

# COLD SORES

## WHAT YOU SHOULD KNOW ABOUT COLD SORES.

One of the most common oral problem is cold sores, also known as fever blisters. A cold sore is a small, fluid-filled and painful blister that normally occurs outside the mouth on the lips, nose, cheeks or elsewhere on the face, usually occurring in a cluster. It is common and highly contagious but not serious, except in newborn babies, people with eczema, people on medication which suppresses the immune system or if it gets into the eye (the eye becomes red, watery and sensitive to light). This requires immediate medical attention, as the consequences can be very severe and even fatal. Attacks are more frequent in young adults and diminish with age. The length and duration vary with different individuals, depending on their physical and emotional status.

## CAUSE

Herpes viruses are the cause of cold sores – usually by the Herpes Simplex Type 1 virus (HSV-1), while Type 11 (HSV-11) is responsible for most genital herpes, but either virus can affect both the face and the genitals. However infection on the lips does not necessarily mean that the genitals are also affected. The virus travels from the site of infection (the facial skin), along the nerve pathway and to its base. This causes an outbreak of spots or blisters and eventually painful sores will develop. Cold sores can come back repeatedly because after the initial attack, the virus remains dormant in the nervous system (inside various groups of the victim's cells), safe from the body's defense or immune system by masquerading as the person's own cells. Often, the virus travels back to the skin, along the same pathway to cause another outbreak when it is reactivated by certain precipitating factors.

## TYPES OF INFECTIONS

- 📄 Primary (occurring for the first time)
- 📄 Recurrent (occurs in 40 to 60% of people with primary infections but is usually not as severe since the body develops a partial immunity to the virus)

## SIGNS AND SYMPTOMS

- 📄 The skin tingles and itches a few hours before the skin breaks out. A person is highly infectious from just before the blisters break out until the crusts are dry.
- 📄 Blister stage: This stage begins as a red swollen patch which becomes studded with tiny blisters over about a day either in single or small clusters. The blisters are often very painful. There may be tiny ulcers instead of blisters.
- 📄 The blisters begin to dry out and heal and yellow-brown crusts begin to form. They fall off and heal after a week leaving no scar or any trace of infection. This stage is most vulnerable to being picked. If picked, the crust will painfully crack and bleed.
- 📄 The presence of pustules or pus under the crust of a cold sore may indicate a secondary bacterial infection and should be evaluated promptly and treated with an appropriate antibiotic.
- 📄 Fever, swollen lymph nodes, and just “feeling bad all over” are not uncommon.
- 📄 If the eyes are infected, permanent cloudiness of the cornea and pain may occur.

## HOW DO YOU GET COLD SORES?

The virus is transmitted via:

- Direct skin contact (e.g. kissing on the lips, touching ruptured blisters)  
Infections in babies normally come from being kissed or during birth if their mother has herpes sores present on her genital area or cervix. It is possible, though, to infect other body areas by transferring the virus through rubbing or scratching.

## COMPLICATIONS

- ❖ If the blister erupts in the eye:
  - Conjunctivitis
  - Corneal ulcer (open sore in the outer layer of the cornea)
- ❖ Encephalitis (inflammation of the brain)

- ❖ Exposure to sun/excessive heat or to cold wind
- ❖ Upper respiratory infection (e.g. colds, fever)
- ❖ menstruation
- ❖ extreme physical stress and fatigue
- ❖ poor sleep
- ❖ exhaustion
- ❖ dental procedures

Some people may seem unconnected to any specific or consistent triggering factor.

## SELF MANAGEMENT

- 🌐 A healthy lifestyle may help reduce the number of attacks. Don't be too worried because the infection will heal by itself in about 1 to 2 weeks.
- 🌐 Dab with normal saline every 4 hours whenever cold sores develop.
- 🌐 After blisters have broken out, keep the area clean and dry. Bathe the area with warm saline (one teaspoon of salt dissolved in 600 ml water) and pat dry with disposable tissue.

## TREATMENT

- 🌐 At present, there is no medication that can kill the virus inside the body and prevent recurrences. However the virus is harmless and manageable. The primary goals in treating cold sores are to control discomfort, allow healing and prevent complications. You may consult your pharmacist or doctor.
- 🌐 Your doctor may prescribe antiviral drugs (oral acyclovir) to help relieve symptoms and shorten the duration of attacks. For milder forms of recurrences, petrolatum jelly and/or antiviral creams may be applied to soothe the itch and pain. If there is evidence of secondary bacterial infection, topical or systemic antibiotics may be prescribed.
- 🌐 Since fever is a common symptom of cold sores and may also act as a triggering factor, you can treat it with acetaminophen, acetylsalicylic acid, or other anti-inflammatory drugs such as Non-steroidal Anti Inflammatory Drugs (NSAIDs).

## PREVENTION TIPS

As the herpes viruses are very contagious, the potential for spread of infection or secondary bacterial infection and scarring should be minimized by common-sense measures like:

- ✓ Wash the hands after touching the sores. Do not scratch the blisters or peel off the scabs.
- ✓ Avoid direct contact (skin to skin contact), e.g. kissing, touching, picking, engaging in oral sex especially during blistering stage.
- ✓ Avoid sharing handkerchiefs or towels
- ✓ Avoid the precipitating factors by :
  - wearing a wide brimmed hat and SPF 15 + lip sunscreen when under the sun
  - eating a well balanced nutritious diet
  - relaxing or having enough rest and sleep
  - taking regular exercise
  - reducing your intake of intoxicants (e.g. alcohol, nicotine)
- ✓ Try to stay as healthy as possible. Do your best to avoid respiratory infections even if you have not had cold sores yet. The first attack may be silent and you may already be carrying a dormant virus.

### REFERENCES:

1. Australian Pharmacy Self Care.
2. Handbook of Nonprescription Drugs, 10<sup>th</sup> Edition, American Pharmaceutical Association, 1993.
3. Malaysia Healthcare Guide 1997.
4. What You Should Know About Fever Blisters and Canker Sores by Kendall Shaw, RPh.

### Website:

1. <http://www.pharmacytimes.com>