



## Herpetic whitlows

A cold sore, when it occurs on the finger or hand, is called a herpetic whitlow, or simply whitlow. Cold sores and whitlows were named long before science found out they are caused by the same virus (germ). They are both caused by herpes simplex, but they are on different areas.

Sometimes a whitlow is caused by a different germ. This is a bacterial whitlow.

The symptoms of a herpetic whitlow may be blister, just like a cold sore. Sometimes it will have clear fluid inside. But it might be much less obvious. For example, a recurrence might look like little cut. You can tell these apart from other 'cuts' because they will be much sorcer and itchier.

Whitlows are caught off another person:

- by putting your fingers in the mouth or on the lips of another person who has a cold sore. This is what babies or dentists might do.
- by accidentally infecting another area of your own skin during your first outbreak. This is called autoinoculation. But, even in the first few months, this is very unusual. And after a few months, you will have developed antibodies (soldier cells). These will then stop you from spreading herpes from a sore on one area of skin to another.

Repeat outbreaks are infrequent. Whether your whitlow is caused by herpes simplex type 1 or a type 2 makes no difference. Repeat whitlows will usually be at the same place. They could come up elsewhere on the affected arm, but they will not appear on a different area of body. This means they will not appear on the face, ribs, genitals, etc.

## Transmission

Transmission is, like any herpes infection: "skin to skin, with the affected area, when the virus is active, with friction."

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It is therefore very simple to protect people from your whitlow by using a plaster/Elastoplast/Band-Aid. You could use one from when you first feel the prodrome (warning nerve sensations) until any symptoms have stopped.

By age 25, over seven out of ten people you meet will already have herpes simplex virus type 1 or 2. This means they will be fully or partially protected. So they would be very unlikely to catch it from you.

## **Treatment**

A doctor may prescribe antiviral tablets to treat herpetic whitlows. However, there are few studies proving how well this will work. All whitlows will clear up by themselves without any treatment.

A scientific study: One double-blinded, placebo-controlled, crossover study looked at people getting repeated whitlows caused by herpes simplex type 2. They found that aciclovir pills started during the prodromal stage (before symptoms appeared on the skin) helped reduce symptoms from 10.1 days to 3.7 days and positive viral cultures from 5.3 to 0.6 days. In another study, when people took daily tablets, the number of whitlows that they had was reduced.

As with facial or genital infection, aciclovir cream is not worth using.

Pain relief could be helpful: pills such as ibuprofen, paracetamol, etc. You can use any cream with lidocaine in it. See [list of products here](#). They are all sold for different uses. But there is no reason why you cannot put, for instance, Anbesol Adult Strength Gel 2% on your hand - or anywhere else - since it has been created to use in your mouth!

Lomaherpan cream is made to help stop the sore from developing. You should use it before the viral sores break the skin. It has been used in Germany for many decades. In the UK, you can buy it only at <https://herpes.org.uk/shop>