

## HSV: THE ULTIMATE GUIDE

HSV (Herpes Simplex Virus) is one of the STIs that creates the most distress in our client population, due to misconceptions, myths, and lack of accurate knowledge about the virus. HSV diagnosis often does not come with hard black-or-white answers regarding infection, transmission, and treatment that we all desire when it comes to our sexual health. We hope that this guide can help alleviate some of those feelings.

### **What is HSV?**

Genital herpes is a common STI that can cause blisters and open sores on the genital area. Genital herpes is caused by the herpes simplex virus (HSV).

There are two types of HSV. HSV-1 typically causes oral infection such as cold sores, while the HSV-2 mainly causes genital infection. However, both kinds of HSV can infect the genital area. About 20% of adults are infected with HSV-2.

### **How did I get HSV/How would I get HSV?**

The herpes virus is most often transmitted between partners during unprotected oral, anal, or vaginal sex with an infected partner. Herpes is spread through direct contact with the infected area.

HSV-1 is most commonly transmitted by oral or genital sex, while HSV-2 is transmitted by unprotected anal or vaginal intercourse. If someone receives oral sex from a partner with a history of cold sores, it is possible they could get HSV-1 (oral herpes) on their genitals. Rates of HSV-1 genital infections have risen with the popularity of oral sex. Without proper sex education regarding safer oral sex practices and with the cultural beliefs that may not consider oral sex as “real sex,” STIs like HSV have flourished.

An infected person can pass it on to a baby during vaginal childbirth. If you are pregnant, talk to your doctor to discuss ways to reduce transmission risk.

There is no risk of becoming infected after exposure to environmental surfaces such as door knobs, toilet seats, utensils, and bed sheets. There is some risk of exposure from personal items, such as towels used on the genital area and underwear.

When a person is infected with HSV, the virus is not contagious 100% of the time. The risk of spreading the infection is much greater when a person has signs or symptoms of active infection. However, it is still possible and common to spread HSV infection even when no symptoms or visible sores are present. This is called “asymptomatic shedding.”

### **How can I prevent getting or spreading HSV?**

Using barrier methods, such as condoms or dental dams, can help prevent the spread of HSV. Because HSV can live on the skin surrounding the groin area, including the upper thighs, condoms do not offer complete protection against this STI. However, they still offer some protection, so we highly recommend using them!

Avoid having sex with anyone who is visibly infected or who has had a recent cold sore.

HSV can be spread even when you or your partner are not showing symptoms. It is always best to discuss your STI status and risk with your partners as well as to use barrier methods.

### **How can I tell if I have HSV? Can I test for it?**

Many people may not know they are infected with HSV, or have genital herpes, as they may not have any symptoms. People with no symptoms can still pass on the virus.

Many infected individuals will have recurrent episodes of genital herpes sores for several years. The symptoms of genital herpes can vary widely, depending upon whether you are having your first outbreak or a recurrent outbreak.

If a partner tells you that they have tested positive for HSV, take a look at your own genitals, with a mirror if necessary. Check for any symptoms that correspond with what is described below. If you have a lesion (sores, blisters), it is important to **request an urgent appointment** for diagnosis and treatment with your local sexual health clinic, STI clinic, university clinic, walk-in clinic, or family doctor. Treatment should be started as soon as possible. A doctor can swab any lesions and send the sample to the lab to confirm whether or not you have been infected with HSV. Testing needs to be done within approximately 48 hours after the onset of the sore. However, if you **do not** have any lesions (sores, blisters) or symptoms, you **do not** need to make an appointment with a medical professional. There are no blood tests available in Nova Scotia that allows you to find out if you are carrying HSV. Keep an eye for lesions, as symptoms can occur from 2 – 20 days after exposure, although most occur after one week. Some people will never show symptoms. Continue with your regular STI testing schedule and consider getting tested for sexually transmitted blood-borne infections (STBBIs).

### **Primary Outbreak:**

In most cases the first herpes outbreak is the most severe. Symptoms tend to be more severe in people with vaginas than people with penises. The first outbreak usually occurs within a few weeks after infection with the virus. Symptoms typically appear within two to twenty days of infection.

Symptoms may start with a tingling or burning sensation where the virus first entered the skin and typically includes blisters that become painful ulcers. With HSV-2, the primary outbreak may cause multiple blisters or sores in the genital area. The most common areas of infection and sores include the vagina, vulva, penis, scrotum, buttocks, anus, and thighs. Blisters on the penis or outer labia may crust over and heal. New lesions may develop for up to a week after the first group appears. Many people may be confused by what a lesion looks like. Please note that HSV lesions do not have a white pus-filled head like a pimple or an ingrown hair.

In addition to genital ulcers (external or internal), other primary outbreak symptoms (that tend to resolve after approximately 15 to 23 days) of genital herpes include:

- Flu-like symptoms (fever, headache, sore muscles, and joint pain)
- Tender and/or swollen lymph nodes in the groin
- Pain while urinating
- Genital pain

- Vaginal or penile discharge

A small percentage of people can develop headache, nausea and vomiting, or difficulty urinating when the herpes infection affects the nervous system. Inflammation in the nervous system (aseptic meningitis) can occur in up to 25% of cases.

#### **Recurrent Infections:**

It is possible to have a recurrence a few years after the initial HSV infection was acquired. Recurrent infections tend to be slightly less severe than initial infection.

Ulcers may develop in the same area as those of the first outbreak, or in new areas. It is also possible to develop lesions in areas where there was no direct initial contact. Other symptoms include:

- A slight tingling, itching, or burning may be a sign that an active outbreak is coming
- Outbreaks can be triggered by stressors (such as illness, surgery, emotional stress, lack of sleep), the menstrual cycle, sex, surgery, alcohol use, and some medications
- Infection from oral sex can cause sores inside the mouth or on the lips
- Symptoms resolve after approximately 9 to 11 days

You should see a doctor or nurse to be tested for HSV the first time you have symptoms, and/or if your symptoms are unusually severe. In Nova Scotia, there are no tests available that allow to you find out if you are carrying either of these viruses unless you have active lesions.

Herpes is tested by swabbing an active lesion for cells and/or fluid. Tests are most effective when the swab is collected as soon as possible after the sore appears.

Sexual partners from the 60 days prior to early symptom onset should be informed if you have an outbreak of herpes.

#### **What can I do about HSV? Is there a cure?**

There is no cure for genital herpes so treatment is not required, but is recommended, especially if you are sexually active and/or having symptoms. The infection can be managed with antiviral medication and self-care measures to decrease the duration and severity of outbreaks, while also reducing the risk of spread to sexual partners. It is best to start antiviral medications as soon as possible after initial outbreak begins.

Self-care steps to help reduce discomfort and manage outbreaks include:

- “Sitz bath” or bathtubs where you can sit in warm water with or without Epsom salts for about 20 minutes. Avoid bubble baths.
- Wear loose clothes during an outbreak.
- Practice good hand-washing and do not contact other areas of your body after touching an infected sore. In particular, do not rub your eyes or touch your mouth after touching infected skin.
- Avoid further irritation by keeping the infected area clean and dry. When drying actively infected areas use a hair dryer or lightly pat the area dry.
- Wash bath towels before reusing and wash underclothing frequently.
- A healthy lifestyle including proper diet, adequate rest, and low stress levels can improve your immune system, and reduce the likelihood of outbreaks.

- Drinking large amounts of fluids will decrease pain during urination, and urinating in the bath may be less painful.
- Take over-the-counter pain medicine such as acetaminophen (Tylenol) or ibuprofen (Advil, Motrin). Avoid aspirin (acetylsalicylic acid, ASA).
- Over-the-counter creams and ointments are generally not recommended.

You should also let your doctor or nurse know if you are worried or upset about your herpes. We may be able to help you locate supportive services.

### **What does HSV mean for my health and sex life?**

First things first, you are not alone! 20% of adults have HSV-2, and it is estimated that 90% of sexually active adults have been exposed or are infected with either type of HSV. It is easy to feel like you are the only person you know with HSV. The most challenging part about HSV is that there is no hard “yes or no” answers about a diagnosis without experiencing symptoms, such as lesions. Not knowing whether or not you have it can be very difficult psychologically. What is important to remember is that while genital herpes may be unpleasant, they are not dangerous. As long as you are participating in regular STI testing, you are doing the best you can for your health.

HSV has been a part of human existence since before we were even human! HSV-1 entered our evolutionary chain before we had even developed into homo erectus. Evidence of HSV-2 was found on Nutcracker Man, an early hominid. HSV was even written about by Hippocrates! HSV was simply considered fact of life that did not necessitate treatment for most of history. The stigma around genital herpes only began in the 1970s. Pharmaceutical companies, having created a new drug to treat HSV, needed to create a market for their product. They started a “disease awareness campaign” and started using words like “incurable,” “sufferers,” “victims,” and “sexual leprosy.” They participated in what is now called “disease mongering” in order to reframe how people see HSV into something that was considered dirty, permanent, and immoral. Prior to this campaign, many research studies did not even include HSV in lists of STIs. New studies now say that the psychological effects of a diagnosis of HSV are far more severe than the physical consequences. HSV is considered the second most stigmatised STI after HIV.

It is completely normal to feel all kinds of emotions when you are told you have HSV. Some common feelings include guilt, shame, anger, anxiety, and grief. Just remember, you didn’t do anything “wrong” or “bad”. Similar to getting a cold or the flu, you were exposed to an extremely common virus and your immune system was unable to fight it off. Simple as that. If you developed a cold, you probably wouldn’t beat yourself up about shaking hands with someone or not washing your hands enough. In the same way, you shouldn’t beat yourself up about how you got HSV. Although there are steps you can take to reduce your risk, unless you choose abstinence for life, it’s nearly impossible to avoid risk altogether.

HSV is not a “reportable” infection. This means that unlike chlamydia or gonorrhea, you do not need to contact Public Health or your past partners to inform them of your diagnosis. However, we recommend open and honest communication between partners to enhance sexual health and well-being.

Prior to discussing things with a partner, think about addressing any of your own questions or issues about HSV. This is to help establish your own comfort level and is where knowledge really does equal

power. One of the most important aspects of coping with HSV, and helping partners develop a good understanding of the virus, is getting factual information and avoiding myths and hype. It may also be a good idea to have resources to which you can direct a partner, so you know they turn to trustworthy sources for information, such as our website, [hshc.ca](http://hshc.ca)!

Remember that having HSV does not mean you have done anything wrong. Having HSV simply means you, like so many others, have been exposed to a common virus. It is not a reflection on you, your character, or your values. Conversations with partners should not be viewed as making a “confession” or offering an “apology”.

There is also no way to know that your partner is not already infected with HSV, as many people carry the virus but never develop symptoms. In Nova Scotia, we do not have a test to determine whether someone (without symptoms) is carrying the virus and/or is contagious.

Using a barrier method, such as condoms and dental dams, during sexual activity is the best way (besides abstinence) to reduce the risk of spreading HSV. We recognize that in long term partnerships, this is not always feasible or desirable. What you do to manage HSV in a long-term partnership can be discussed with a doctor or nurse, but some good guidelines include:

- Abstaining for sexual activity right from the start of the burning/tingling sensation until all lesions (sores, blisters) have completely healed
- Not sharing sex toys at all, or keeping sex toys clean, and/or using a barrier method on them
- Protecting your immune system with a healthy lifestyle
- Not sharing personal products such as razors, bath towels, and underwear
- Decrease the risk of spreading herpes by taking an antiviral medicine every day

By themselves, HSV-1 and HSV-2 are generally not considered a serious health risk. Some less common long-term consequences include:

- Life-threatening infections of the central nervous system can occur in babies who acquire herpes from their parent during childbirth
- Very rarely, HSV can cause meningitis or encephalitis (inflammation of the brain)
- Herpes infection of the eye can cause scarring of the cornea and blindness
- Herpes increases the risk of transmission of HIV, due to the open sores. People with HIV can have particularly severe outbreaks of HSV, which can be a sign they have progressed to have AIDS.

### **What are some myths about HSV?**

#### **Only people who have casual sex have HSV:**

It is true that a higher number of sexual partners over the course of a lifetime does correlate with a higher risk for STIs, including HSV. This is not because of any moral judgment concerning "casual" sex as compared with "committed" sex, but simply because the more sexual partners you have, the more likely you will have a partner who (knowingly or unknowingly) is carrying an STI. However, STIs can be passed along as readily in a loving, long-term relationship as in a one-night stand.

#### **In a monogamous relationship, an HSV diagnosis means someone has cheated:**

This myth has been responsible for a great deal of anger, confusion, and heartache. This myth fails to take into account one of the most mysterious aspects of HSV: its ability to lie latent. While most primary infections develop 2 – 20 days from the initial exposure, the virus can remain in the body for weeks, years, or even a lifetime, without any symptoms. An HSV infection may produce lesions after a latent period of months or even years. There is simply no way to find out how long a particular infection has been in place, or to trace it back to a particular partner. In a monogamous relationship, therefore, just as in a casual relationship, an affair, or even in an interval of no sexual relationships at all, an HSV diagnosis means only that the person contracted an HSV infection at some point in their life.

**When you have an STI check or a cervical smear it always checks for herpes.**

Routine STI testing and cervical smear tests do not screen or test for herpes. Tests for herpes can only be done if a person has symptoms and a swab is taken directly from the lesion.

**If you have any further questions regarding HSV, please give us a call at 902-455-9656 to book an appointment with one of our doctors.**