Facts You Need to Know

- Genital herpes is a common infection caused by one of two viruses: herpes simplex virus type 1 (HSV-1) or herpes simplex virus type 2 (HSV-2).
- Most genital herpes is caused by HSV-2. Most oral herpes, which often produces cold sores, is caused by HSV-1.
- More than 50 million adults in the U.S. have genital herpes. This adds up to more than one in five adults.
- Genital herpes is the most prevalent sexually transmitted disease (STD) in the U.S. Each year, there are 1 million new cases.
- Almost nine in 10 of all infected people are unaware they have genital herpes.
- Herpes persists in the body throughout one's lifetime. It can be latent for long periods, without symptoms, and then become active, with recurring outbreaks.
- Symptoms usually appear within two weeks after infection. Though they vary greatly from person to person, symptoms can include: sores, blisters, fever and swollen glands, especially near the groin. Most signs and symptoms are mild and often not recognized as genital herpes.
- The first outbreak is often the most serious, since the body's immune system has not developed a resistance to the virus.
- Even when there are no visible signs, herpes can be active. This phase is called “asymptomatic reactivation” or “asymptomatic viral shedding.” During this time, the herpes virus is on the skin's surface and is contagious.
- Antiviral medicines can shorten herpes outbreaks and reduce the chance of recurrence.

Who’s Likely to Get Herpes?

- Thanks to public education and awareness campaigns, people know more about herpes than they did in the past.

How Is Herpes Transmitted?

- Herpes is transmitted by direct skin-to-skin contact when the virus is in an active phase, even if there are no visible symptoms.
- Typically, the virus is spread by sexual activity, such as intercourse, oral sex and genital touching.
- Pregnant women with active herpes are at risk of transmitting the infection to their babies.

Costs and Consequences

- The direct medical costs of genital herpes in the U.S. are nearly $300 million ($292.7) a year.
- One of the major complications of genital herpes is transmission to newborns (neonatal herpes). This can cause developmental disabilities and fatal infections.
- A person with herpes has double the risk of getting HIV, the virus that causes AIDS. HIV is more contagious from a person with herpes than it is from an HIV-infected person without herpes.
- For some individuals, herpes carries significant emotional burdens, including anxiety, shame, depression, anger and fear of rejection.

Prevention and Treatment Basics

- Outside of sexual abstinence, the surest way to avoid getting herpes is to be in a long-term, mutually monogamous relationship with an uninfected person. Prevention can also be practiced by refraining from skin-to-skin contact with an infected person when the virus is in an active phase.
Other ways to reduce the risk include: informing one’s partner, not having sex during outbreaks, using condoms at other times and taking antiviral drugs. Although using condoms can significantly reduce the risk of genital herpes, condoms don’t cover all genital areas and therefore cannot completely prevent transmission of the virus.

Several antiviral medicines are safe and effective in treating herpes. There are two treatment regimens: episodic therapy, in which a person takes medicine at the first sign of an outbreak (active phase with symptoms); and suppressive therapy, in which a person takes medicine daily in order to avoid outbreaks.

Daily suppressive therapy with the antiviral drug valacyclovir can reduce an infected person’s risk of transmitting herpes to an uninfected partner.

Public Health and Policy Issues

Without public health intervention, it is estimated that herpes cases will continue to rise, so that by 2025, up to 40 percent of all men and half of all women could be infected.

Some experts advise the widespread use of accurate blood tests as a way to curb the spread of genital herpes. Diagnosis and education is especially important for high-risk groups, such as those who are infected with HIV and those who have other STDs. Blood tests can now diagnose herpes even when no symptoms are present, and can also distinguish between HSV-1 and HSV-2. Some experts urge more widespread use of these tests, especially in high-risk populations, as a way to curb the spread of genital herpes.

Some experts also recommend giving blood tests to pregnant women as a way to decrease neonatal herpes. However, there are currently no accepted guidelines for routine herpes testing in pregnancy.

Some states require mandatory reporting of all cases of neonatal herpes as a way to get better data on this potentially devastating illness in newborns. By current estimates, there are more cases of neonatal herpes than of several other reportable diseases, including congenital rubella, congenital syphilis and gonococcal ophthalmia.

A vaccine to protect against genital herpes is in clinical trials at the National Institutes of Health. If approved, the vaccine would be most effective if administered to youth before they become sexually active. This could prove to be controversial.