

Sexual practices and oral and genital herpes simplex virus shedding patterns among a cohort with laboratory documented first episode genital HSV-1

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Aicuris (consulting)

Genital HSV-1: a new epidemic

- Most common cause of first episode genital herpes in women and MSM < 25 years old in high resource countries
 - 78% of cases in university setting in the USA
 - 76% of cases of symptomatic genital HSV in Herpevac vaccine trial
- Leading cause of neonatal herpes, may be more likely to be transmitted to neonate, if shedding present
- Epidemiologic change likely due to decreasing HSV-1 acquisition during childhood
 - First exposure to HSV-1 is at initiation of sexual activity
 - Possible changes in sexual behavior, increasing oral sex
- New estimates of burden of global burden of HSV-1 ages 0-49
 - 3709 million (67%)
 - 140 million genital HSV-1

Ryder et al, STI 2009

Xu et al, JAMA 2006

Kropp et al, Peds 2006

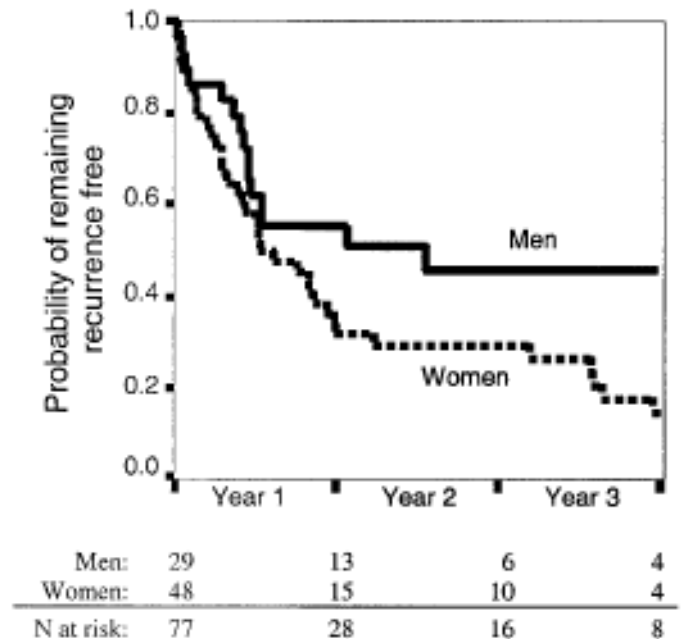
Belshe et al, NEJM 2012

Bernstein et al, JID 2013

Looker et al, PLOS One 2015

Genital HSV-1: Clinical aspects

- Primary infection can be severe and involve both genital and oral lesions
- Recurrences are less frequent than with HSV-2
- Less shedding than with HSV-2
 - HOWEVER, most available data only measured with culture rather than more sensitive PCR



Time to first recurrence after healing of primary genital HSV-1, by gender

Engelberg et al, STD 2003

Reeves et al, NEJM 1991

Benedetti et al, Ann Int Med 1999

Kim et al, JID 2006

Genital HSV-1: Research Questions

- Transmission
 - Frequency of shedding from the genital tract
 - How does shedding rate change over the first year?
 - Significant decline may suggest rapid immunologic control
 - Are people who acquire HSV-1 genitally also at risk for oral acquisition?
- Risk factors for genital HSV-1 acquisition
 - Oral vs. genital exposure?

First episode genital HSV-1 study design: completed data on 59 persons with 2 shedding sessions



Entry criteria for first episode genital herpes:

- *no prior history of genital herpes
- *culture or PCR swab from genital tract lesion positive for HSV-1
- *Both HSV-1 seronegative (primary) and seropositive (nonprimary)
- *HIV-1 seronegative

Baseline Demographic and Romance Data

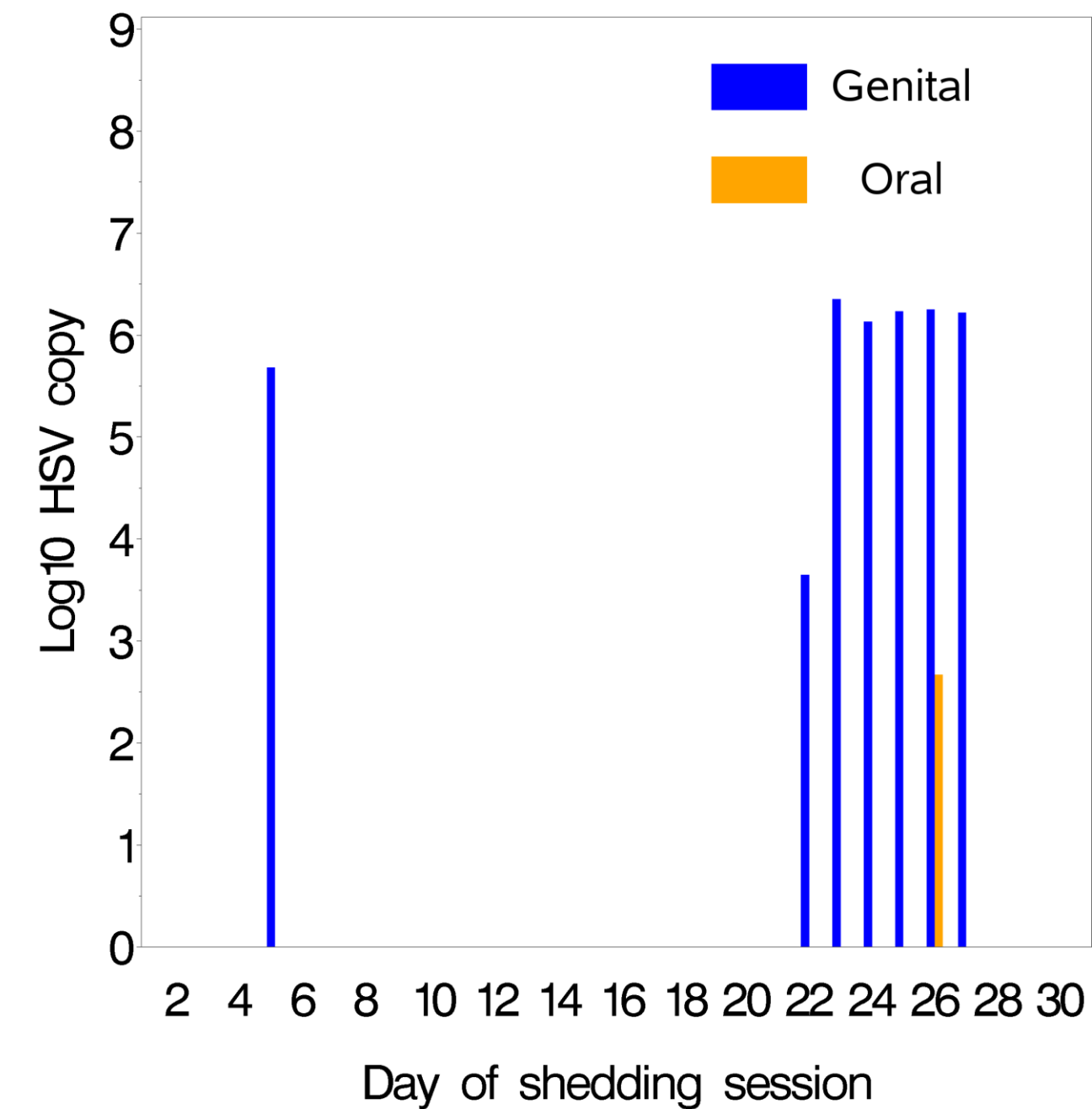
N=59	
Age (Median, range)	26 (16-64)
Women	42 (69%)
White race	49 (83%)
Laboratory documented primary genital HSV-1 infection	36 (61%)
Number partners in past 4 weeks	
0	8 (14%)
1	41 (69%)
Partnership*	
Male-Female	40 (78%)
Male-Male	6 (12%)
Other	5 (10%)
Length of sexual partnership, (Median, range)	150 days (7 days – 3 years)

*8 persons who did not report any sexual partners

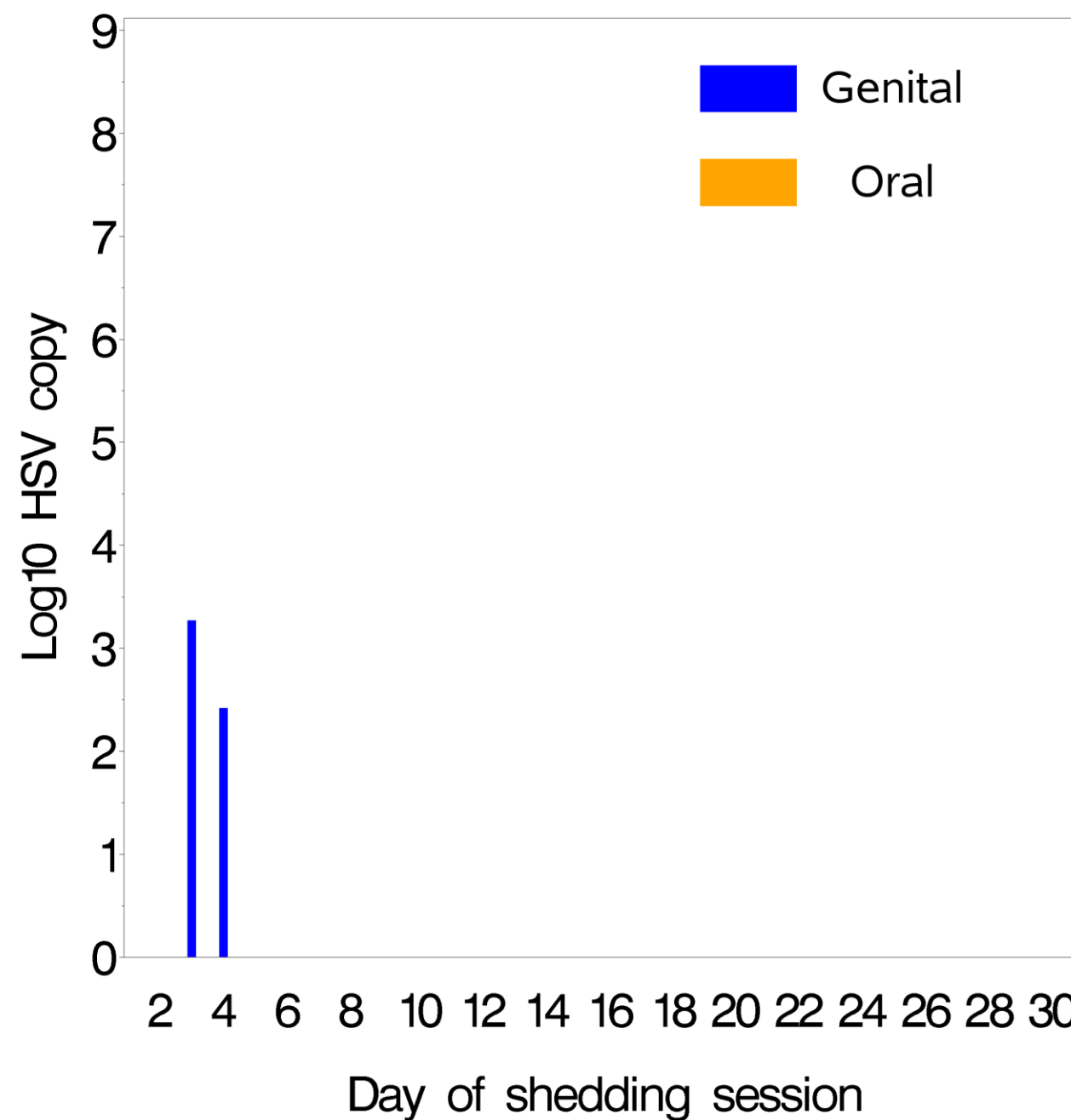
Relationship and behaviors (n=59)

	N=59
Talked about oral herpes with partner	48%
Partner said she/he had oral herpes	13%
Received oral sex	83%
Given oral sex	90%
Never used a barrier method for oral sex	93%

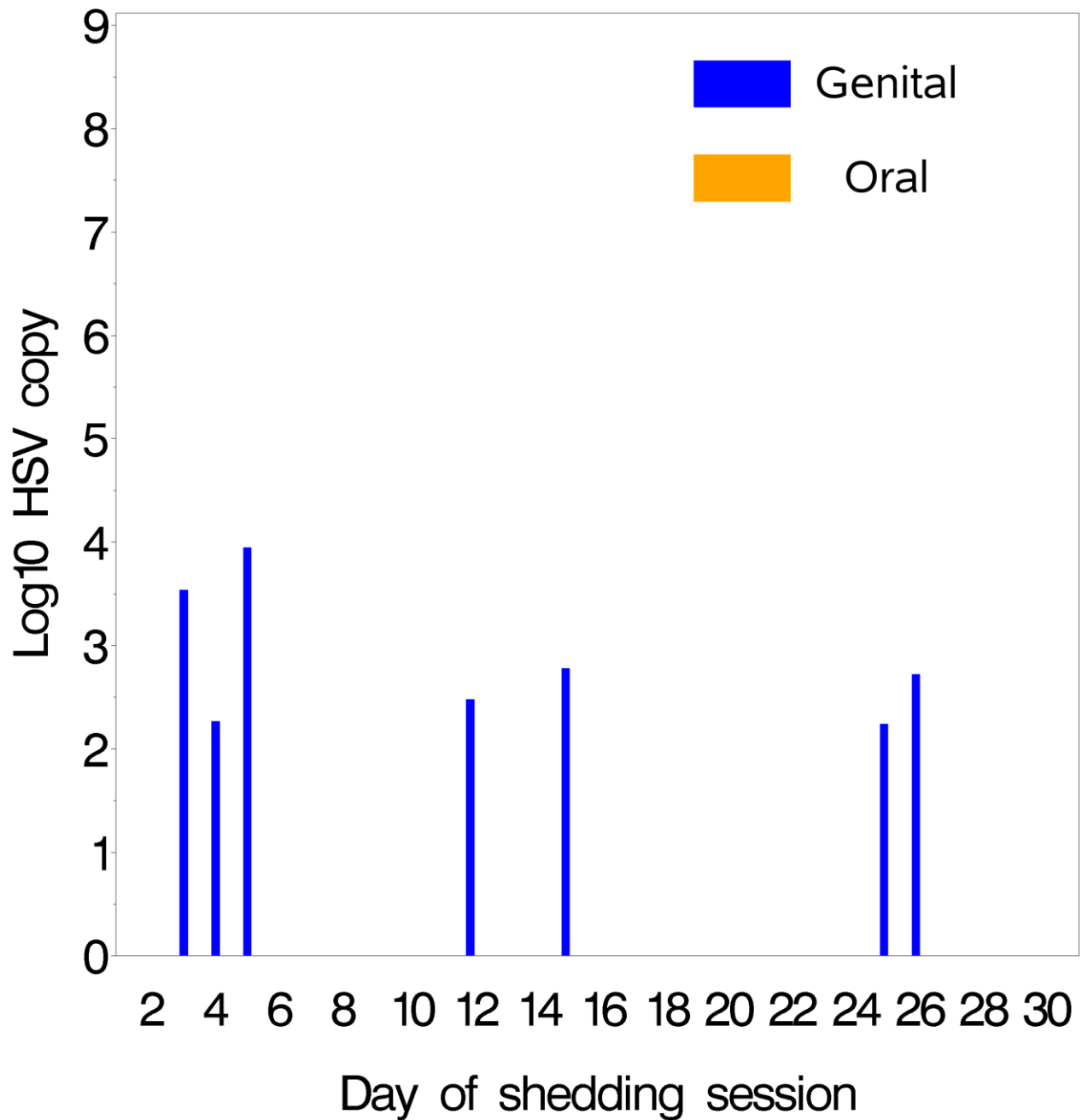
Subject C, non—primary, 8—12 weeks post acquisition



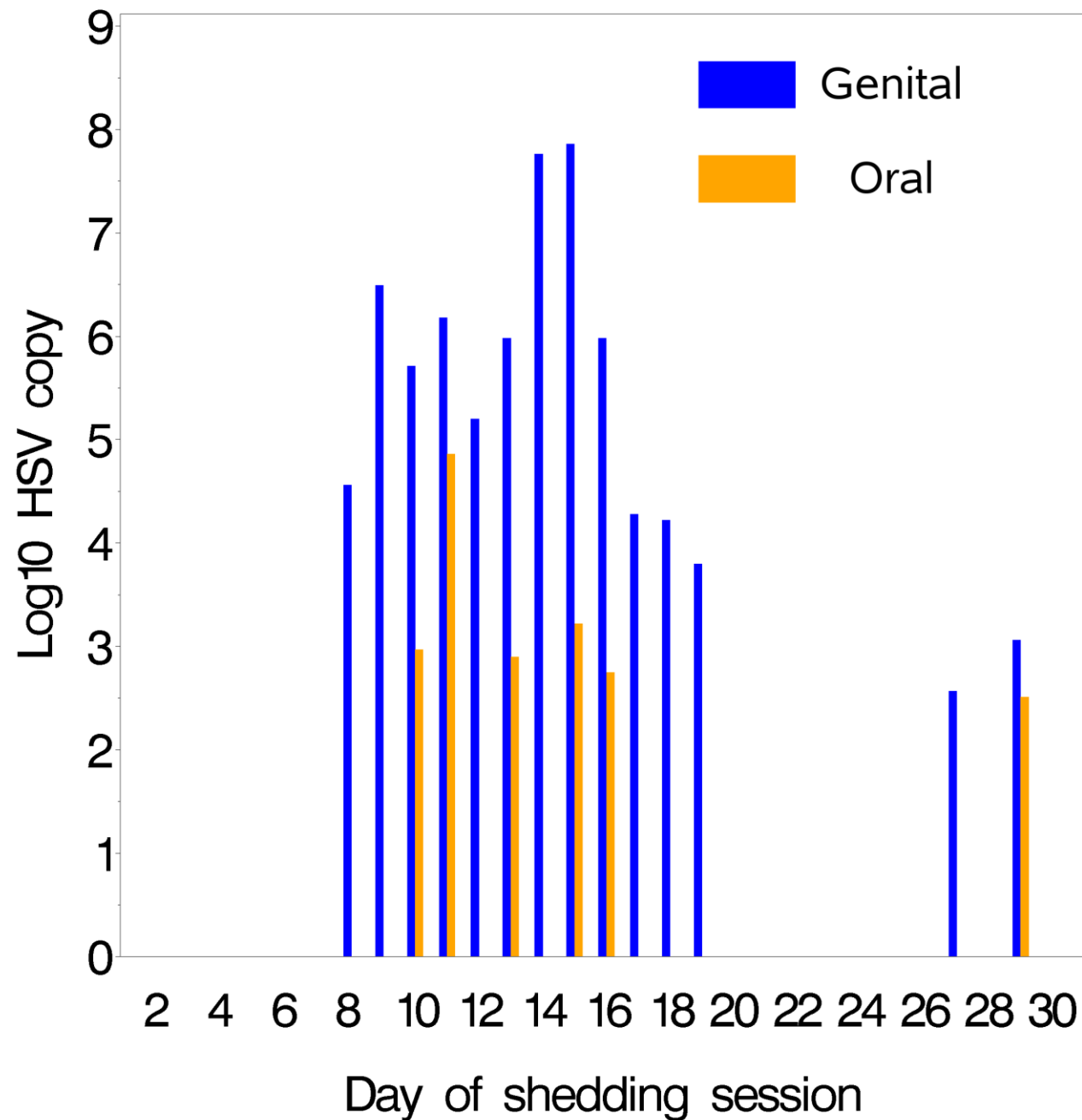
Subject C, 48—52 weeks post acquisition



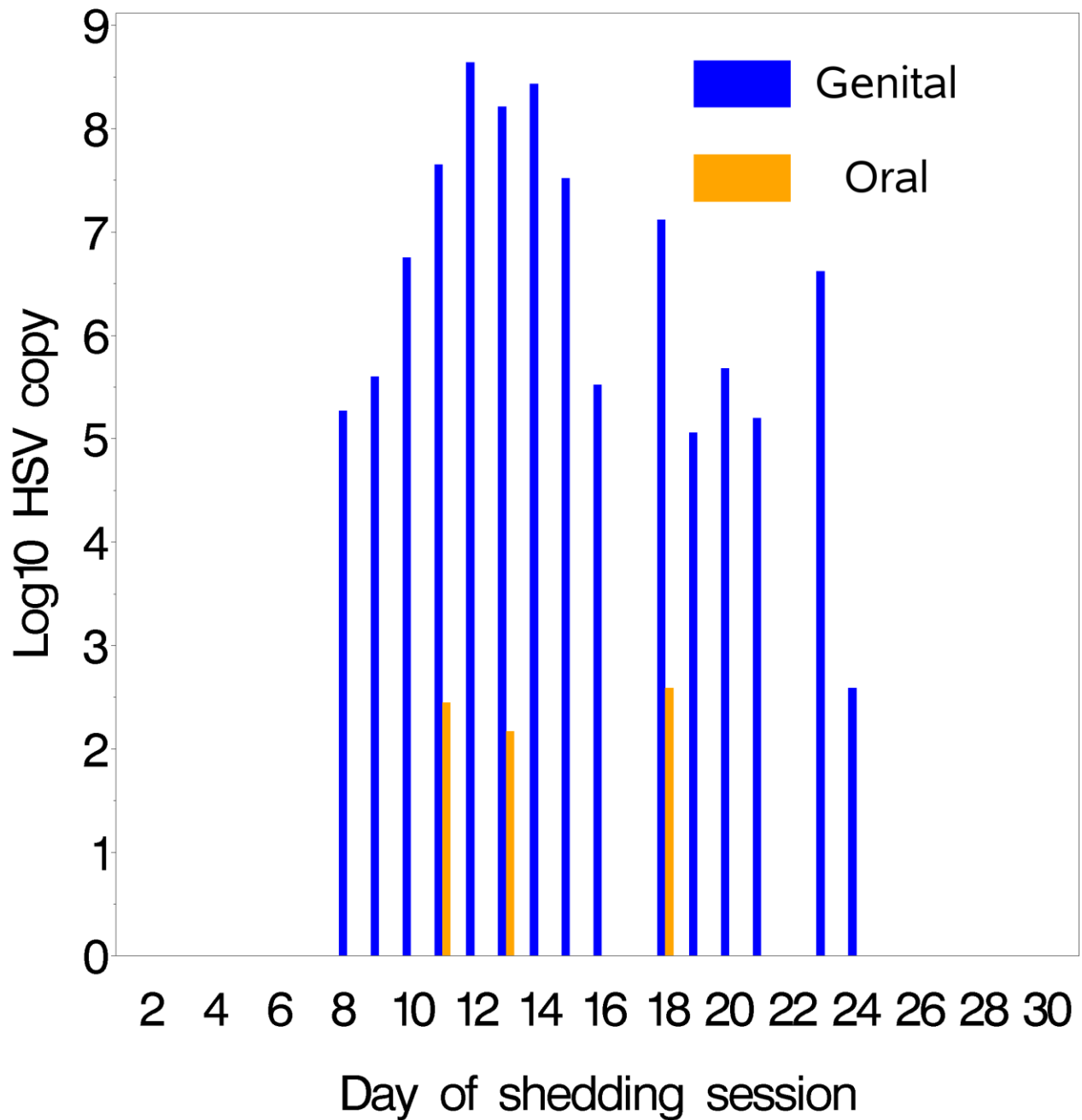
Subject A, primary, 8–12 weeks post acquisition



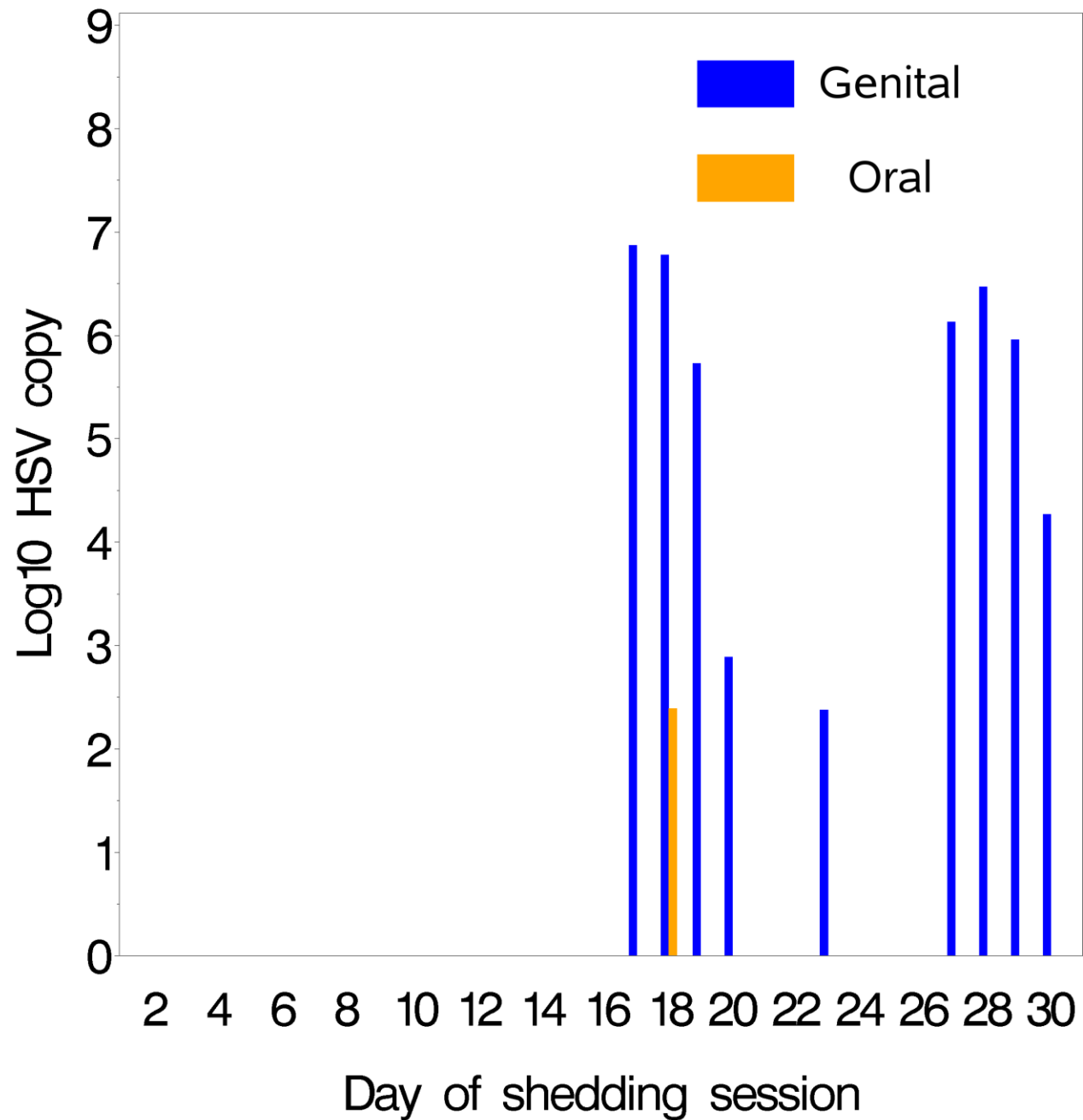
Subject A, 48–52 weeks post acquisition



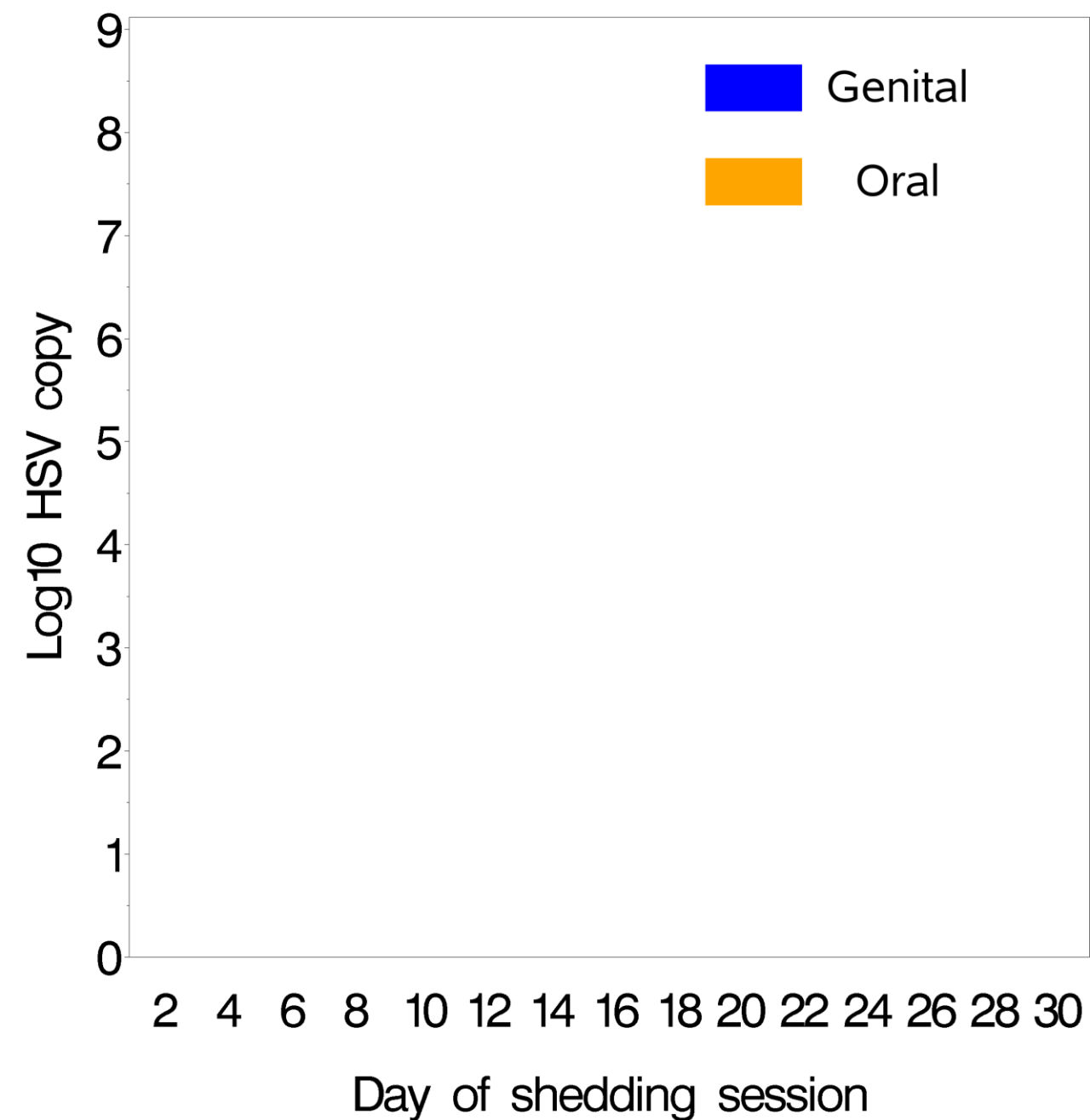
Subject B, primary, 8—12 weeks post acquisition



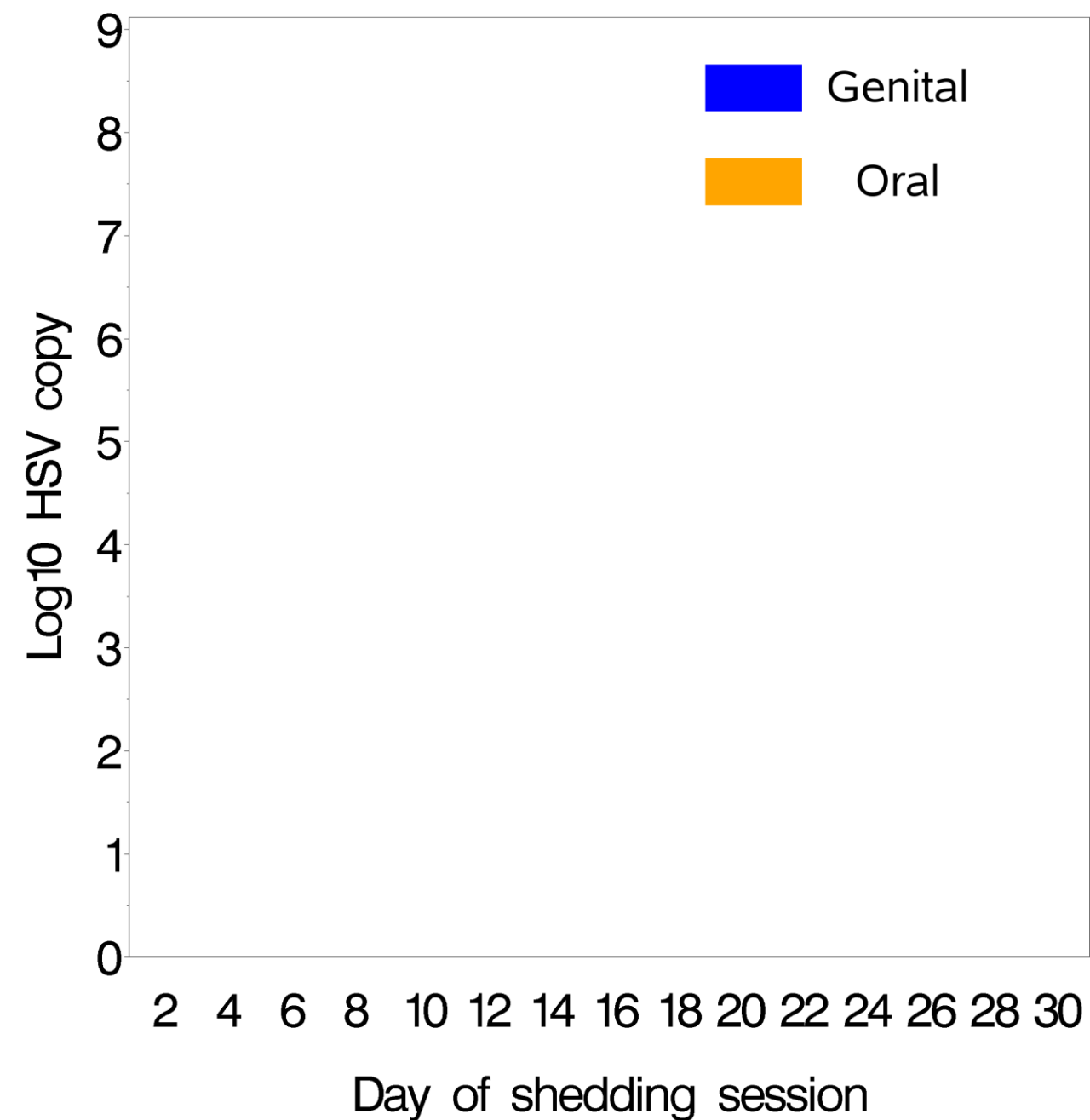
Subject B, 48—52 weeks post acquisition



Subject D, unknown, 8–12 weeks post acquisition



Subject D, 48–52 weeks post acquisition



Rates of genital and oral shedding & lesions

	Session 1 2-3 months	Session 2 11-12 months
GENITAL		
Participants with genital shedding	36 (61%)	17 (29%)
Genital shedding rate	12.9%	5.6%
Median quantity of virus shed	2.79 log ₁₀ copies/ml	4.58 log ₁₀ copies/ml
Genital lesion rate	1.9%	4.1%
ORAL		
Number of participants with oral shedding	17 (29%)	13 (22%)
Oral shedding Rate	3.9%	3.7%
Median quantity of virus shed	3.15 log ₁₀ copies/ml	2.95 log ₁₀ copies/ml
Oral lesion rate	0.6%	0.6%

Relative risk of shedding & lesions

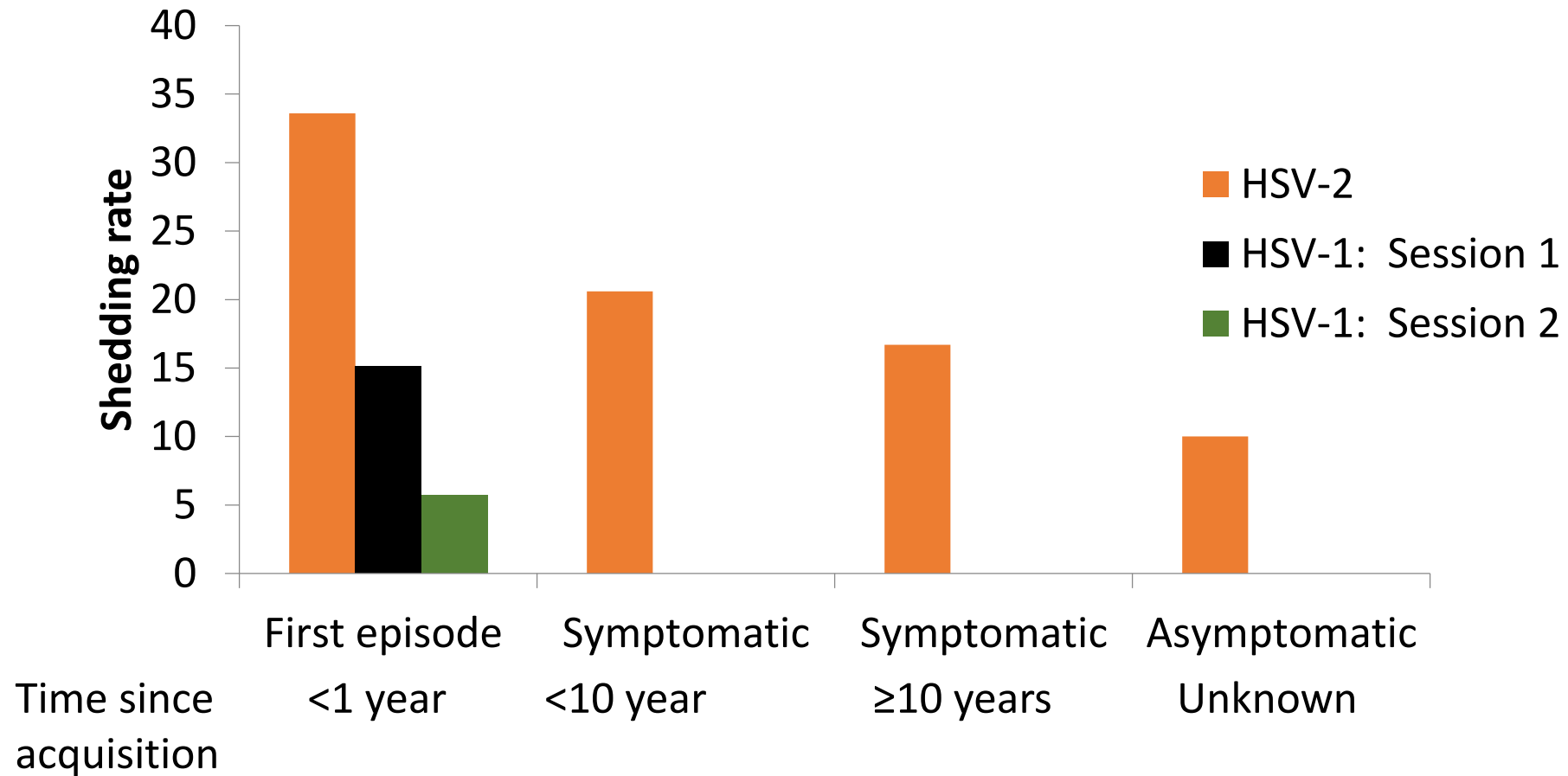
	Relative risk of shedding & lesions Session 2 vs. Session 1	95% CI	P-value
Genital shedding	0.44	0.23-0.83	0.013
Genital lesions	2.02	0.72-5.53	0.17
Oral shedding	0.96	0.45-2.02	0.91
Oral lesions	1.19	0.23-6.04	0.83

Methods: Poisson mixed model regression

Shedding rates at >2 years

		Genital			Oral		
Participant		8-12 wks	48-52 wks	>2 years	8-12 wks	48-52 wks	>2 years
1	Primary	62.5	33.3	0	12.5	3.7	0
2	Primary	3.5	51.7	0	0	0	0
3	Primary	15	6.6	0	0	0	0
4	Primary	17.3	33.3	0	0	38	19.2

Shedding Rate: Genital HSV-2 vs. HSV-1



Remaining questions

- Can we estimate risk of genital HSV-1 transmission by number of clinical recurrences or shedding?
- How is control of HSV-1 replication achieved so quickly after first episode?
 - Decreased fitness for sacral ganglia compared to HSV-2?
 - Better immunologic response?
 - Studies to define development of cell mediated immune response are ongoing
 - Role of tissue resident memory CD4/CD8 cells?
 - Is there an association between virologic control and type of immune response elicited?

Conclusions

- Genital HSV-1 shedding and recurrences are relatively infrequent, and quantity of virus shed is low
 - Genital shedding: 5.6% at one year post infection
- Oral HSV-1 shedding and recurrences are rare among those who acquired HSV-1 genitally
- These data suggest that the risk of genital HSV-1 transmission to sexual partners is much lower than risk of HSV-2 transmission
- Genital HSV-1 has a very different natural history compared to HSV-2
 - HSV typing of first episode is critical to appropriately counsel patients

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