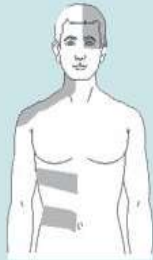




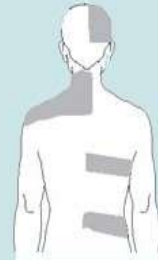
SHINGLES (Herpes Zoster)

About Shingles

Signs & Symptoms



Shingles is a painful rash that develops on one side of the face or body. The rash consists of blisters that typically scab over in 7 to 10 days and fully clears up within 2 to 4 weeks.



Before the rash appears, people often have pain, itching, or tingling in the area where it will develop. This may happen several days before the rash appears.

Most commonly, the rash occurs in a single stripe around either the left or the right side of the body. In other cases, the rash occurs on one side of the face. Shingles on the face can affect the eye and cause vision loss. In rare cases (usually in people with weakened immune systems), the rash may be more widespread on the body and look similar to a chickenpox rash.

Other symptoms of shingles can include:

- Fever
- Headache
- Chills
- Upset stomach



Transmission

Shingles is caused by varicella zoster virus (VZV), the same virus that causes chickenpox. After a person recovers from chickenpox, the virus stays dormant (inactive) in their body. The virus can reactivate later, causing shingles.

Most people who develop shingles have only one episode during their lifetime. However, you can have shingles more than once. If you have shingles, direct contact with the fluid from your rash blisters can spread VZV to people who have never had chickenpox or never received the chickenpox vaccine. If they get infected, they will develop chickenpox, not shingles. They could then develop shingles later in life.

The risk of spreading VZV to others is low if you cover the shingles rash. People with shingles cannot spread the virus before their rash blisters appear or after the rash crusts. People with chickenpox are more likely to spread VZV than people with shingles.

To prevent spreading VZV to others:

- Cover the rash.
- Avoid touching or scratching the rash.
- Wash your hands often.
- Avoid contact with the following people until your rash crusts:
 - pregnant women who have never had chickenpox or the chickenpox vaccine;
 - premature or low birth weight infants; and
 - people with weakened immune systems, such as people receiving immunosuppressive medications or undergoing chemotherapy, organ transplant recipients, and people with human immunodeficiency virus (HIV) infection.

Some people have a greater risk of getting shingles.

This includes people who:

- have medical conditions that keep their immune systems from working properly, such as certain cancers like leukemia and lymphoma, and human immunodeficiency virus (HIV)
- receive drugs that keep their immune systems from working properly, such as steroids and drugs that are given after organ transplantation

Complications of Shingles

The most common complication of shingles is long-term nerve pain called postherpetic neuralgia (PHN).

PHN occurs in the areas where the shingles rash was, even after the rash clears up. It can last for months or years after the rash goes away. The pain from PHN can be so severe and debilitating that it interferes with daily life.

About 10 to 18% of people who get shingles will experience PHN. Your risk of PHN increases with age. An older adult with shingles is more likely to develop PHN and have longer lasting and more severe pain than a younger person with shingles. People younger than 40 rarely experience PHN.

Other Complications

Shingles may lead to serious complications involving the eye, including blindness. Very rarely, it can also lead to:

- pneumonia,
- hearing problems,
- brain inflammation (encephalitis), or
- death.

Treating Shingles

Several antiviral medicines—acyclovir, valacyclovir, and famciclovir—are available to treat shingles and shorten the length and severity of the illness. These medicines are most effective if you start taking them as soon as possible after the rash appears. If you think you have shingles, contact your healthcare provider as soon as possible to discuss treatment.

Pain medicine, either over-the-counter or a prescription from your doctor, may help relieve the pain caused by shingles. Wet compresses, calamine lotion, and colloidal oatmeal baths (a lukewarm bath mixed with ground up oatmeal) may help relieve itching.

Vaccination with recombinant zoster vaccine (RZV, Shingrix) is recommended to prevent shingles and related complications in adults 50 or older. The recommended dosage is two doses, separated by 2 to 6 months. Shingrix is also recommended for adults 19 years and older who have weakened immune systems.

Photos of People with Shingles



Shingles rash on the neck
Source: PHIL Photo ID# 18254



Shingles on face



Shingles on waist



Shingles on face



Child with shingles who had a history of leukemia.