PROJECT INFORMATION

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Does Treating Genital Herpes during Pregnancy Improve Birth Outcomes?

Principal investigator

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Organization

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What was the research about?

Genital herpes is a sexually transmitted infection. In pregnant women, genital herpes can cause problems for the baby. For example, genital herpes may increase the risk of having a baby before 37 weeks, called preterm birth, or of having a baby with low birthweight.

In this study, the research team wanted to learn if

- Treating genital herpes in pregnant women lowered the risk of preterm birth and low birthweight
- The timing or length of treatment lowered the risk of preterm birth and low birthweight

What were the results?

Preterm birth. Among pregnant women with genital herpes,

- Women who received treatment had a lower risk of preterm birth than women who didn't receive treatment.
- Women who received treatment before the third trimester had a lower risk of preterm birth than women who received treatment in the third trimester.
- Women whose treatment lasted 20 days or more had a lower risk of preterm birth than women who didn't receive treatment. But women who received treatment for less than 20 days didn't have a lower

risk of preterm birth than women who didn't receive treatment.

The risk of preterm birth didn't differ between women with genital herpes who received treatment and women who didn't have genital herpes.

Low birthweight. Compared with women who didn't receive treatment, among those who did, treatment, treatment timing, and length of treatment did not reduce the risk of low birthweight.

Who was in the study?

The study included data from 89,132 women in northern California who were at least 20 weeks pregnant during the study. Of these, 35 percent were White, 26 percent were Asian, 6 percent were African American, and 6 percent were other races; 26 percent were Hispanic. In this study, 14 percent of women had genital herpes, used herpes medicine, or both.

What did the research team do?

The research team reviewed health records of pregnant women to see if treatment, treatment timing, or length of treatment reduced the risk of preterm birth and low birthweight.

Women who had genital herpes during pregnancy, doctors, and patient health organizations helped plan and conduct the study.

What were the limits of the study?

Because the research team didn't assign women by chance to receive treatment, the team can't say for sure if the changes in preterm delivery happened

because of the treatment. Differences could be due to patient characteristics, such as other existing health problems.

Future research could use a clinical trial to learn more about how treating genital herpes during pregnancy affects birth outcomes.

How can people use the results?

Women and their doctors can use the results when considering whether and how to treat genital herpes during pregnancy.

To learn more about this project, visit www.pcori.org/Li347.