FACTSHEET

LYMPHOGRANULOMA VENEREUM (LGV)

As at November 201

What is LGV?

The sexually transmitted infection lymphogranuloma venereum (LGV) is caused by subtypes of the bacterium *Chlamydia trachomatis*. Until the early 2000s, LGV was very rare in Switzerland. Since then, however, there has been an increase in infections, particularly among HIV-positive men who have sex with men.

How is lymphogranuloma venereum transmitted?

LGV is transmitted through vaginal, oral or anal intercourse, as well in group sex situations, for example through shared sex toys.

What are its symptoms and its consequences?

LGV is characterized by pronounced symptoms, initially as an ulcer (lump, open wound) in the area of the anal or vaginal mucosa or on the penis (rarely inside the mouth). Later symptoms include extremely painful swelling and redness in the groin (rarely on the neck), which can open and release pus. Fever and a strong feeling of illness are also common. Infestation of the anus and rectum manifests through severe pain during bowel movements as well as mucus and blood in the stool. In the absence of treatment or late treatment, the infection can cause severe lesions which require surgical intervention.

How is lymphogranuloma venereum tested for?

The diagnosis for LGV is usually made by the doctor. If an LGV test is necessary, it initially involves analysis of a mucosal swab of the affected areas for chlamydia, followed by LGV subtype testing. In the absence of symptoms, routine testing for LGV is not recommended.

How is lymphogranuloma venereum treated?

The infection can be cured with antibiotics. Changes to the skin and internal scarring may have to be treated surgically.

Should sexual partners get treatment as well?

The person concerned should consider, together with her or his doctor, where the infection came from and whom it might already have been passed on to. Those sexual partners should be informed about the diagnosis, so they can get a medical exam and, if necessary, treatment.

In case of an ongoing sexual relationship, both partners need to be treated simultaneously. Consistent treatment takes three weeks.

How can the (re)infection be prevented?

If you have changing or multiple sexual partners during the same time period, talk to your doctor or another specialist about sexually transmitted infections (including HIV) and get advice on whether tests may be necessary, and if so, which ones.

In case of an infection, www.lovelife.ch provides tips on how to inform your partner.

And for everyone having sex:

Because everybody likes it differently: do the personalised Safer Sex Check at lovelife.ch.

