

Understanding Genital Herpes

with H. Hunter Handsfield, MD

A companion piece to the video “Understanding Genital Herpes” where Dr. Handsfield answers some common questions about herpes testing, treatment, and transmission. Watch the full video on www.sexualhealthTV.org.

Herpes Testing

There are different tests available for herpes simplex virus (HSV). Some tests are done when herpes lesions (blisters, sores, ulcers) are present and can detect the virus directly. When there are no lesions, blood tests can be done that detect specific HSV antibodies.

Tests used when a person has symptoms include culture and Nucleic Acid Amplification Testing (NAAT). Both culture and NAAT, or DNA, tests can identify the specific herpes virus type someone is infected with, but NAAT methods are more sensitive. Culture can easily miss infections and give false negative results. NAAT methods are the preferred method, with PCR as the most-widely used NAAT method.

Dr. Handsfield says:



“The DNA tests in general are more sensitive, that is they’ll pick up more infections than culture does. Culture can easily miss an infection, especially if an outbreak is starting to heal.”

Dr. Handsfield advises:

“There is a big silver lining about herpes. It is so mild for most people that half of all infected people don’t even know they’ve got it. And of the rest you can typically control the disease with antiviral therapy.”



Prevention Strategies

While the risk of transmission is never zero, it can be greatly reduced by following a three-part prevention strategy: avoiding sex during outbreaks, using condoms, and taking daily antiviral therapy. **Condoms** reduce the risk of transmission of herpes *if used correctly and consistently*. **Antiviral therapy** with valacyclovir, taken by the partner with herpes, has proved to reduce transmission to an uninfected partner. Acyclovir or famciclovir also may help reduce transmission but have not been studied.

When thinking about prevention, it is helpful for both partners to know their herpes status. If both are infected with the same virus type, there is then no concern about passing the virus on. People are resistant to new infections with the HSV type they already have, so couples don’t ‘ping-pong’ the infection back and forth.

Genital Herpes: HSV-1 vs. HSV-2

There are two types of herpes simplex viruses: HSV-1 and HSV-2. The majority of oral herpes cases are caused by HSV-1 and most genital herpes cases are caused by HSV-2. However, type-1 or type-2 can occur in either the genital or oral area. In recent years, about half of new genital herpes cases have been caused by HSV-1, largely due to an increased frequency of oral sex.

Knowing the virus type is important in understanding what to expect and determining treatment options. For example, those with genital herpes caused by HSV-1 have far fewer outbreaks than those with genital herpes caused by HSV-2. For those that have genital herpes caused by HSV-2, recurrences are more frequent, so more of those with HSV-2 than HSV-1 benefit from suppressive therapy.

Dr. Handsfield on the importance of knowing virus type:

“The average frequency of outbreaks of genital HSV-1 after the initial one is low. Forty percent of people have no recurrent outbreaks at all, at least not in the next year or two. HSV-2, by contrast, recurs in those who have symptoms anywhere from 3 to 10 times per year.”

