

Case Study VII

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Is there anything else that this couple should consider before starting sexual activity that will include oral sex and genital-to-genital touching?

The couple needs to use latex condoms to prevent oral sex and genital-to-genital touching that way they could not meet the criteria of sexually transmitted disease (STD) and human immunodeficiency virus (HIV). “Latex or polyurethane condoms prevent fluid exchange and, used properly, can greatly reduce the risk of transmission of HIV. However, condoms probably provide less protection for some STIs, such as herpes and HPV, which are spread by contact with symptoms or infected genital skin. Some practices are more risky for contracting some STIs than for others. A person is extremely unlikely to get HIV from receiving oral sex even without a condom, for example, but could easily get herpes or syphilis in this way. (Alexander, Garfield, LaRosa, and Bader, pg. 200, 2020)”

How could Marie have acquired herpes? (Hint: there are multiple possibilities).

Marie’s herpes shares similarities with sexually transmitted diseases due to unprotected sex and genital-to-genital touching. “Herpes simplex virus (HSV) is a common STI. Herpes can be caused by two distinct, closely related viruses: HSV-1 and HSV-2. HSV-1 is the main cause of recurring sores in the mouth, known as cold sores or fever blisters, while HSV-2 typically causes similar symptoms that appear in the genital area and is responsible for most cases of “genital herpes.” However, if HSV-1 is exposed to the genital area of an uninfected person (for example, through oral sex), HSV-1 can infect the genital area of that person; similarly, exposure to HSV-2 can infect the oral area of a person as well. Both HSV-1 and HSV-2 cause similar symptoms and have similar courses of infection, although HSV-1 tends to be milder in severity and frequency of symptoms. (Alexander, Garfield, LaRosa, and Bader, pg. 190, 2020)”

Marie's herpes meets the criteria of prodrome. "A prodrome or warning phase often precedes a herpes outbreak. The warnings may consist of tingling or itching sensations in the area where sores later appear. It is not known what causes repeat outbreaks of herpes. Some people find that irritating stimuli to the infected area, such as tight clothing, menstrual changes, or exposure to sunlight or extreme heat or cold, can trigger an outbreak, whereas others do not notice any such effects. (Alexander, Garfield, LaRosa, and Bader, pg. 190, 2020)"

Marie's herpes could be extremely severe for her to deal with. "Herpes is incurable, and it can be extremely painful and psychologically devastating. Yet, for the vast majority of cases, herpes is not a serious medical condition. Symptoms are usually most severe just after acquiring the infection. They may appear anywhere from 1 day to 4 weeks after exposure. Lasting about 12 days, herpes generally presents as single or multiple small, painful blisters that appear in the vulva or buttocks. If sores are present on the cervix, they often go unnoticed. The blisters evolve into painful ulcers in a couple of days. These symptoms may be accompanied by vulvar swelling, fever, and enlarged and tender lymph nodes. Sores usually heal in 1 to 4 weeks with little or no scarring. The time between outbreaks is referred to as the latent or inactive phase. During this time, genital sores have healed but the infection remains. (Alexander, Garfield, LaRosa, and Bader, pg. 190, 2020)"

What can Marie do to cope with her current outbreak?

Marie needs to practice good hygiene. "Good personal hygiene is essential during a herpes outbreak. If you have herpes and are experiencing an outbreak, wash your hands after touching a herpes sore to avoid possible transmission to another mucous membrane, such as the eyes or mouth. Take care to avoid spreading the virus to others, including infants and children. If you have a cold sore on or around your mouth, avoid kissing another person. As a precautionary

measure, avoid sharing personal objects such as washcloths, toothbrushes, drinking cups, and towels. Although clinical studies have not demonstrated effective indirect transmission, the virus can remain alive outside of the body for several hours in a moist environment. (Alexander, Garfield, LaRosa, and Bader, pg. 191, 2020)”

How might she discuss this situation with Christina?

Marie needs to practice safe sex to discuss this situation with Christina. “There are no guarantees of ‘safe sex’ with herpes, but there are ways to reduce risk. At a minimum, avoid sexual intercourse, including oral sex, when active herpes sores are present. Because sores contain high populations of viruses, if you have herpes, wait until sores are completely healed before resuming sexual activity. Because it is difficult to tell when a herpes outbreak is beginning, open communication about risks and feelings is another key risk-reduction strategy. Condoms appear to provide some protection, with female condoms providing better coverage than male condoms. Because herpes sores can be present in areas not covered by either condom, however, there are no guarantees against transmission. (Alexander, Garfield, LaRosa, and Bader, pg. 191, 2020)”

### Conclusion

Latex condom prevents sexually transmitted diseases and human immunodeficiency virus. Herpes simplex virus is a form of sexually transmitted disease that disrupts the mouth. In order for Marie to cope with herpes, she needs to be consistent in good hygiene and practice safe sex to have a conversation with her partner, Christina.

### References

Alexander, L. L., Garfield, S., Bader, H., & LaRosa, J. H. (2020). *New Dimensions in Women's Health* (8th Edition). Jones & Bartlett Learning.