U.S. Preventive Services Task Force Recommends Against Serologic Screening for Genital Herpes Infection

The Task Force found the harms outweigh the benefits of screening for genital herpes infection in adolescents and adults without signs or symptoms, including those who are pregnant.

WASHINGTON, D.C. – August 2, 2016 – The U.S. Preventive Services Task Force (Task Force) today posted for public comment a draft recommendation statement and draft evidence review on screening for genital herpes infection using a blood test. After reviewing the evidence, the Task Force recommends against using current blood tests to screen for genital herpes in people with no signs or symptoms of infection, including adolescents and adults, as well as pregnant women. This is a D recommendation.

Genital herpes is a common sexually transmitted infection in the United States that unfortunately cannot be cured. The Task Force found that the benefits for screening are no greater than small, in part, because screening, early identification, and treatment are unlikely to alter the course of the disease. But, the potential harms of screening for herpes are substantial due largely to the inaccuracy of the main blood tests available.

“While genital herpes is relatively common, testing is not generally helpful for people who have not experienced symptoms, in part because the tests are often inaccurate,” says Task Force member Maureen G. Phipps, M.D., M.P.H. “Further, because there’s no cure, there isn’t much doctors and nurses can do for people who don’t have symptoms.”

“People should be aware of the signs and symptoms of genital herpes and should talk to their doctor or nurse if they are concerned,” says Ann E. Kurth, Ph.D., C.N.M., M.S.N., M.P.H. “This is especially true for women who are pregnant because there are things clinicians can do to help women who have genital herpes protect their babies during delivery.”

This draft recommendation is built on long-standing evidence and is consistent with the Task Force’s 2005 final recommendation statement. Currently, there are no major public health organizations that recommend universal screening for genital herpes in patients who have no signs or symptoms, including pregnant women.

The Task Force recommends screening for other sexually transmitted infections including chlamydia, gonorrhea, syphilis, and HIV, and recommends behavioral counseling to reduce the risk of acquiring STIs for people at high risk.

The Task Force’s draft recommendation statement and draft evidence review have been posted for public comment on the Task Force Web site at www.uspreventiveservicestaskforce.org. Comments can be submitted from August 2 to August 29 at www.uspreventiveservicestaskforce.org/tfcomment.htm.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based

Grades in this recommendation:
D: Not recommended.
Learn more here
recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Phipps is the department chair and Chace-Joukowsky professor of obstetrics and gynecology and assistant dean for teaching and research on women's health at the Warren Alpert Medical School of Brown University. She is also a professor of epidemiology in the School of Public Health at Brown University. In addition, she is the chief of obstetrics and gynecology at Women & Infants Hospital of Rhode Island and the executive chief of obstetrics and gynecology at Care New England.

Dr. Kurth is dean of the Yale School of Nursing. She is also an adjunct professor in the New York University College of Nursing and the College of Global Public Health. Dr. Kurth is a fellow of the American Academy of Nursing and the New York Academy of Medicine and an elected member of the National Academy of Medicine (formerly the Institute of Medicine). Dr. Kurth is a clinically-trained epidemiologist who studies approaches to improving HIV and sexually transmitted infection prevention, screening, and care; reproductive health; and global health workforce/system strengthening efforts.

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