Genital herpes

What is genital herpes?
Genital herpes is a sexually transmitted infection caused by one of the two types of the herpes simplex virus (HSV): herpes simplex 1 (HSV-1) and herpes simplex 2 (HSV-2). Most Canadians will have at least one type of HSV in their lifetime. While herpes is very common, it also carries a lot of stigma that can lead to anxiety, fear and misinformation about herpes.
For many people, herpes is a minor skin condition that comes and goes without causing problems. As a result, many people may not be aware that they have the virus.

How is it spread?
Herpes is passed from person-to-person by direct skin-to-skin contact with a person who has the virus (e.g., through kissing or sexual activity, including oral sex), even without visible herpes sores.
It also is possible to pass herpes if one person touches the part of their body that has herpes and then immediately touches another person's mouth or genitals. Sharing sex toys without changing condoms or washing toys may also pass the virus. During a primary first outbreak, it is possible to pass the virus to another area of that person's own body, by touching the sores and then touching another part of their body (e.g., rubbing a blister on their mouth and then touching their genitals).
The chance of passing herpes is highest when there is an active outbreak (when sores or blisters, or warning symptoms are present). However, HSV can still be passed when there are no symptoms (called asymptomatic shedding), but this is less likely. Women who have an active outbreak in late pregnancy can pass the infection to their baby during a vaginal childbirth.

What are the symptoms?
Most people never have symptoms, or they are so mild that they do not know they have the virus. Sometimes, symptoms may not appear for months or years. Symptoms vary from person-to-person and many people who do get symptoms may not realize that it's caused by HSV.
Symptoms may include one or more sores that look like water blisters, cuts or broken skin on the genitals (external sex organs), rectum, anus and/or the mouth, hands and eyes. Herpes can also cause blisters around the mouth (oral herpes) often called ‘cold sores' or ‘fever blisters'. Herpes infections have three different outbreak types:
• Primary first outbreak
• Non-primary first outbreak
• Recurrent outbreak
A primary outbreak happens when someone first gets herpes symptoms; usually beginning 2 to 21 days (on average 6 days) after contact. Some people may experience warning signs, called ‘prodrome’ symptoms such as itching, burning, and tingling of the skin at the site where the blisters or sores may appear, followed by painful herpes sores or tiny blisters. Other symptoms may include pain down either leg or in the buttocks, swollen or tender glands in the groin, fever, painful urination, body aches, feeling tired and unwell. This is more common with a primary outbreak. When the blisters break, painful shallow ulcers appear. These ulcers crust over and usually heal in 7 to 14 days. A primary outbreak is generally worse than future outbreaks.
A non-primary first outbreak is when someone who already has one type of herpes, gets the second type. It is often milder and is unlikely to cause full-body symptoms.
After the first outbreak, HSV stays in the body and becomes inactive. There is no way of knowing if, or how often, a person will have future outbreaks (called recurrent outbreaks). When recurrent outbreaks happen, the symptoms usually show up in the same place where they first appeared. Outbreaks generally happen less over time, the symptoms are milder, and will often go unnoticed. Genital herpes caused by HSV-1 generally does not recur frequently.

What are the complications?
Complications are rare, but some people especially those with weakened immune systems, such as people with HIV, may have trouble fighting the virus and get a secondary infection in the eye, fingers, joints, throat, colon, liver, lungs or brain.

If you are pregnant, and you or your partner have a history of herpes, it is important to inform your health care provider. There are steps that can be taken to help prevent the virus being passed to the baby. This is most likely to happen if the mother has a primary first outbreak in the third trimester. Herpes can cause serious complications for the baby, including death. Women who have genital herpes before they become pregnant are at very low risk of passing it to their infant.

How do I find out if I have herpes?
Herpes testing is only generally done when there are sores present. Visit your health care provider as soon as possible after the sores develop. They will examine the area, and may swab the sores (around the genitals, anus or mouth) or send you for a blood test.

If the sores have already started to heal, a swab test may not pick up the virus. In this case, the test can be negative and you can still have herpes.

What is the treatment?
Antiviral medication can be prescribed when herpes first develops, or if the blisters are painful or happen often. The antiviral treatments will not cure herpes, but can help to reduce discomfort and how long it takes for a sore to heal. The medication works best if it is started as soon as possible. It can also decrease the chance of spreading it to others by preventing the virus from multiplying.

To ease discomfort when you have symptoms, try the following:
- Take acetaminophen (Tylenol) or Ibuprofen (Advil) to help with the pain
- Wear loose-fitting clothing and cotton underwear
- Soak in warm water baths
- Keep the infected area dry, e.g., use a blow dryer on a cool setting after bathing instead of rubbing the area with a towel
- Apply an ice-pack, wrapped in a clean cloth, to sores
- Drink plenty of fluids to keep urine diluted (to decrease the pain when urinating). If urinating hurts, pour warm water over your genitals while urinating or pee when you are in a warm shower or bath
- Do not use medicated or non-medicated ointments or creams, unless they are prescribed by your health care provider
- Avoid breaking blisters and any sexual contact until symptoms have resolved

Is there anything I can do to prevent recurrent outbreaks?
It is not well understood what reactivates (triggers) the herpes virus symptoms to recur. The triggers may include:
- Friction or trauma in the genital area
- Stress
- Hormonal changes (e.g., menstruation)
- Exposure to ultraviolet light (e.g., tanning beds)
- Drinking excessive amounts of alcohol
- Having a weakened immune system (e.g., chemotherapy, HIV)

A healthy lifestyle, such as a good diet, getting enough sleep and rest, exercise, and reducing stress may help limit the number of outbreaks. Using a water based lubricant during sexual intercourse can help to reduce friction and skin irritation that may trigger an outbreak in some people.
How can I lower my chance of passing or getting herpes?

Condoms offer good protection, but do not completely prevent the spread of herpes because they do not cover the whole genital area. Condoms can also be used on sex toys. Abstain from sex or avoid skin-to-skin contact in the area of the herpes sores if you are sexual during an outbreak. Dental dams can also be used as a barrier during oral sex. Talk to your health care provider about suppressive therapy (taking an antiviral drug every day) to help prevent passing the virus to your partner. Wash your hands if you have touched the blisters to prevent transferring the virus to another person (or an area of your body during a primary outbreak). Talk to your partner(s) about herpes before you have sexual contact.

For more information

Sex Sense Phone Line
Free, confidential sexual health referral and information service at 1-800-739-7367 anywhere in B.C. or 604-731-7803 in the Lower Mainland.

For tips on how to talk to your partner(s), visit the BC Centre for Disease Control (BCCDC) Smart Sex Resource https://smartsexresource.com/resources/herpes-a-patients-guide.

For more information on safer sex and how you can reduce your chance of getting an STI, see HealthLinkBC File #08o Preventing sexually transmitted infections (STIs).