

## PATIENT INFORMATION LEAFLET

# HERPES SIMPLEX

### WHAT ARE THE AIMS OF THIS LEAFLET?

This leaflet will 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 get more information.

### WHAT IS HERPES SIMPLEX?

There are two herpes simplex viruses. They are called herpes simplex type 1 and type 2. They cause skin infection. They can be transferred from person to person by direct skin-to-skin contact with the affected area when enough of the virus is present on it. This is usually when there is a lesion or soreness present. However, sometimes transmission may occur when there is only an itch or a tingle in the affected area. The most common areas of infection are around the mouth (known as cold sores), followed by the genital area (genital herpes) and the hands (whitlows). Most people only develop lesions in one area. It is very unlikely to transfer the infection to other parts of the body.

Once you have caught it, you will notice symptoms, such as sores or blisters, within 2 days to 2 weeks. Many catch it and never notice any symptoms. The virus remains dormant (asleep) in the sensory nerves close to the area where it was caught.

The virus can reactivate from time to time. This is called a recurrence. Blisters appear at the same place or nearby, on skin that is served by the same nerves (within a 'dermatome'). Their frequency and recurrences vary from person to person. For some people, symptoms appear several times a year, in others rarely or never. Recurrences affect the same area:

- facial infections can affect the face and head from the edge of the chin to the crown of the head.

- genital infections can affect the genitals, anal area, lower buttocks and, rarely, the back of the legs.

### IS HERPES SIMPLEX HEREDITARY?

No. You catch it through direct contact with the affected area of a person's skin when the virus is active. Itching, tingling and burning sensations on the skin may mean that the virus is becoming active. You should not let this area touch another person's skin from the onset of these symptoms until they stop, or a recurrence heals up. Herpes cannot be caught from towels, swimming pools, saunas or from toilet seats. However, it can be passed on through sharing sex toys, oral sex and sexual intercourse, when there is an active sore.

### WHAT DOES HERPES SIMPLEX FEEL LIKE AND WHAT DOES IT LOOK LIKE?

The very first infection is often unnoticed as it may only produce a short-lived **redness** of the skin. Sometimes, a first infection can make a person feel very unwell. They may have a raised body temperature, swollen lymph glands and soreness and blisters at the area where the virus was caught. This could be on the mouth, on the genitals or elsewhere on the skin where contact with the other person's infection took place.

Once the first stage is over, the virus will remain inactive. It may active again. The first symptom is often severe itching, or a burning or stinging pain at the affected site, followed by bumps and sometimes small blisters or ulcers. These dry out, and the area usually heals within a few days. Symptoms may recur at the same area or near it.

Cold sores close to the eye may be spread to the eye by touching or rubbing the eye with infected hands. If the eye gets infected, this

may lead to eye discharge, pain and scarring, if not treated. However, such cases are rare.

## HOW IS HERPES SIMPLEX DIAGNOSED?

Usually, the clinical appearance of the skin affected by herpes simplex is enough to make a diagnosis. A surface swab can be taken by a nurse or doctor to confirm this. This is then sent off and the result usually takes a few days.

If you think you may have herpes in the genital area, it will have been caught through sexual activity. Therefore, it is important that you attend your local sexual health clinic. This is because you could have caught another sexually transmitted infection (STI) at the same time, and you should get a full STI screening.

## CAN HERPES SIMPLEX BE CURED?

Symptoms clear in 7-10 days, with or without treatment, though the virus will remain in a dormant state in the body. In most patients, recurrent symptoms are mild and infrequent, or do not happen at all. Few people get troublesome recurrences. These can usually be prevented by using oral antiviral drugs.

Factors that may increase the risk of virus reactivation are:

- colds or flu; feeling tired and run down
- sun exposure on the affected area of your skin
- skin injury that has resulted in damage to the skin.

People are at particular risk of developing a severe primary herpes simplex infection if they are:

- elderly
- very ill
- **eczema** sufferers, especially children, who may develop widespread infection and should seek urgent medical attention
- persons with a compromised immune system due to medicines or illnesses that affect the immune system, such as HIV infection.

## HOW CAN HERPES SIMPLEX BE TREATED?

Many mild sores need no specific treatment. The general rule in treating herpes simplex is that all treatments work best if they are started as soon as possible. It may be difficult to know what is happening during a first infection. In future episodes it is easier to spot the first signs of the virus becoming active, so that you can 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.

Prompt treatment with an antiviral drug may prevent the episode altogether. It can certainly help to lessen the severity of the outbreak and/or shorten it. Antiviral treatments (aciclovir, valaciclovir, or rarely, famciclovir) can be taken as tablets. They have few side effects. Be sure to follow the correct dose (some of these treatments need to be taken up to 5 times a day). If frequent recurrent symptoms are a problem, antiviral medication can be taken daily to prevent them. 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.

To avoid delay in treating recurrences, your doctor may give you an extra course of tablets to be kept in reserve. You can use them at the first sign of a flare-up. If the infection involves the eye, it is important to seek medical advice promptly.

A baby may become infected with herpes during childbirth if it comes into contact with herpes simplex lesions. The risk is mainly if the mother is newly infected. For mothers with recurrent symptoms, the risk of infection is generally low. The mother may wish to discuss this with her obstetrician.

You should seek medical advice if you are not sure of the diagnosis or if the treatments you have tried do not seem to help.

## SELF-CARE (WHAT CAN I DO?)

- If you have frequent herpes simplex recurrences, you may be able to identify triggers and try to avoid them where possible by:
  - getting enough sleep
  - having a healthy diet



- avoiding the use of sunbeds
- protecting the affected area of skin from [the sun](#). UV rays from sun or sunbeds, on the affected area, can trigger recurrences. People who get facial infection should use hats and sun protection cream.
- If you get cold sores frequently, use antiviral tablets as soon as you recognise the early tingling feeling. The following treatments may also help:
  - Apply a cool wet compress or wash the area gently with salt water. Dry your skin gently.
  - Use an unscented moisturising cream on the skin such as petroleum jelly.
  - Antiviral tablets may be used if the infection is severe or recurs frequently.
  - Antiviral treatment may also be given via a drip if you become very unwell with herpes simplex.

## WHERE CAN I GET MORE INFORMATION ABOUT HERPES SIMPLEX?

*Patient support groups providing information:*

*Herpes Viruses Association*

<http://www.herpes.org.uk>

*Weblinks to other relevant sources:*

<https://herpes.org.uk/wp-content/uploads/2020/10/PIL-printable.pdf>

<https://dermnetnz.org/cme/viral-infections/herpes-simplex>

*Other websites you may find helpful:*

<https://www.nhs.uk/conditions/cold-sores/>

<https://www.nhs.uk/conditions/genital-herpes/>

<https://www.nhs.uk/conditions/herpes-simplex-eye-infections/>

Jargon Buster:

<https://www.skinhealthinfo.org.uk/support-resources/jargon-buster/>

*Please note that the British Association of Dermatologists (BAD) provides web links to additional resources to help people access a range of information about their treatment or skin condition. The views expressed in these external resources may not be shared by the BAD or its members. The BAD has no control of and does not endorse the content of external links.*



## Herpes Viruses Association

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists and the Herpes Viruses Association: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

*This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel*

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