



Herpes simplex

What is the aim of this leaflet?

This leaflet has been written to help you understand more about herpes simplex. It tells you what it is, what causes it, what can be done about it, and where you can find out more about it.

What is herpes simplex?

Herpes simplex is an infection of the skin with the herpes simplex virus. This can be caught from another person after direct skin-to-skin contact, mouth contact, or sexual contact. The first time the virus is caught, it does not always show up on the skin, but can lie dormant within special parts of the sensory nerves (the sensory nerve ganglia). Later in life, the virus can become active again and appear as herpes simplex on the skin. The commonest areas to be affected by herpes simplex are the lips (as cold sores) and the genital area (as genital herpes).

Is herpes simplex hereditary?

No.

What does herpes simplex feel like and what does it look like?

The very first infection is often un-noticed as it may only produce a short-lived redness of the skin. Sometimes, however, a first infection can make a person feel very unwell with a temperature, swollen lymph glands and soreness and blisters in the mouth and on the lips or elsewhere on the skin.

When the herpes simplex virus infection becomes active again, the first symptom is a burning or stinging pain at the affected site, followed by pink bumps and small blisters. The blisters quickly dry and crust over, and the areas usually heal over within a few days. Repeated attacks usually occur in roughly the same place each time.

If Herpes simplex virus infects the eye it causes pain, sensitivity to light and discharge and can cause scarring.

How is herpes simplex diagnosed?

Usually the appearance of skin affected by herpes simplex is enough to make a diagnosis. Sometimes a surface swab is taken, but getting the result usually takes a few days. If you think you have herpes in the genital area, you can be seen quickly at your local Genito-Urinary Medicine (GUM) or Sexual Health clinic.

Can herpes simplex be cured?

Symptoms clear in a few days or weeks, with or without treatment, though the virus will remain in a dormant state in the body. In a majority of patients, recurrent symptoms are mild and infrequent, or do not happen at all. For a minority, troublesome recurrences can usually be prevented by using oral anti-viral drugs or adopting lifestyle changes.

Things that encourage the virus to be more active are:

- Other infections such as colds or 'flu.

- Getting tired and run-down.

- Sunburn

- A skin injury, such as an operation or a graze, at the place where the virus shows itself at the surface

How can herpes simplex be treated?

Many mild cold sores need no specific treatment; but the general rule in treating herpes simplex is that all treatments work best if they start as soon as possible. It may be hard to know what is happening during a first infection; but in future episodes it is easier to spot the first signs of the virus becoming active, and so to start treatment early.

At the start of an episode of infection - when the area of skin is uncomfortable, tingling or painful - you may need to take a painkiller. Starting treatment with a drug to counteract the virus can help to lessen the severity of the attack and/or shorten it. The anti-viral treatments (aciclovir, famciclovir or valaciclovir) can be taken as tablets, which have few side effects. Be sure to follow the correct dose, as these treatments often need to be taken frequently. If the attacks are particularly frequent or bothersome, taking a tablet like aciclovir for several months can help to reduce their number, though it may not stop the attacks altogether. Aciclovir and famciclovir are also available as creams, but these do not work as well as the tablets. Other soothing skin treatments are listed below.

It would be sensible to seek medical advice if you are not sure of the diagnosis or if the treatments you have tried do not seem to help. To avoid delay in treating recurrences, your doctor may give you an extra course of tablets to be kept in

reserve and used at the first sign of a flare up. Once you have started this, you will need to order another course for the next episode. If the infection involves the eye it is important to seek medical advice promptly.

Genital herpes can be passed on to a baby during delivery as it passes down the birth passage. Women who have genital herpes should let their obstetrician know during the antenatal period so that measures can be taken to protect the baby.

What can I do?

If you have recurrent attacks of herpes simplex, you may be able to avoid things that seem to trigger an attack:

- Avoid getting burnt in the sun or by a sun bed.

- Avoid getting stressed or run down.

- Avoid anything else that you have noticed seems to bring on an attack.

- Keep healthy and get enough sleep.

Try also to avoid spreading the infection to someone else. If the infection is active on your skin, do not let that area touch another person's skin. People at particular risk of developing a severe infection if they catch the virus are:

- The very old.

- The very unwell.

- People, especially children, with eczema.

- Anyone whose immune system is not working well, either because of treatments such as steroids, or because of illnesses such as AIDS.

Consider using the following treatments on the skin:

- Sometimes a cool wet compress helps.

- It may be helpful to keep a moisturising cream on the skin – e.g. petroleum jelly

- Wash the area gently; a salt bath or wash can help. Dry thoroughly but gently.

- Use an anti-viral cream on the surface.

Where can I get more information?

Patient support group: Herpes Viruses Association, 41, North Road, London, N7 9DP.

Helpline – 0845 123 2305

www.herples.org.uk

www.aad.org/pamphlets/index.html

(While every effort has been made to ensure that the information given in this leaflet is accurate, not every treatment will be suitable or effective for every person. Your own doctor will be able to advise in greater detail)

**BRITISH ASSOCIATION OF DERMATOLOGISTS
PATIENT INFORMATION LEAFLET
PRODUCED MARCH 2008**