INTRODUCTION AND AIM OF THE WORK

Herpes simplex virus (HSV) is one of the most ancient and widely disseminated infectious agents of man, nevertheless, its ambiguity is not generally appreciated because the initial infection only rarely results in overt diseases ***(Ogilvie,1992)***.

The term "herpes" is derived from a Greek word meaning, "to creep"***(Drucker and Smiley,1992)***.

The genus herpes virus includes three medically important species; herpes virus hominis, the virus of herpes simplex , herpes virus varicella, the virus of chickenpox & herpes zoster, and herpes virus simiae, the B virus of monkeys which occasionally attacks man ***(Roizman, 1996)***.

Genital herpetic infection has been recognized as a clinical entity for more than 2 centuries, and was described as a venereal disease as early as 1883, when Unna observed that it was a vocational disease of prostitutes. HSV was isolated from lesions of the vulva, and stated that herpetic vulvo-vaginitis was a manifestation of primary genital HSV infection ***(Ogilvie,1992)***.

Genital herpes was not accepted as a sexually transmitted disease until the discovery of two sero-types of HSV(1and2) in the late 1960's, when development of laboratory assays distinguish between them and permitted the different epidemiology of HSV-1 and HSV-2 to be delineated ***(Brooks et al, 1998).***

The presentation and clinical course of primary HSV infection, whether caused by HSV types 1 or 2 are indistinguishable. However, genital infections caused by HSV-2 are reported to recur 15 times more frequently than those caused by HSV-1. Thus , approximately 98% of recurrent HSV genital infections are caused by HSV -2(***Schomogyi et al, 1998)*** .

Aim of the work :

1. Detection of herpes simplex virus from female endocervical scraps.
2. Comparison between the results of the used laboratory tests.
3. Comparison between different factors that related to the females as regards to the positive results.