HERPES ZOSTER (SHINGLES)

What is shingles?
Shingles is caused by the varicella zoster virus (VZV), the same virus that causes chickenpox. After a person recovers from chickenpox, the virus stays dormant (inactive) in the body. For reasons not fully known, the virus can reactivate years later, causing shingles. Shingles is not caused by the same virus that causes genital herpes, a sexually transmitted disease.

How is shingles spread?
Shingles cannot be passed from one person to another. However, the virus that causes shingles, the varicella zoster virus, can be spread from a person with active shingles to another person who has never had chickenpox. In such cases, the person exposed to the virus might develop chickenpox, but they would not develop shingles.

The virus is spread through direct contact with fluid from the blisters caused by shingles.

A person with active shingles can spread the virus when the rash is in the blister-phase. A person is not infectious before the blisters appear. Once the rash has developed crusts, the person is no longer contagious. Shingles is less contagious than chickenpox and the risk of a person with shingles spreading the virus is low if the rash is covered.

What are the signs and symptoms of shingles?
Shingles is a painful rash that develops on one side of the face or body. The rash forms blisters that typically scab over in 7 to 10 days and clears up within 2 to 4 weeks.

Before the rash develops, people often have pain, itching, or tingling in the area where the rash will develop. This may happen anywhere from 1 to 5 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. In rare cases (usually among people with weakened immune systems), the rash may be more widespread and look similar to a chickenpox rash. Shingles can affect the eye and cause loss of vision. Other symptoms of shingles can include: fever, headache, chills and upset stomach.

Who is most at risk?
Anyone who has recovered from chickenpox may develop shingles; even children can get shingles. However the risk of shingles increases as you get older. About half of all cases occur in men and women 60 years old or older. 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), and
- people who receive immune-suppressive drugs, such as steroids and drugs that given after organ transplantation.
People who develop shingles typically have only one episode in their lifetime. However, a person can have a second or even a third episode.

**What type of health problems are caused by shingles?**
The most common complication of shingles is a condition called post-herpetic neuralgia (PHN). People with PHN have severe pain in the areas where they had the shingles rash, even after the rash clears up.

The pain from PHN may be severe and debilitating, but it usually resolves in a few weeks or months in most patients. Some people can have pain from PHN for many years.

As people get older, they are more likely to develop PHN, and the pain is more likely to be severe. PHN occurs rarely among people under 40 years of age but can occur in up to a third of untreated people who are 60 years of age and older.

Shingles may lead to serious complications involving the eye. Very rarely, shingles can also lead to pneumonia, hearing problems, blindness, brain inflammation (encephalitis) or death.

**How is shingles diagnosed?**
Shingles may be diagnosed by physical examination, testing the lesions (blisters) or blood tests.

**How is shingles treated?**
Several antiviral medicines—acyclovir, valacyclovir, and famciclovir—are available to treat shingles. These medicines will help shorten the length and severity of the illness. But to be effective, they must be started as soon as possible after the rash appears. People who have or think they might have shingles should call their healthcare provider as soon as possible to discuss treatment options.

Analgesics (pain medicine) may help relieve the pain caused by shingles. Wet compresses, calamine lotion, and colloidal oatmeal baths may help relieve some of the itching.

**How can shingles be prevented?**
The only way to reduce the risk of developing shingles and the long-term pain from post-herpetic neuralgia (PHN) is to get vaccinated. The shingles vaccine is approved by FDA for people age 50 years and older.

**Where can I get more information?**
- Your personal healthcare provider
- Utah Department of Health, Bureau of Epidemiology 801-538-6191
- Your local health department