

# Herpes

## **What causes herpes?**

Herpes is caused by a virus. There are eight known herpes viruses. Type I and Type II Herpes viruses can be found as both oral or genital herpes. Varicella causes chicken pox and herpes zoster causes shingles. Cytomegalovirus (CMV) and Epstein Barr virus (EBV) cause infectious mononucleosis and Type 6 Herpes Virus causes Roseola (Sixth Disease).

## **I keep getting herpes outbreaks. Why don't I get immunity after the initial infection like measles or mumps?**

After the initial infection, immunity does develop. Although it is incapable of eradicating the infection, the immunity decreases the severity and frequency of recurring infections. After the initial infection, the herpes virus migrates to nerves in the spine or brain. The virus can then intermittently migrate to the skin where that particular nerve travels to cause a recurrent outbreak.

## **What triggers a recurrence?**

Oral herpes can be stimulated by fever, infection and sunlight (fever blisters). Definite triggers for genital herpes have not been identified. Trauma, stress, diet and sexual activity have been implicated.

## **Can genital herpes be transmitted by a toilet seat?**

Genital herpes in adults, either Type I or Type II, is sexually acquired even if partner has no symptoms. There is no evidence of herpes transmission from infected secretions on toilet seats, bathing suits or towels. Oral to genital transmission is common.

## **I have recurrent genital herpes. Can I transmit the infection to my baby at delivery or after delivery?**

The greatest risk to a newborn is when the mother has a primary (first time) outbreak of genital herpes during the third trimester of pregnancy. Recent studies show 35% of babies born to mothers with an initial episode of herpes will become infected with a vaginal delivery. In recurrent herpes outbreaks 1-2% of the babies will develop an infection when delivered vaginally. The current recommendation is that a Cesarean section be performed if the woman has an active lesion or any symptoms of an outbreak during labor.

## **If I develop herpes during my pregnancy can I be treated?**

Pregnant women with initial genital herpes should be treated with antiviral drugs. Women with a history of herpes can take medication during the last month of pregnancy to reduce the incidence of an active herpes outbreak.

## **How can I tell if this is the first infection or a recurrent infection?**

The first outbreak of herpes is usually quite severe. Symptoms include blisters, a high fever, swollen lymph glands and severe pain. A blood test can show if IgM (recent infection) antibodies are present. IgG antibodies are evidence of an older or recurrent infection and show long term immunity. Type I and Type II antibodies are associated with both oral and genital herpes. Type II may be positive with cold sores or fever blisters and do not mean the presence of genital herpes.

## **I have had sex with only my partner in the past year. He denies having had herpes in the past and now I have herpes. Is he being unfaithful?**

No. Either of you could have acquired the infection in the past but was unaware of mild symptoms. IgM and IgG antibodies could possibly show recent versus an old infection.

**I have herpes. My partner has been tested and has never had herpes. How can we prevent infection?**

Transmission risk can be reduced by avoiding sex when lesions are present or any symptoms that occur before a lesion breakout. Consistent use of condoms may reduce the risk of transmission. Suppressive therapy with antiviral drugs may also reduce transmission. Infections can occur however, even without any symptoms.

**I have more questions on herpes. Is there a web site I can access?**

Try [www.ashastd.org/hrc/index.html](http://www.ashastd.org/hrc/index.html)