters the vagina, mouth or anus)
- oral sex (from the mouth to the genitals)

Where to go for help
- Your local sexual health (GUM) clinic. You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the ‘special’ or GUM clinic. You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country – you don’t have to go to a local one – and you don’t have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)
- Your own GP.
- The Herpes Viruses Association – for information and support for people who have herpes – tel. 020 7609 9061.

The tests for genital herpes
- A clinical examination of your genital area is carried out by a doctor or a nurse.
- A sample is taken, using a cotton-wool or spongy swab, from any visible sores.
- Women may be given an internal pelvic examination.
- A sample of urine is taken.

As with any suspected sexually transmitted infection, it is possible to have more than one infection at the same time, so it is advisable to have a full check-up.

Diagnosis and treatment
Samples taken during your examination are sent to a laboratory for testing, and the result is available usually within 2 weeks.

Treatment is not essential, as genital herpes will clear up by itself. Tablets are available which reduce the severity of genital herpes infection. These are only effective when taken within 72 hours of the start of the symptoms. Recurrent infections often do not require treatment.

If you have been told you have herpes you may be asked to see a health adviser who will explain about the infection and answer your questions. The health adviser will also ask you about your sexual partner(s).

Help during an outbreak
When you are suffering from herpes, there are several things you can do to help you feel better.
- Take pain-killers (aspirin/paracetamol) if you have any pain.
- Gently bathing the sore areas with a salt solution (half a teaspoon of salt to half a pint of warm water) twice a day may help: it is soothing and helps the sores to dry out.
- Wear loose clothing so that the air can get to the sore areas.
- Place an ice-pack wrapped in a clean cloth or towel on the affected area.
- If passing urine is painful, try urinating in a bath of water. Or try pouring water over yourself as you pass water.
- Drink plenty of fluids, such as mineral water and soft drinks, to help neutralise the urine. It is important not to hold back from passing urine as this can cause further problems.
- Avoid sunbathing and using sunbeds.
- Get plenty of rest.
Genital herpes (HSV)

Taking care of yourself and your partner
During an episode of herpes, the blisters and sores are highly infectious and the virus can be passed on to others by direct contact. To prevent this from happening you should avoid:

• kissing when you or your partner have cold sores around the mouth
• having oral sex when you or your partner have mouth or genital sores
• having any genital or anal contact, even with a condom or dental dam, when you or your partner have genital sores
• using saliva to wet contact lenses if you have sores around your mouth

Remember – wash your hands with soap before and after touching the sores.

Between outbreaks of herpes rashes, the chance of passing on the infection is much reduced, although it may occasionally occur. However herpes does not mean the end of your sex life. Ask the advice of the clinic health adviser.

Remember, a condom will only protect against herpes infection if it covers all the blisters. Herpes can also be transmitted by non-penetrative sex.

Complications

Cervical cancer and genital herpes
There is no link between genital herpes and cancer of the cervix. However, it is still advisable for every woman to have regular smear tests.

Pregnancy and genital herpes
Having herpes does not affect a woman’s ability to become pregnant.

If herpes first occurs in the first 3 months of your pregnancy there is a small risk of a miscarriage. Catching herpes towards the end of pregnancy may cause the baby to be born early. However, most women who have several episodes of genital herpes during pregnancy have a normal delivery.

If you are having a recurrent episode of herpes when the baby is due, you may be advised by your doctor to have a Caesarean delivery – but this is not usually necessary. A baby is very rarely infected in the UK.

Further information
This factsheet is one of a series which give information on the following range of infections and diseases: bacterial vaginosis, chlamydia, cystitis, genital herpes, genital warts, gonorrhoea, hepatitis (A, B and C), non-specific urethritis, penile cancer, pelvic inflammatory disease (PID), prostate cancer, pubic lice, scabies, syphilis, testicular cancer, thrush and trichomonas vaginialis.

Free copies of any of these factsheets are available from GP surgeries, NHS sexual health (GUM) clinics, or your local health promotion unit (in the phone book under your local Health Authority).