A 43 year-old woman seropositive for human immunodeficiency virus (HIV) complained of discomfort and burning pain in her perineal region. Clinical examination revealed multiple painful superficial ulcers. Serological tests for syphilis and swabs for Haemophilus ducreyi were negative. CD4 cell count was 78 per cubic millimeter. A polymerase-chain-reaction assay performed on lesion swabs resulted positive for herpes simplex virus type 2 (HSV-2). Serology for herpes simplex virus type 1 and type 2 were both positive (IgG) suggesting recurrent HSV-2 infection. The patient underwent treatment with oral acyclovir 400 mg 5 times per day for 14 days with complete healing of the lesions and pain relief. HSV-2 infection both increases the risk of HIV acquisition and transmission, moreover genital herpes reactivates frequently in people infected with HIV [1]. The persistence of herpes simplex ulcers for more than one month is an AIDS defining condition [2].

References