

HERPES SIMPLEX TYPE 1 (COLD SORES)

Single
Point
Lesson

Herpes simplex (HSV) is an infection of the skin with the herpes simplex virus. There are two types HSV type 1 and HSV type 2. Herpes infection is caught from another person through contact with mouth, eye or genital secretions or through direct contact with an active lesion. HSV type 1 usually infects the mouth or eye and HSV type 2 usually infects the genital area.

- **HSV- type 1** is easily transmitted, manipulation of the facial and oral tissues can exacerbate the condition and cause breakdown of the blister and bleeding. A rare but serious complication is spread of the HSV-1 to the eyes.
- Dental advice can be given by the dentist; in the form of decreasing the spread of this virus by limiting direct contact.
- The dentist can prescribe topical Aciclovir 5% cream, to be applied every 4 hours for up to 5 days. This is most effective in the initial stages of HSV-1 when the first tingling sensation is noticed by the patient.
- Systemic Aciclovir can be prescribed for immunocompromised patients, and the current dosage and duration can be checked in the current British National Formulary (BNF).
- **Infection control-** limit any manipulation of the facial and oral tissues, limit any aerosols for example from scaling (manual and ultrasonic) and the use of rotary instruments and adhere to local PPE policy.



Symptoms

- Cold sores often start with a tingling, itching or burning sensation around the mouth.
- Small fluid-filled sores then appear, usually on the edges of the lower lip.
- The blisters contain fluid that is teeming with the herpes virus and may weep.
- The blisters take several days to form scabs. Until then they have 'scabbed over' and are completely dry, **the cold sore is highly infectious.**
- The scab slowly disappears over a week or so, leaving no scar.



Research has found....
HSV-1 virions survived for up to two hours from door handles that were inoculated with the HSV-1 from saliva or water .
HSV-1 has also been shown to survive on a patient's dental chart for several hours.

Infection control risk

- There is a risk of infecting the eyes or other parts of the face with the cold sore virus.
- **Patients with oral HSV-1 should be rebooked for non-essential/routine appointments. The patient should not attend the dental surgery until the 'cold sore' is a dry scab or has disappeared.**
- A patient requiring emergency/urgent dental care should not be refused treatment but until the herpetic lesions are healed, the dental staff should take care to prevent the spread of the virus (BDA guidance).
- Dentists should take a history from the patient to see if treatment should take place.

Consider signage in the waiting room for patients

- They must let the practice know if they have a cold sore.
- Routine dental treatment is not provided because of the infection risk.

The Infection Control team can be contacted if you require any additional advice/support on 01744 457314