

MARCH 2011:

SHINGLES

from *The Journal of the American Medical Association*, Jan. 12, 2011

The Centers for Disease Control and Prevention (CDC) strongly urges people age 60 years and older to be immunized against shingles, a painful, localized skin rash that can occur in anyone who has ever had chickenpox - that's more than 95% of the adults in the USA!

Caused by the same virus that causes chickenpox (varicella-zoster virus, or **VZV**), shingles affects about 1 million people each year in the US alone. VZV is a member of the *Herpesvirus* family, but is different from the ones responsible for cold sores or genital herpes.

After a person has had chickenpox, the virus remains **dormant** (inactive) in their nervous system. Later, the virus can become active again, travel along the affected nerves, and cause the rash and pain of shingles. Surprisingly, about one-third of the US population will get shingles at some point in their lives, and half of the people who live to age 85 have had or will get shingles.

SIGNS AND SYMPTOMS

See your healthcare provider if you develop

- Pain, often a tingling-type pain; may occur before the rash appears; may become burning or stabbing pain
- Rash on body or face (usually affects only one side, but may appear on both sides)
- Blisters that develop in the rash site and then become crusted
- Fever, headache, fatigue and/or chills

TREATMENT

- Anti-viral medications, if taken soon after symptoms begin, can shorten the length of time and the severity of a shingles episode; these must be prescribed by a healthcare professional, so call your doctor quickly
- Supportive care, including rest and plenty of liquids, is useful in treating shingles (like any other viral infection)
- Acetaminophen ("Tylenol") may help relieve pain and reduce fever, if it is present
- Cover blisters until they are crusted over; do *not* scratch blisters since they can then become infected with bacteria as well as the virus
- Wash hands frequently (keep them away from eyes, nose and mouth!)
- In rare cases, shingles can be very severe and cause critical illness, including pneumonia or encephalitis (inflammation of the brain); severe episodes of shingles may require hospitalization for more intensive treatment

COMPLICATIONS

Somewhere between one-third and one-half of older adults with shingles develop complications, and the per-

centage rises with the age of the person. Complications may include scarring, secondary bacterial infections, pneumonia, visual and hearing impairments (if the nerves of the head and face are involved), even death.

Some individuals develop a long-lasting pain condition called **post [after] herpetic [herpes infection] neuralgia** [sharp pain along one or more nerves]. This is the most frequent complication of shingles, and may last months or even years after the blisters heal. This condition is most common in older persons. Again, early treatment of shingles with an anti-viral medication may help prevent postherpetic neuralgia.



Shingles

PREVENTION

Vaccines are available for chickenpox and for shingles. Varicella vaccine [VariVax®, and ProQuad® – a combination of varicella, measles, mumps and rubella vaccines] is recommended for children and for adults who have not already had chickenpox (two shots recommended). Shingles vaccine [ZostaVax®, made of the same virus but fourteen times more potent] is recommended for adults who are 60 years and older (one shot recommended). Certain people should not have these vaccines: pregnant women, persons with immune system disease and infants younger than 12 months. Ask your doctor!

People who have shingles can pass the VZV to others who have not had chickenpox [after exposure to VZV, the first infection is chickenpox. Re-activation later in life is called shingles.] Once the blisters have healed, the contagious phase is finished.

Research clearly shows that adults age 60 and older can significantly benefit from the shingles vaccine. A large clinical trial – the Shingles Prevention Study involving 38,000 adults age 60 and older, performed by Kaiser Permanente in southern California, in conjunction with the CDC – found the vaccine reduced the overall incidence of shingles by 51% and reduced the incidence of post-herpetic neuralgia by 67%! As with most vaccines, common side effects include mild reactions, such as discomfort, swelling or redness at the injection site, headache or itching. According to the CDC, no serious problems have been identified from the shingles vaccine.

HAVE YOU HAD YOURS???

For more information, go to

- www.cdc.gov (CDC)
- www.who.int (World Health Organization)
- www.aad.org (American Academy of Dermatology)

PERMISSION GRANTED TO REPRINT!