



Lymphogranuloma Venereum (LGV)

What is LGV?

LGV (Lymphogranuloma venereum) is an infection caused by the same bacteria that causes Chlamydia, a common sexually transmitted infection (STI). The infections caused by LGV are often more serious than chlamydia, cause different symptoms, and have different results if left untreated. LGV was a rare STI in Canada, but has recently re-emerged. In Canada, 1-5 new cases have been detected each month since enhanced surveillance began. Most have involved men having sex with men.

How is LGV transmitted?

LGV is transmitted during unprotected oral, vaginal or anal sex. LGV can be prevented by using condoms or other barrier methods during sex.

What are the signs and symptoms?

Symptoms of LGV start to appear 3 to 30 days after infection. A painless sore or lump may appear where the bacteria entered the body - in the vagina, penis, rectum, cervix or mouth. Because the sore or lump can be painless, often internal, and clears up without treatment, you may not know you are infected.

Two to six weeks after the sore, you may experience flu-like symptoms, including:

- low-grade fever
- chills
- fatigue
- muscle and joint aches

Your lymph nodes may become swollen in the area where you were infected - your groin, anal region or neck. If you were infected through anal sex, you may have discharge of blood or pus from your anus and you may experience constipation.



How is it LGV diagnosed?

LGV is difficult to diagnose because the symptoms can be confused with other STIs. It can be detected by a taking a swab from the infected area. A blood test may also be needed, as well as additional tests, since other STIs are often contracted at the same time.

How is LGV treated?

LGV can be treated and cured by a three week course of antibiotics. To cure LGV, all prescribed pills must be taken as directed. It is very important to abstain from sexual intercourse (oral, vaginal, and/or anal), even with a condom, until all the medication is finished, and test results after treatment show that the infection has been cured. It is also important that all sexual partner(s) within the last 60 days are tested and treated whether they have symptoms or not.

What are the health risks of LGV?

If left untreated, LGV can cause scarring and deformity in the genital or anal area, depending on the area of infection. This deformity cannot be reversed through medication and may require surgery to repair. In rare cases, an untreated infection can cause meningoenzephalitis (inflammation of the brain and spinal cord tissue), and even death. If you have LGV, you are at increased risk of getting HIV, other STIs and infections that are transmitted through the blood.

What can I do to prevent LGV?

Following these suggestions may help you protect yourself from LGV, as well as other STIs.

- Abstinence
- Learn about safer sex methods.
- Make informed decisions. Talk to your partner(s) about their STI status and the use of protection.
- Correct use of condoms and other barriers such as dental dams with **every** sexual encounter; reduces the risk of getting LGV and other STIs.
- Get tested for STIs if you have had unprotected sex. Remember, you can be infected without having any obvious symptoms.

Is follow up important?

It is important to return to the clinic or health care provider for a repeat test known as a "test of cure" to make sure that the LGV infection has been cured. This is usually done 3-4 weeks after finishing all the medication. It is important that you or someone from the public health department notify any of your sexual partners from the last 60 days who may have been put at risk of infection. They will also need to be tested and possibly treated. A public health nurse or other health care provider can help with this.

For more information on LGV, please contact a member of the Haldimand-Norfolk Health Unit's Infectious Disease Team or the Sexual Health Program.



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