FREQUENTLY ASKED QUESTIONS ABOUT TESTING FOR HERPES SIMPLEX VIRUS (HSV)

What is Herpes and what are the symptoms?

Herpes Simplex Virus (HSV) is a viral infection that affects the skin causing blisters that ulcerate and heal over in about one week. HSV Type I is usually associated with the mouth, causing “cold sores” or “fever blisters” and Type II with genital infections, but this is not always the case. Either type can be responsible for mouth or genital, as well as on the eye, buttocks or hands. Outbreaks are usually recurrent, but the severity and frequency decrease with time. Everyone who is exposed to the virus does not develop sores, but may still shed virus and expose others through contact with the infected area even if sores are not present.

Who should get tested for Herpes?

People who currently have blisters or sores can be examined by a medical care provider and a swab collected to be cultured for Herpes. If there are no new sores, culturing the area is not likely to be helpful. People who have had these symptoms in the past, or have a partner with these symptoms, may want a blood test to see if they have been infected with the virus. Infection is determined on blood testing based on presence of antibodies to the virus, which are mobilized when the body recognizes the virus and learns to fight it off. Antibody testing can be done for Type I and/or Type II. Most often only Type II is tested, as most people have been exposed to Type I in childhood. Blood testing does not tell us where the exposure has taken place. When a woman becomes pregnant it is important for her maternity care provider to be aware of this history as it is important to monitor for a possible Herpes outbreak at the time of delivery.

What do the tests show?

A positive culture is the most accurate measure of having Herpes. A negative culture can result from the sample being taken too late in an outbreak or other sampling problem. Blood testing for Herpes I or II shows whether one has acquired antibodies to the virus. These substances in the blood fight infection and only develop only after exposure to a specific virus. While the blood test shows us that someone has been exposed to Herpes, it cannot tell where the exposure has taken place or whether the person will ever develop symptoms. It may take as much as three months after exposure for the antibody test to turn positive.

Why should I be tested?

Because Herpes is epidemic (one in five sexually active adults in the US), one way to slow down the rate of infection is for people to be aware they carry the virus and to share this information with sexual partners and use protection. Furthermore, knowing you have the virus can help you to watch for symptoms so you can get treated swiftly if they
develop. Also, the risk of contracting HIV is higher if exposed when Herpes sores are present because broken skin is more vulnerable to other infections. Those who have had multiple partners and a history of other sexually transmitted infections are at statistically higher risk of having HSV.

**Shouldn’t everyone get tested?**

Theoretically, this sounds like a good idea, but there are some issues to consider. The test is not perfect, and false negatives and false positives are known to occur. There are also emotional impacts for most people who find they are HSV positive. There are ethical issues of sharing this information with present and future partners and one must consider what their responsibility is when they have this information. When purchasing health insurance, the company usually asks about your medical record, and may refuse you as a customer if a medical condition is noted that may cost them in the future.

**What if my test is positive?**

You will have an appointment to discuss the results with your clinician. Receiving a positive result for some people confirms their suspicions, and for others, comes as a surprise. In patients with low risk sexual history and a borderline positive result, it is recommended that the test be repeated or a confirmatory test be done in a few months for verification, as there is some possibility of a false positive result. It may be helpful to talk with a counselor or clinician about the emotional impact and relationship issues that emerge from this diagnosis. There is no indication for taking antiviral medicine based on a positive blood test in persons without a history of outbreaks. You may want to learn more about Herpes, and brochures are available at the Health Center and websites are listed below. For women, it is critical that this information is shared with your maternity clinician should you become pregnant anytime in the future.

**What if my test is negative?**

In a small number of people, HSV antibodies in the blood test will not be present in the usual time period. If one suspects HSV, the test can be repeated in another three months. False negative and positive results are rare. If you and your partner(s) have discordant status (one positive and one negative), discussing prevention is important. As part of a routine STD screening, a negative test can be reassuring, but of course one’s antibody status may change with each new sexual partner. This may be an opportunity for you to consider how you might practice safer sex to reduce risks of transmitting or contracting HSV and other sexually transmitted infections in the future.

**Want more information?**