Cold Sores

Brown Health Services Patient Education Series

What are cold sores?

Cold sores occur most often on the outside of the lips or nostrils, and on the gums and roof of the mouth, sometimes on the cheeks. A person getting a cold sore often first experiences a feeling of tightness, soreness, burning or swelling in the area where the cold sore will develop. A set of small blisters form, rupture and often grow together to form one large, irregular sore that yields fluid. If the affected area is large, the skin may crack or separate due to movement in the area such as the lips. Scabs form and healing takes place within 7 to 14 days.

How common are they?

Cold sores affect 20% to 45% of the adult population. Unlike canker sores, cold sores are contagious and can be transmitted from one person to another. (Health Services has a separate handout available on canker sores.)

What causes them?

Cold sores are most commonly caused by the contagious virus herpes simplex 1 but may also be caused by herpes simplex 2. The virus does not migrate through the body and will not cause sores at places other than where it has been introduced to the skin. Because it is a virus, it cannot be cured or completely cleared from your system, but there are medications that can reduce the symptoms when sores occur.

Many children contract the virus through contact with parents, siblings or other infected relatives. Close-contact sports (e.g. wrestling) can provide conditions for skin to skin transmission between participants.

A person who is developing or has a cold sore can transmit the virus to another person by kissing. Sharing drinking glasses or straws can also transmit the virus. Please be aware that a person who is developing or has a cold sore can also transmit the virus to a sexual partner's genitals when engaging in oral sex.

How long after exposure will symptoms appear?

The herpes virus is transmitted when you have direct contact with a person's infected body part.

- Usually a herpes cold sore will appear 2 to 20 days after exposure
- first episode is often accompanied by a very sore mouth, difficulty eating, swollen glands, fever, fatigue and a sense of being ill
- symptoms during the first infection may be more severe than recurrences
- primary infection may last longer than recurrences

If your body has never come in contact with this virus before there are no antibodies in your system to quickly fight off the infection. During this primary infection, antibodies will be formed and will remain in your body ready to fight the virus if it becomes active again.

What should I do if I have a cold sore?

- Avoid touching the blisters/sore
- healing occurs best when you leave the sores alone

- kissing and touching others after touching a sore should be avoided as the fluid contains live virus which can be transmitted to another person.
- Refrain from sharing drinking glasses, cans, bottles, eating utensils and straws with other people.
- If you get cold sores, don't share lip balm, lip gloss or lipstick with other people.
- Do not share razors.

Prevention of autoinoculation:

- be careful not to touch other parts of your body after touching a sore because you can transmit the virus to a new location
- People are more susceptible to this during the first infection
- Eyes and fingers (where there are cuts) are vulnerable
- a person who has an active cold sore should be careful not to touch the sore and then touch or rub the eyes
- Wash your hands well
- People who wear contact lenses and have an active cold sore should avoid using their saliva to lubricate their contact lenses when they need to take them out

Some foods are best avoided simply because they sting or irritate a sore around the mouth – things like oranges, vinegar and really spicy foods. It may also be a good idea to avoid foods that require you to stretch your mouth a great deal and could cause the sore or scab to split.

Treatment/Symptom management

 Prescription antiviral agents such as acyclovir and valacyclovir and famciclovir can be used to treat cold sores. It is important to start this medication as soon as possible for it to be effective. Your provider may be able to provide medication to use for current cold sores and to have on hand for any future outbreaks. Prescriptions

- may be especially useful if outbreaks of cold sores are frequent or severe.
- Non-prescription products (such as Campophenique, Blistex Medicated Balm, Herpacin-L) which may contain a mild anesthetic (benzocaine) may relieve some of the pain when applied to the area.
- Notify your medical provider if you develop pus in a sore, a temperature over 100 degrees (F) or an irritation in the eyes, when a cold sore is ongoing, or if you are having trouble swallowing liquids.
- Take care to prevent spread of the virus to another person by paying attention if you feel a sore coming on, or have an acute cold sore. Again, this is especially important in preventing transmission of the virus through oral sex.

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How often do people experience recurrences?

- After the initial cold sore, the virus will enter into an inactive phase
- The virus will retreat up the nerve pathways to the nerve cells in the upper cheek near each temple, known as the trigeminal ganglion
- The virus can remain inactive without causing any damage until the time when it travels back down the neuron to cause a skin outbreak at the site of the initial infection.

Some people may never have another cold sore, but others experience frequent recurrences. About 6% of people will have another sore within 1 week, 13% within 2 weeks. The reason for recurrences is not well understood; however research has indicated

that general health and immune status, physical trauma, environmental changes (e.g. extreme cold and sun exposure) skin friction and even fatigue can influence recurrences.

Are there ways to prevent recurrences?

- As a general rule, help your body fight recurrences by staying as healthy as you can. Eat well and eat a balanced diet to get all your vitamins and minerals, get enough sleep and manage stress as best you can.
- Certain factors weaken the defenses of the body allowing the virus to invade surface tissues. These include sunlight, high fever, tanning booths, emotional stress or excitement, illness, injury, fatigue, windburn and chilling.
- People who develop cold sores in response to sunlight should avoid tanning booths and wear sunscreens with a minimum SPF of 15 (particularly on the lips) and large-brimmed hats to prevent sun from reaching sensitive areas.
- Note when you have recurrences and limit activities/exposures that you feel may contribute to outbreaks.
- If you experience frequent recurrences, please visit a provider to discuss other treatment options.