



<b>Title</b>	Infection Control Manual Section 4.12 – Herpes simplex infection (cold sores) Staff Policy
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## 4.12 HERPES SIMPLEX INFECTION (COLD SORES): STAFF POLICY

**Aim:** Minimise cross infection when a staff member has herpes simplex infection or 'cold sores'

### Background

'Cold sores' are caused by the 'Herpes simplex' virus. It can also cause genital sores. There are two types; type 1 and 2. They cause similar symptoms. Both have been found to cause cold sores, though type 1 is more common. Genital infection more often is caused by type 2. This pattern however is changing.

Consequences can be more serious if passed on to a baby during pregnancy or delivery.

As many as seven out of ten people become infected with herpes simplex of the mouth at some time during their life. Three out of four people when first infected (primary) will have very mild or even no symptoms and therefore will not seek any treatment. After or during this primary infection the virus travels up from the skin to the nerve root. Here it stays but can return to the skin from time to time (reactivate). This does not always happen. When it does, reactivation occurs often throughout life or may last for only a short period of time. Various things such as the common cold, sunlight or stress can trigger it.

A small number of people have repeated outbreaks which can range from 'very painful' to just 'a nuisance'. People often report an itching/tingling or a burning feeling before seeing a small group of red bumps that eventually blister. These then dry and form a yellow crust, which falls off within two weeks.

A person is most infectious to others when a sore has developed. Usually this is through direct skin-to-skin contact, including kissing. However there is also the potential for droplet spread. Many treatments (not cures) are available, though responses to them vary greatly.

Further information can be obtained from:

<http://www.cdc.gov/ncidod/dhqp/>

## Standards

- staff must practise good personal and hand hygiene to minimise the risk of spread
- all staff, affected with herpes simplex (cold sore) working in contact with neonates/babies/children, those who are pregnant, Neutropaenic patients and other patients more susceptible to infection, must contact a member of the Occupational Health Service (OHS), who will carry out a risk assessment. The action to be taken will be decided between the OHS and the member of staff following the risk assessment
- if any other staff member, affected with a cold sore is concerned, then they should also contact a member of the OHS

Where necessary, staff affected with a cold sore should apply an approved topical 'antiviral' treatment as soon as possible.