The more sexual partners you have, the greater your chance of getting a sexually transmitted infection.

Do not have intercourse with anyone who has an infection or is being treated for an infection. Also, talk with a new partner before having sex about any previous infections that they have had.
GENITAL HERPES

Genital herpes is a recurrent, lifelong viral infection. Two types of HSV are known: HSV-1 and HSV-2. Most cases of recurrent genital herpes are caused by HSV-2. At least 50 million persons in the United States have a genital HSV infection. Most persons infected with HSV-2 have not been diagnosed. Many such persons have mild or unrecognized infections but shed virus intermittently in the genital tract.

SYMPTOMS

The first attack of HSV (the initial infection) usually occurs within two days to three weeks after sexual contact with a contagious person. Flu-like symptoms (swollen gland, fever, headache, joint pain, and tiredness) are often present. Next, fluid-filled sores appear in the area of exposure. They may itch, burn or be quite painful. Sometimes urination is painful and there may be a discharge from the penis or vagina. Within two to three weeks, the sore crusts over, form scabs, and heal completely.

Not everyone has these symptoms. In some people, the first infection may be so mild that it is not noticed. After the initial infection, the sores may return, usually in the same place. In most cases they are fewer in number, less severe, and take a shorter time to heal (average 10 days).

Some people with HSV have symptoms just before they get the sores. These warning symptoms may include itching, burning, or numbness where the sore appears. This can happen two hours to two days before the sore starts to form.

DIAGNOSIS

Clinical diagnosis of genital herpes is difficult especially in the absence of typical blisters or sores. If ulcers or lesions are present, a cell culture can be done to confirm the diagnosis. The test is most accurate within the first 2-3 days of the symptoms appearing.

TREATMENT

At present, herpes can be treated, but not cured. Antiviral drugs partially control the symptoms and signs of herpes episodes. Suggestions to help reduce pain: Take a warm tub bath with Epsom salts or baking soda. Keep infected area dry as moisture may slow healing. Wear loose-fitting clothing to help prevent rubbing. Hold a warm cloth or ice pack on the affected area for a few minutes several times a day.

Aspirin and similar medicines will help relieve pain and fever.

PREVENTION

All people with genital herpes should inform their current and future sexpartner(s)they have genital herpes. Sexual transmission of HSV can occur when no symptoms are present. This happens most frequently in the first 12 months after acquiring HSV. All people with genital herpes should remain abstinent from sexual activity with uninfected partners when sores or prodromal symptoms are present. The sex partners of people with HSV-2 are likely to benefit from evaluation and counseling.

Symptomatic partners should be evaluated immediately.

Always use condoms, but avoid intercourse completely (including oral and rectal sex) when lesions or blisters are present. There is evidence to conclude condoms prevent HIV transmission in males and females, and that they could reduce the risk of gonorrhea for men. Additional studies are needed to determine effectiveness for other STD’s including Herpes.

Do not use feminine sprays or douches. They can change the normal balance of bacteria in the vagina and increase your chances of getting a vaginal infection.

REFERENCES: Sexually Transmitted Diseases, 3rd Edition | CDC/MMRW Guidelines for the Treatment of Sexually Transmitted Diseases, 2006
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