

What about herpes and pregnancy?

Herpes can cause rare but serious infections in newborn babies. This is most likely to occur in someone who has their first episode of genital herpes in the last 3 months of their pregnancy.

The risk of infection of a newborn baby in a person who has had genital herpes for some time is rare, and most people with genital herpes have vaginal deliveries without any problem.

If someone has frequent outbreaks, their doctor may advise them to use suppressive treatment during later pregnancy. If a herpes episode occurs at the time of delivery, then the person's doctor may discuss the possibility of a caesarean section.

If you or your partner have genital herpes, talk to your GP when you have your first pregnancy care appointment.

If you get oral cold sores, it is essential to avoid kissing a newborn baby.

If you have any symptoms at all, so you do not risk infecting the baby.

What should I do if I think I have genital herpes?

The first thing to do is to see a doctor or nurse when the symptoms are present, ideally at a sexual health centre or family planning clinic if you have access to one. Then, an accurate diagnosis can be made, and treatment options can be discussed.

What should I do if I have been diagnosed with herpes?

As with any diagnosis of a medical condition, a diagnosis of genital herpes can be upsetting and distressing. It may take time for you to adjust to the news. You may also have a lot of questions about it. Seeing a supportive healthcare provider at a sexual health clinic to discuss management, ask questions, and get accurate information is important.

If you don't have a sexual health or family planning clinic near you, find a GP that you trust and can develop a good relationship with.

Avoid looking herpes up online. There is a lot of misinformation out there and it's hard to tell what is correct and what isn't! Incorrect information can cause unnecessary stress and harm.

See the websites below for accurate and helpful information. It may also be helpful to see a sexual



counsellor who is informed about herpes and can assist you in dealing with a diagnosis, with any feelings and concerns you may have, and with approaches to use when talking to a partner.

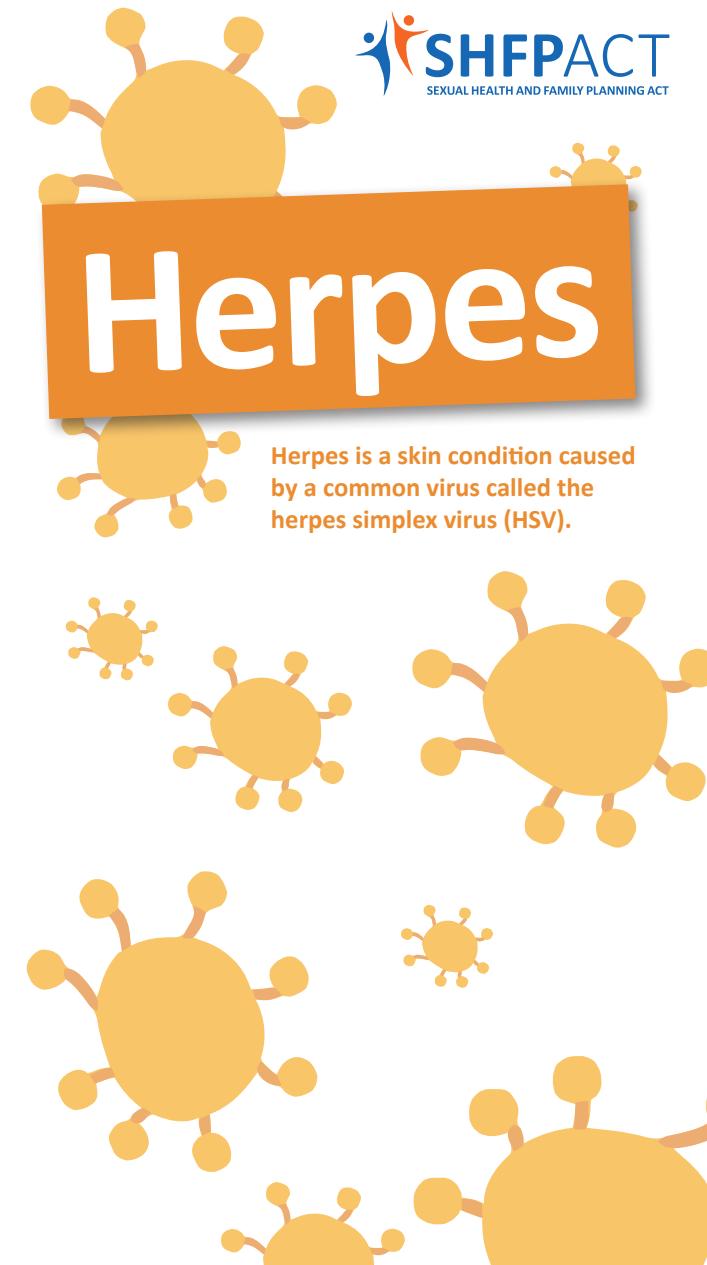
Useful websites for more information:

- www.herpes.org.nz/
- playsafe.health.nsw.gov.au/2019/12/19/herpes-pt-1-everything-you-need-to-know/
- www.staystifree.org.au/get-the-facts/herpes

SHFPACT Clinical Services

- Contraceptive Advice, Information & Services
- IUD's and other Long Acting Contraceptive Options
- Cervical Screening
- Canberra Menopause Centre
- Pregnancy Options Counselling
- Sexually Transmissible Infections(STIs):
- Testing, Treatment and Advice
- Blood borne virus and HIV testing
- Emergency Contraception (the 'Morning After' Pill)
- Breast Checks and Breast Awareness Education
- Fertility Issues and Pre-conception Advice
- Sexual Difficulties and Sexuality Education
- PrEP Information, Advice, and Prescription

References/Acknowledgments: Australian STI Management Guidelines: for use in primary care: sti.guidelines.org.au <https://mshc.org.au/HealthProfessional/MSHCTreatmentGuidelines/Herpes.aspx#.X9BcNNgZaR>



What is herpes?

Herpes is a skin condition caused by a common virus called the herpes simplex virus (HSV). There are two types of the herpes simplex virus: HSV 1 and HSV 2.

- **HSV 1** causes almost all oral herpes (cold sores) and about half of genital herpes. Infection with HSV 1 tends to be milder and doesn't usually require treatment.
- **HSV 2** causes about half of genital herpes. It rarely causes oral herpes. Infection with HSV 2 is more likely to recur and need treatment, but it can also be mild.

Both HSV types can have no symptoms, and many people with HSV do not know that they have it.

Where does genital herpes occur on the body?

Genital herpes can occur on the vulva, cervix, penis, anal area, buttocks, lower back, groin, or thighs.



How common is herpes?

Herpes is very common! Around 80% of Australians have HSV 1, and 12% to 15% of sexually active Australian adults have HSV 2.

How do you get herpes?

You get herpes from exposure to the virus. HSV is transmitted during close skin-to-skin contact with someone who has the virus. This is usually through kissing, oral sex, vaginal sex, or anal sex. The virus enters the skin through tiny abrasions, which are usually not noticeable.

What are the symptoms of herpes?

Most of the time, there are no symptoms, and many people who have herpes don't know they have it. If you don't get symptoms, you don't need treatment. If symptoms do occur, they tend to be more severe with the first episode.

They can include:

- painful blisters and ulcers
- swelling
- redness
- pain passing urine(weeing)
- flu-like symptoms

If there are recurrent episodes, the symptoms become less severe and typically involve areas of small painful blisters that turn into ulcers that later heal back into normal skin again.

Flu-like symptoms can occur with recurrent episodes but are usually milder. Some people only experience symptoms once

or twice in their lives, while others experience them a few times a year.

Recurrent episodes of herpes often have warning signs called prodrome symptoms.

These include:

- tingling or itching in the area
- pain in the genital area, legs, or buttocks.

These prodrome symptoms can occur from as long as 5 days to as little as 30 minutes before an episode.

How long after you have been infected can symptoms develop?

If symptoms do occur, they usually develop between 2 and 12 days after exposure to the virus. However, symptoms can also occur years after someone is first exposed to the virus.

Can I have a test for herpes?

There is no routine test for herpes if you don't have symptoms. If you do have symptoms, it is diagnosed by a doctor or nurse who looks at the affected area and takes a swab, which is then sent to the laboratory for testing.

How is genital herpes treated?

Herpes can be managed well with antiviral medication (in Australia, these medications are Valtrex®, Famvir®, and Zovirax®). They are considered safe and are well tolerated by most people. Treatment for a first episode is usually given for 10 days.

If you only have one or two episodes, you may not need further treatment; however, ongoing treatment is advised if you have more frequent episodes.

Ongoing treatment can be used in one of two ways:

- **Episodic treatment:** a short course of the medication is used from the first sign of symptoms. This reduces how long the episode lasts and makes it milder.
- **Suppressive treatment:** the antiviral medication is taken daily on an ongoing basis to reduce the recurrence of episodes. This can also reduce the risk of passing it on to someone else.

What can I do to relieve discomfort during an episode?

To relieve discomfort from symptoms, the following may be helpful:

- Using a pain-relieving medication such as paracetamol or ibuprofen
- Having warm salt baths
- Applying an ice pack to the affected area

What can I do to prevent transmission?

- Wearing loose clothing
- Sitting in a bath, shower, or pouring warm water over the area when passing urine if it is painful to do so
- Talk to your doctor about using an anaesthetic gel or cream applied to the area.

How can you reduce the transmission of herpes?

- Using condoms or dental dams can reduce transmission. Condoms provide around 50% protection. They do not completely stop the risk of infection because herpes can be in areas not covered by the condom.
- Suppressive treatment reduces transmission by at least 50%.
- Using a good lubricant for sex may also reduce the risk of transmission by avoiding skin trauma and micro-abrasions.
- If you have a cold sore, you should not perform oral sex on a partner from the time the very first symptom appears until a week after the last symptoms of the cold sore have gone.



What about telling sexual partners that I have herpes?

You are not legally required to tell a sexual partner that you have herpes. However, we know that openness and honesty usually work best in a relationship. It is normal to feel concerned about discussing it, and fear of rejection and feeling uncomfortable talking about sexual health contribute to this.

Before telling a partner, make sure that you inform yourself about the facts about herpes so you can correct any myths. Choose a private moment and remember that you are telling them you have a common skin infection; there is no need to feel shame or embarrassment. There is also a good chance that they may have it as well.

In a relationship, most people are accepted rather than rejected when they open up about having herpes. Some people choose not to tell casual partners, and if they avoid sex during an episode and are using condoms regularly, then this is an ok choice.

If you need more support around telling partners, consider talking to a sexual health nurse or counsellor at a sexual health clinic.