Genital herpes

Looking after your sexual health
Genital herpes

Genital herpes is a common sexually transmitted infection (STI). It’s caused by a virus called herpes simplex. Herpes infection is very common and many people have the virus without ever knowing it. Most people with genital herpes will only get mild symptoms but others will get painful symptoms.

This booklet gives you information about genital herpes, what you can do if you’re worried you might have the infection, and advice on how to protect yourself and your partner(s).

What causes genital herpes?
Genital herpes is caused by one of the herpes simplex viruses (HSV). There are two types, HSV-1 and HSV-2. Both types can infect the genital and anal area (genital herpes), the mouth and nose (cold sores) and fingers and hand (whitlows). The virus can enter the body through small cracks in the skin or through the moist soft linings (mucous membranes) of the mouth, vagina, rectum (back passage), urethra (tube where urine comes out) and under the foreskin.

After an infection by the herpes simplex virus, some people will have an outbreak of genital herpes (see page 5). The virus then becomes dormant (inactive) but it stays in the area of the body where you were infected. In many people the virus will become active again from time to time and cause further outbreaks of genital herpes. These are known as recurrent outbreaks (see page 6).

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How is genital herpes passed on?
Genital herpes can be passed from one person to another during sexual contact. Anyone who's sexually active can get the virus and pass it on.

Herpes simplex is most likely to be passed on just before, during or straight after an outbreak.

Genital herpes can be passed on:
• from one person to another during vaginal or anal sex, or by sharing sex toys
• by direct genital contact – you don’t need to have penetrative sex (vaginal or anal)
• by skin to skin contact with the affected area during sex, if the virus is active on the skin outside of the area protected by a condom or dam (a latex or soft plastic square)
• if you receive oral sex (going down, giving head) from someone who has a cold sore or is just about to get one
• if a person with an active herpes sore on the hand or finger touches a partner’s vagina, genitals or anal area.

If you're pregnant it’s possible to pass the virus to the baby if you’re having your first outbreak at the time of giving birth (see page 13).

If you already have one type of herpes simplex virus it’s still possible for you to get the other type although you may not notice symptoms.

You can’t get genital herpes from hugging, sharing baths or towels, from clothing, from swimming pools, toilet seats or from sharing cups, plates or cutlery.

Can I pass the virus to a partner when I have no signs or symptoms?
In some people, the body can shed the virus from the affected skin or mucous membranes without there being any signs or symptoms of genital herpes. This is called asymptomatic shedding.

It’s possible to pass the virus on during periods of asymptomatic shedding but for most people the risk is low. Shedding is higher in the first year after infection and in people with frequent outbreaks. When there’s a long gap between outbreaks, asymptomatic shedding is less likely to take place.

What are the signs and symptoms of genital herpes?
Many people won’t have any visible signs or symptoms at all, or won’t be aware of them.

Some people will get symptoms within 2-14 days of coming into contact with the virus. In others, the virus may be in the body for weeks, months or years before signs or symptoms appear. So if you get symptoms it doesn’t necessarily mean you’ve only just become infected.

If you do get signs or symptoms, they usually follow a pattern.

You may feel generally unwell with flu-like symptoms, which might include fever, tiredness, headache, swollen glands, aches and pains in the lower back and down the legs or in the groin. This may be followed by:
• stinging, tingling or itching in the genital or anal area
• discharge from the vagina
• discharge from the urethra (tube where urine comes out)
• small, fluid-filled blisters which could be in the genital or anal area, on the buttocks, or at the top of your thighs; these burst within a day or two, leaving small, red sores which can be very painful
• pain when passing urine (peeing) caused by urine flowing over the sores.
What are the signs and symptoms of recurrent genital herpes?
Signs and symptoms of recurrent outbreaks are usually milder than with the first outbreak and clear up more quickly (in about a week).

There’s often an early warning tingling sensation before an outbreak. The blisters and sores are usually fewer, smaller, less painful and heal more quickly. They normally appear in the same part of the body as in previous outbreaks but in some people they may appear nearby.

How will I know if I have genital herpes?
You can only be certain you have genital herpes if you have a check-up when you’ve got signs or symptoms. You could have genital herpes even if a partner has never had an outbreak.

It’s possible to have more than one sexually transmitted infection at the same time. A check-up for infection is recommended if:
• you or a partner have a new diagnosis of genital herpes
• you or a partner have, or think you might have, symptoms
• you’ve recently had unprotected sex with a new partner
• you or a partner have had unprotected sex with other partners
• a sexual partner tells you they have a sexually transmitted infection
• you have another sexually transmitted infection
• you’re pregnant or planning a pregnancy.

Having genital herpes may mean you’re more at risk of getting HIV from a sexual partner who’s living with HIV. If you’re living with HIV and have genital herpes you may be more likely to pass HIV on to a partner. However, effective HIV treatment can suppress HIV in the body. This is known as having an undetectable viral load and means HIV can’t be passed on to a partner.

How soon after sex can I have a check-up?
You can have a check-up as soon as you have signs or symptoms. There’s no routine test for genital herpes if you don’t have signs or symptoms.

What does the check-up involve?
In many cases, a doctor or nurse may diagnose genital herpes by looking at the affected skin.

They’ll want to confirm this by taking a swab of fluid from the infected area, if they can. The swab will be sent to a laboratory. The result will usually be known within 1–3 weeks. Some clinics may be able to give you the result earlier, within 1–2 days.

A swab looks a bit like a cotton bud, but is smaller and rounded. It’s wiped over the parts of the body that could be infected and easily picks up samples of fluid. This only takes a few seconds and may sting for a moment if the blisters and sores are tender.

There’s a specific blood test that can be done to look for antibodies to the virus. This isn’t used as a routine test for genital herpes and may not be reliable.

Cervical screening tests (smear tests) and routine blood tests don’t detect the herpes simplex virus.

How accurate are the tests?
No tests are 100% accurate. It’s easier to diagnose genital herpes at the beginning of an outbreak when it’s possible to take a sample of fluid from a blister or sore before it starts to heal. An
accurate diagnosis will depend on the amount of virus present on the skin at the time, the stage of the blisters or sores and the type of test used. The doctor or nurse will talk to you about how accurate your test result might be.

Where can I get a test for genital herpes?
A genital herpes test can be done at:
- a genitourinary medicine (GUM) or sexual health clinic
- some general practices (ask a doctor or practice nurse)
- some contraception clinics and young people’s services.

Choose the service you feel most comfortable with. Testing can only be done when you have symptoms on the skin surface as a swab has to be taken from the affected area.

Will I have to pay for tests and treatment?
All tests are free through NHS services. Treatment is also free unless you go to your general practice when you may have to pay a prescription charge for the treatment.

What’s the treatment for genital herpes?
The aim of the treatment is to relieve the pain, and to prevent the virus from multiplying.
- Treatment is recommended when you have the first outbreak as this may provide some relief.
- Treatment is usually started within five days of the start of the first outbreak and while new blisters or sores are still forming. You take antiviral tablets daily (usually two or three times a day) for five days. There are several different antiviral tablets that can be used.
- Some people find it helpful to take antiviral treatment when they get another outbreak of genital herpes. You may be given some tablets to take at home. These need to be started as soon as the outbreak begins and are usually taken for 1–3 days.
- People who have repeated outbreaks (usually more than five in a year) may be given a long course of the tablets to reduce the number of outbreaks. This is known as suppressive therapy. It also reduces asymptomatic shedding (see page 4) and for most people it stops outbreaks completely, while you’re taking the tablets.
- If you’re pregnant, or trying to get pregnant, tell the doctor or nurse so they can talk to you about pregnancy and herpes simplex. If you have an outbreak of herpes in pregnancy it can be safely treated (see page 13).
- As genital herpes is caused by a virus and not bacteria, antibiotics won’t help.
- The treatment you can buy for facial cold sores isn’t suitable for genital herpes.

Is there anything I can do to ease the discomfort?
There are several things you can do to ease the discomfort and speed up the healing process.
- Apply a local anaesthetic ointment such as lidocaine. This will help relieve the pain. You can buy it from the pharmacy.
- Gently bathe the area using cotton wool and a warm salt water solution (1 teaspoon of salt to half a litre of water).
- Apply petroleum jelly. Be aware that this can damage latex (rubber) condoms, diaphragms or
caps, making them less effective.

- Apply an ice pack. Put ice cubes in a plastic bag, wrap them in a clean towel or flannel and hold on the sores for up to an hour or so. Don’t put ice directly onto the skin.
- Take a cool shower to soothe the sores.
- Avoid washing too often, and dab the affected area gently to dry it.
- If urinating (pee) is painful, urinate in a warm bath or shower.
- Wash your hands before touching the blisters or sores. This helps to avoid introducing bacteria which may cause an infection and delay the healing process.
- Drink extra fluids, such as water.
- Wear loose clothing.
- Use a mild pain-relieving drug, if you need to.

When will the signs and symptoms go away?
Outbreaks of genital herpes last a different length of time in each person and will depend on your general state of health and whether this is the first or a recurrent outbreak. The first outbreak may last from 2–4 weeks in total.
- Flu-like symptoms usually last for about a week.
- Individual sores take around 5–10 days to heal. Once the sores start healing they’re less painful.
- Pain and irritation can last up to two weeks or sometimes longer.

The signs and symptoms of a recurrent outbreak of genital herpes usually last for a shorter time than the first outbreak.

Can I prevent further outbreaks?
Outbreaks can be triggered by different things in different people. If you notice a pattern, you might be able to make changes that will help prevent further outbreaks.
- Some people find that these are triggers:
  - being ill, run down, tired or stressed
  - different times in the menstrual cycle
  - friction from sex or masturbation; using a lubricant can help
  - ultraviolet light on the affected skin area (such as from sunbathing or using sunbeds)
  - tight clothing and nylon or lycra underwear
  - drinking alcohol or smoking.

Outbreaks can eventually stop altogether. This can be within 18–24 months for many people, although it may take much longer for others. Suppressive therapy can prevent further outbreaks (see page 9).

Do I need a follow-up appointment?
Not necessarily. If the doctor or nurse would like to test for other sexually transmitted infections, you may be asked to go back when the outbreak is over. This is a good time to ask the doctor or nurse any other questions you may have.

Contact the clinic if you have other questions or are troubled by recurrent outbreaks in the future.

What happens if genital herpes isn’t treated?
It’s not essential to have treatment as genital herpes will clear up by itself. However, prompt treatment at the start of an outbreak can reduce the time the outbreak lasts, help the healing process and reduce the risk of you passing the virus on to someone else.
How soon can I have sex again?
It’s strongly advised that you don’t have any sexual intercourse (including vaginal, anal or oral sex) if you know an outbreak is coming, while you have signs and symptoms, and for a week after the symptoms have gone.
This is to help prevent you passing the virus on to someone else. Having sex while you have blisters or sores can also delay the healing process.

Will I know how long I’ve had the virus?
The genital herpes test can’t tell you how long the virus has been there. If you feel upset or angry about having genital herpes and find it difficult to talk to a partner or friends, don’t be afraid to discuss how you feel with the staff at the clinic or general practice or with a support group.

Should I tell my partner(s)?
If the test shows you have genital herpes, it isn’t usually recommended that a partner has a check-up unless they have signs or symptoms. You’ll be advised to tell your sexual partner(s) but it’s not compulsory. The staff at the clinic or general practice can discuss with you how to do this. The Herpes Viruses Association (herpes.org.uk) has advice on talking to a sexual partner about herpes.
If a partner is pregnant, you should use condoms or dams (latex or soft plastic squares) during sex and avoid sex for the last six weeks of the pregnancy. This is to reduce the risk of passing the virus to your partner and the baby (see page 13).

Does genital herpes affect my fertility?
No. Genital herpes doesn’t affect fertility.

What happens if I have genital herpes when I’m pregnant?
Genital herpes can be safely treated during pregnancy.
It’s possible for the virus to be passed to the baby during the birth or, extremely rarely, before the baby is born.
If you get genital herpes before you get pregnant, or during the first six months of your pregnancy, the risk of passing it on to your baby during the birth is very low. You’ll usually be able to have a vaginal delivery. However, it’s important to tell your midwife or obstetrician that you have genital herpes so they can talk to you about your options and help you to plan the birth. You should also be seen by a sexual health doctor.
If you get genital herpes for the first time during the last three months of your pregnancy, especially within six weeks of your due date, you won’t have time to pass on immunity to your baby. This can mean the virus may be passed to the baby during vaginal delivery; you’ll be advised to have a caesarean delivery.
With repeat outbreaks of genital herpes during pregnancy, the risk of passing the virus to the baby during the birth is very low. You’ll usually be able to have a vaginal delivery. Treatment with antiviral tablets three times daily should be considered from 36 weeks of pregnancy onwards. This can reduce the possibility of an outbreak occurring when you’re due to give birth.
You can get more information on genital herpes in pregnancy from www.rcog.org.uk.
Does genital herpes cause cervical cancer?
No. Genital herpes doesn’t cause cervical cancer.

How can I help protect myself from genital herpes and other sexually transmitted infections?
The blisters and sores are highly infectious. If you or a partner have cold sores or genital herpes:
- avoid kissing when you, or a partner, have cold sores around the mouth
- avoid oral sex when you, or a partner, have mouth or genital sores
- avoid any genital or anal contact when you, or a partner, have genital sores or blisters, or if you feel an outbreak starting.

The following measures will help protect you from genital herpes and most other sexually transmitted infections, such as HIV, chlamydia and gonorrhoea. It’s possible to get a sexually transmitted infection (STI) by having sex with someone who has the infection but has no symptoms. You can also have an STI yourself without knowing it. These steps will also help protect you from getting or passing on an infection without knowing it.
- Use condoms (external/male or internal/female) every time you have vaginal or anal sex.
- If you have oral sex, use a condom to cover the penis, or a dam (latex or soft plastic square) to cover the vulva (external female genitals) or anus.
- Visit www.sexwise.org.uk for more information about using condoms.
- Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.

Using a service
- Wherever you go, you shouldn’t be judged because of your sexual behaviour or who you have sex with.
- All advice, information and tests are free.
- All services are confidential.
- All tests are optional and should only be done with your permission.
- Ask as many questions as you need to – and make sure you get answers you understand.
- The staff will offer you as much support as you need, particularly if you need help on how to tell a partner.

More information and advice
The Herpes Viruses Association provides confidential advice and information about genital herpes. Call 0845 123 2305 (Monday to Friday, 11am-8pm) or visit herpes.org.uk
The National Sexual Health Helpline provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123. It’s open Monday to Friday from 9am-8pm.
For more information on sexual health visit www.fpa.org.uk or www.sexwise.org.uk
Information for young people can be found at www.brook.org.uk

Clinics
To find your closest clinic you can:
- use Find a Clinic at www.fpa.org.uk/clinics
- use FPA’s Find a Clinic app (iPhone or Android).
Details of general practices and pharmacies in England are at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland, details of general practices are at www.nhsinform.scot and in Northern Ireland at www.hscni.net
A final word

This booklet can only give you general information.
The information is based on evidence-based guidance produced by The British Association for Sexual Health and HIV (BASHH) and The Royal College of Obstetricians and Gynaecologist (RCOG) with kind assistance from the Herpes Viruses Association.