

WHAT ABOUT HERPES AND PREGNANCY?

Herpes can cause rare but serious infections in new-born 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. If a pregnant person's partner has herpes and the pregnant person does not know if they have it or not themselves, then it is very important to discuss this with a doctor to avoid getting a first infection in pregnancy.

The risk of infection of a new-born 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 will most likely advise them to use suppressive treatment in 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 get cold sores it is important to avoid kissing a new-born baby if you have any symptoms.

WHAT SHOULD I DO IF I THINK I HAVE GENITAL HERPES?

The first thing to do is to see a doctor or nurse practitioner 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 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 will take time to adjust. You will probably have a lot of questions about it. Seeing a supportive health care 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 Googling, there is a lot of misinformation out there and it's hard to tell what is correct and what isn't! 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

herpes.org.nz
playsafe.health.nsw.gov.au
staystifree.org.au/get-the-facts/herpes

References:

Melbourne Sexual Health Centre: mshc.org.au
Australian STI Management Guidelines: for use in primary care: sti.guidelines.org.au
CDC Herpes Factsheet: cdc.gov/std/herpes/stdfact-herpes-detailed.htm



OPENING HOURS

Please contact our reception staff on 02 6247 3077 or visit shfpact.org.au for SHFPACT clinic hours

LOCATION

SHFPACT is conveniently located in the city.

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SHFPACT is a health promotion charity (HPC) assisted with funding from the ACT Government.



I'M ALL ABOUT

HERPES



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Last updated September 2022

WHAT IS HERPES?



Herpes is a skin condition caused by a very common virus called the Herpes Simplex Virus (HSV). There are two types of HSV: 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 have recurrences and to need treatment but can also be quite mild.

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

HOW COMMON IS HERPES?

Herpes is very common! At least 1 in 8 sexually active Australian adults have HSV 2 and around 8 out of 10 Australians have HSV 1.

HOW DO YOU GET HERPES?

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 in the skin (micro abrasions) which are usually not noticeable.

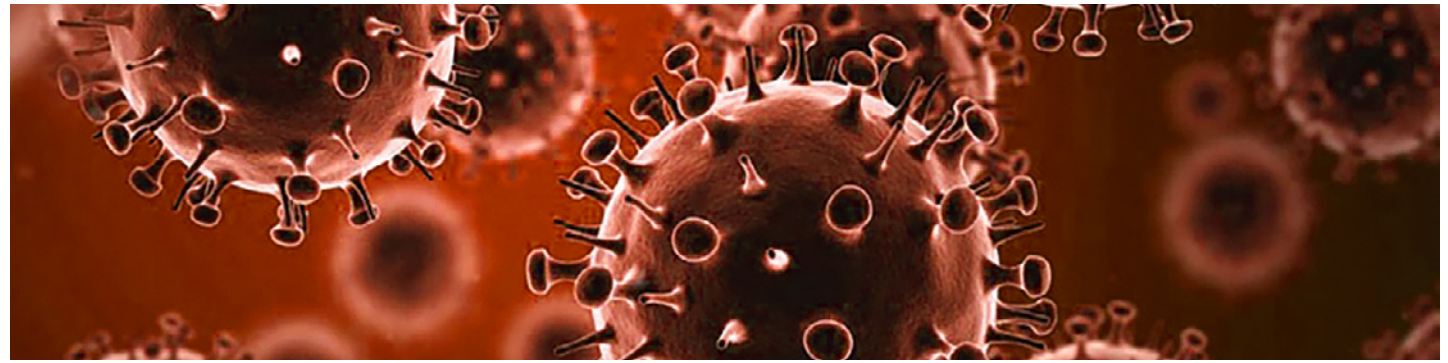
WHAT ARE THE SYMPTOMS OF HERPES?

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 and can include painful blisters, swelling and redness in the affected area, pain passing urine, and flu like symptoms. If there are recurrent episodes the symptoms become less severe, and typically involve areas of small painful blisters which 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 have symptoms once or twice in their life, while others will have them a few times a year.

Recurrent episodes of herpes are often preceded by warning signs, called prodrome symptoms. These include tingling or itching in the area and pain in the genital area, legs, or buttocks. These prodrome symptoms can occur from as long as five 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.

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 looking at the affected area and taking a swab which is then sent to the laboratory for testing.

HOW IS GENITAL HERPES TREATED?

Herpes is not curable; however, it can be managed well with anti-viral medication (in Australia these are: Valtrex®, Famvir®, and Zovirax®).

These medications 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 require treatment, however if you have more frequent episodes ongoing treatment is advised. Ongoing treatment can be used in one of two ways:

Episodic treatment: where 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: where the antiviral medication is taken daily on an ongoing basis to reduce the recurrence of episodes.

Relief of discomfort: Any uncomfortable or painful symptoms can also be relieved by:

- Using a pain-relieving medication such as paracetamol or ibuprofen
- Having warm salt baths
- Applying an ice pack to the affected area
- Wearing loose clothing
- Sitting in a warm bath or pouring warm water over the area when passing urine if it is painful to do so

HOW CAN YOU REDUCE THE TRANSMISSION OF HERPES?



- Using condoms or dental dams can reduce transmission. Condoms provides around 50% protection. They do not completely stop the risk of infection because the herpes can be in areas not covered by the condom.
- Using suppressive treatment reduces the risk of transmission by at least 50%.
- Using a good silicone 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 in a relationship openness and honesty usually work best. 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 around the facts about herpes so you can correct any myths. Choose a private moment and remember that you are telling them that you have a common skin infection, there is no need to feel any 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 is this 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.