

## Genital Herpes

Herpes simplex virus infection, commonly referred to as herpes, can be caused by herpes simplex virus type 1 (HSV-1) or herpes simplex virus type 2 (HSV-2). HSV-1 is spread primarily by mouth-to-mouth contact and causes an infection in or around the mouth (oral or cold sores). HSV-2 is transmitted almost exclusively sexually and causes an infection in the genital or anal area (genital herpes). However, HSV-1 can also be transmitted to the genital area through orogenital contact and cause genital herpes. In very rare circumstances, genital herpes can be passed from mother to child during childbirth.

Most genital herpes infections are asymptomatic or can produce mild symptoms that go unnoticed. In 10-25% of primary infections, genital herpes is characterized by the presence of one or more genital or anal vesicles or ulcers, usually 4 to 7 days after sexual contact. Symptomatic genital HSV is a lifelong disorder that can be characterized by frequent symptomatic recurrences. Genital herpes infection is often diagnosed clinically. However, laboratory tests are necessary to differentiate HSV-1 from HSV-2. When there are no vesicles, laboratory confirmation may be needed to rule out other causes of genital ulcers. There is currently no cure or vaccine for herpes. Antiviral medications are the most effective treatment available for people infected with genital herpes. These medications can be helpful in reducing the severity and frequency of symptoms, but they cannot cure the infection.

HSV-2 infection is the most common cause of recurrent genital ulcer disease (GUS) worldwide. Furthermore, HSV-2 infection is of special interest due to its epidemiological synergy with HIV infection and transmission. People with HSV-2 infection are about three times more likely to contract HIV, and people with both HIV and genital HSV infection are more likely to transmit HIV to other people. HSV-2 is often transmitted by people who do not know they have the infection and who are asymptomatic at the time of sexual contact.

### Key facts

In 2012, an estimated 19.2 million new HSV-2 infections occurred in adults and adolescents aged 15-49 years worldwide, with the highest rates in the very young.

HSV-2 is an infection that persists throughout life; the estimated worldwide prevalence of HSV-2 of 11.3% translated into an estimated 417 million people with the infection in 2012.

In 2012, there were 2.2 million new cases of HSV-2 infection in women and 1.3 million new cases in men in the Region of the Americas.

In 2012, in the Region of the Americas there were 45.2 million cases of existing HSV-2 infection in women and 25.1 million cases of existing HSV-2 infection in men.

### PAHO / WHO Response

The global response to STIs currently follows the guidelines of the Global Health Sector Strategy on Sexually Transmitted Infections, 2016-2021.

WHO and its partners are working to accelerate research to develop new strategies for the prevention and control of genital and neonatal HSV-1 and HSV-2 infections, including the development of HSV vaccines. There are currently several experimental vaccines under study.

In 2016, the WHO published guidelines for the treatment of genital herpes simplex virus infection [in English], which make updated recommendations on the treatment of genital herpes based on the most recent evidence available. Courtesy: <https://www.paho.org/>

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