

U.S. Preventive Services Task Force Issues Final Recommendation Statement on Serologic Screening for Genital Herpes Infection

*Screening people without signs or symptoms of genital herpes is not recommended
because it does not improve overall health*

WASHINGTON, D.C. – February 14, 2023 – The U.S. Preventive Services Task Force (Task Force) today posted a final recommendation statement on serologic screening for genital herpes infection. Based on the evidence, the Task Force continues to not recommend serologic screening for genital herpes in people without signs or symptoms. **This is a D grade.** Symptoms of genital herpes can include sores, bumps, pain, tenderness, or itching in the genital area, and fever. Experiencing these and other symptoms is known as having an “outbreak.”

Grade in this recommendation:

D: Not recommended.

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This recommendation does not apply to people who have a past genital herpes infection, including people who are in between outbreaks. Genital herpes is a common sexually transmitted infection (STI) that, unfortunately, has no cure and cannot be accurately detected in people who do not have signs of the condition. Current treatment for genital herpes focuses on managing symptoms.

“The Task Force found that screening for genital herpes in people without signs and symptoms does not improve their overall health,” says Task Force member James Stevermer, M.D., M.S.P.H. “This is due in large part to the fact that the tests used to screen for genital herpes have limitations and a significant chance that the results will say a person has the infection when they do not. In fact, if current screening tests were used across all adolescents and adults, as many as half of the positive results could be wrong.”

Pregnant people can transmit genital herpes to their baby, most often during vaginal delivery, which is known as neonatal herpes. Fortunately, neonatal herpes is uncommon, but when it does happen, it can have serious consequences for the baby. The Task Force recognizes that pregnant people have separate and distinct preventive health needs. However, the evidence shows that the harms still outweigh the benefits of screening pregnant people without signs and symptoms.

“The Task Force encourages people who are experiencing symptoms, have a partner who has been diagnosed with herpes, or have any concerns related to their sexual health to talk to their healthcare professional about testing and treatment options,” says Task Force vice chair Michael Barry, M.D. “It is particularly important that people who are pregnant or planning to become pregnant speak with a healthcare professional if they have questions or concerns about their sexual health.”

While screening for genital herpes among asymptomatic people is not beneficial, the Task Force recognizes the importance of sexual health. The Task Force has positive recommendations on screening for other STIs, including chlamydia, gonorrhea, syphilis, and HIV, and behavioral counseling to prevent STIs among people who are at increased risk.

The Task Force's final recommendation statement and corresponding evidence summary have been published online in the *Journal of the American Medical Association*, as well as on the Task Force website at: <https://www.uspreventiveservicestaskforce.org>. A draft version of the recommendation statement and evidence review were available for public comment from August 16, 2022, to September 12, 2022.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Stevermer is vice chair for clinical affairs and professor of family and community medicine at the University of Missouri (MU). He is the medical director of MU Healthcare Family Medicine–Callaway Physicians. He is also the medical director for a local nursing home and the county ambulance district.

Dr. Barry is director of the Informed Medical Decisions Program in the Health Decision Sciences Center at Massachusetts General Hospital. He is also a professor of medicine at Harvard Medical School and a clinician at Massachusetts General Hospital.

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