

Genital Herpes

- HSV can be treated but not cured.
- Explanation is important that
 - recurrences are common and need treatment immediately when the first –prodromal – symptoms occur.
 - Lesions can be prevented or the duration can be shortened by early treatment.
- Because HSV is a high-risk factor for transmission of HIV, it is essential to give the right instruction to the patient.

Herpes S/S

- Prodromal symptoms; tingling or burning sensation.
- Followed by an outbreak of small blisters / vesicles.
- The vesicles break and change into multiple small painful ulcers, frequently confluent to one ulcer

Herpes treatment

- Clean the ulcers with saline and apply gentian violet.
- Acyclovir tablets should only be given when the patient is still in the prodromal phase, or has closed blisters, which is likely to be an exception.
- If the lesions are ulcers, apply gentian violet.

First Episode: Acyclovir 400mg TDS x 10 days

Episodic

- Acyclovir 800mg BID x 5 days + give 1 treatment (strip) for next episode
- Acyclovir (1 episodic treatment) can be provided for the next episode (only if the patient is a regular visitor) to be taken as soon as the prodromal symptoms appear.
 - The patient should visit the clinic during that episode in order to get a physical exam to confirm Herpes and be eligible for the next course.
 - Used and unused medicine strips should be brought to the clinic, to prevent misuse.

- For patients who come irregularly, the patient can be advised to buy Acyclovir at the market (provide a prescription) or visit regular.

Reference

- MAM STI guideline 2023