#### **Viral Infections of the Urogenital Tract L8**

## 1. Herpes Simplex Virus (HSV)

**Definition**: **Double-stranded DNA virus** causing genital herpes.

#### Types:

- **HSV-1**: Tropism for *oral epithelium* (common in childhood via saliva).
- **HSV-2**: Tropism for *genital epithelium* (spread via **sexual contact**).

### **Etiology**

- Family: Herpesviridae.
- Structure:
  - Enveloped, icosahedral nucleocapsid.

#### **Transmission**

- Direct contact with mucosal secretions or skin lesions. HSV1----saliva transmission
- HSV-2 detection in children: Raises suspicion of sexual abuse.

## **Pathophysiology**

- 1. **Inoculation**: Enters through mucosal/skin breaks.
- 2. Neurovirulence: Replicates in nerve cells.
- 3. Latency: Dormant in ganglia:
  - Trigeminal ganglion (HSV-1).
  - o Sacral ganglion (HSV-2).
- 4. **Reactivation**: Triggered by stress, trauma, or immunodeficiency.

#### **Clinical Features**

- Primary Infection:
  - o Prodromal symptoms: Tingling, pain, pruritus.
  - Skin lesions: Grouped erythematous vesicles → painful ulcers in anogenital area.
  - o Systemic symptoms: Fever, lymphadenopathy.

#### Recurrent Infection:

- Prodromal: pain in genitals, legs, buttocks, hips
- Unilateral lesions, shorter duration, milder symptoms

#### **Diagnosis & Treatment**

- Diagnosis: Clinical
  - PCR or viral culture (confirmatory).
- Treatment:
  - Acyclovir (oral/topical): Reduces severity, duration, and viral shedding.
  - Cannot prevent recurrence.

### 2. Human Papillomavirus (HPV)

### **High-Risk Serotypes for Cervical Cancer:**

HPV 16, 18, 31, 33 (responsible for 70% of <u>cervical cancers</u>).

# 3. Molluscum Contagiosum Virus (MCV)

**Definition**: **Enveloped double-stranded DNA poxvirus**, **linear** causing skin infection.\\ childhood <5year peak \\ tall incubation period (2-7) weeks

## **Etiology**

- Family: Poxviridae.
- Transmission:
  - Direct skin contact (e.g., contact sports, sexual contact).
  - Autoinoculation (scratching).
  - o Fomites (towels, sponges).

#### **Clinical Features**

- Appearance:
  - Pearly, nontender, dome-shaped papules with central umbilication.
- Distribution:
  - Children: Face, trunk, extremities.
  - o Adults: Genitalia, lower abdomen.

## **Diagnosis & Treatment**

- **Diagnosis**: <u>Clinical</u> (distinctive lesions).
- Treatment: No treatment necessary
  - Self-limiting (resolves in ~1 year).
  - o Options for cosmetic/transmission control:
    - **Cryotherapy**, curettage, topical cantharidin.

#### **Infection Control**

- Avoid scratching/sharing towels, bed linen.
- Cover lesions during contact sports/swimming.

### Key

Virus	Key Features	Treatment
HSV	Latency in ganglia, recurrent ulcers	Acyclovir
HPV	High-risk: 16, 18, 31, 33 (cervical cancer)	
MCV	Umbilicated papules, self-limiting	Not necessary