

# The key facts about shingles



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**S**hingles is caused by a reactivation of the varicella-zoster virus within the nerves. It often appears as a painful rash on the body that follows the path of the infected nerve. Although shingles is known as herpes zoster, it is very different from herpes simplex, the virus that causes cold sores (fever blisters) and genital herpes. In fact, shingles is related to chickenpox. Once you have had chickenpox, the virus may remain inactive in your nerve roots and it can reactivate as shingles at any point, although most often in older adults.

cause or as the result of an impaired immune system. Shingles is typically diagnosed by a physician's clinical observation or by laboratory analysis of a scraping from the blister's fluid.

## Signs and symptoms

Patients often present with pain, tingling and a rash over the stomach, chest and eye regions. The rash usually develops on just one side of the body. Localized pain, which is sometimes misdiagnosed as stomach or cardiac pain, might precede the rash for two or three days. The rash starts with a red blotchy appearance before itchy blisters develop. Swelling can occur in



point in their life. Elderly people and those with a weak immune system usually find shingles quite painful, while the pain may be less notable in young patients. Some individuals describe a constant dull pain while others experience the pain as more fluctuant, sharp and intolerable. Symptoms typically last for two to four weeks, but the pain can remain after the rash has disappeared. The most common severe complication of shingles is a condition called post-herpetic neuralgia (PHN). Risk factors for shingles include being over the age of 50 years old, having already experienced chicken pox, and having an impaired immune system. Immune-system deficiencies can be associated with a period of overwhelming stress,

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The virus is only contagious if an individual who has never had chickenpox (or the vaccine) is exposed to fluids from active shingles. This situation could result in a case of chickenpox. The virus can reactivate as shingles with no distinguishable

the region and new blisters might form for up to a week, with older blisters scabbing over. Some people have a fever and headache, as well as an upset stomach.

It is estimated that about a third of people develop shingles at some

the result of immunosuppression from a medical condition (e.g., HIV/AIDS, cancer), or a treatment plan (e.g., steroids, biological therapies, chemotherapy). Women are also more likely to develop shingles. Other risk factors include age, family history, diabetes and COPD.

It is possible to get shingles more than once. It has been suggested that the risk over 8 years is 6.2%. Women remain at increased risk. Other risk factors for redevelopment include age and having severe post-viral pain after the initial flare. People with weakened immune systems are also at a higher than average risk of redeveloping shingles.

### Prevention and treatment

An important step in protecting yourself from shingles is getting the vaccine. The shingles vaccine is a single-dose immunization that reduces your risk of developing shingles by 50% depending on the age at which you receive the vaccine. It can also decrease pain during the flare if you still get shingles, and diminish pain following the virus (PHN). The shingles vaccine is strongly recommended for all those over the age of 60 years, but anyone 50 years and older can be immunized. Some health-insurance plans cover the vaccine, and it is available at most pharmacies and some physician



## Why are younger adults getting shingles?



Prior to the chickenpox vaccine, 90 per cent of children acquired chickenpox by the age of 12 years. Since the start of vaccinations, hospitalizations due to chickenpox have been reduced by 70 per cent. This positive outcome has been partially countered by an increase in young Canadians suffering from shingles.

Our primary message is that vaccines are critical and that the benefits outweigh the potential risks. However, the vaccine has altered the epidemiology of the virus, and perhaps the protection of herd immunity. It is no longer common for children to contract chickenpox; consequently, we do not have repeated exposures to the virus to heighten our naturally occurring immunity throughout life.

offices. A new vaccine that may offer higher levels of protection is presently in development. This vaccine should become available to the public within the next few years.

In order to help avoid shingles, it is recommended that you maintain a healthy, balanced lifestyle.

Sadly, there is no cure for shingles. Antiviral medicines reduce the duration and severity of symptoms, but must be started within the 72 hours of the first signs or symptoms. Over-the-counter pain relievers can be used for mild pain. If the pain is severe then steroids can be prescribed to reduce inflammation. Antibiotics become necessary if the rash gets infected with bacteria. Seizure medication or tricyclic antidepressants are sometimes prescribed if pain remains after the rash has healed.

At home, it is best to avoid scratching the blisters. If this is difficult, try using an anti-itch cream such as calamine lotion. Do not use any fragrant or irritating body lotions on the rash. Benzoin can be used to protect the broken skin.

### What to do if you think you have shingles

Do you have an itchy rash, tingling

or burning sensation, or pain appearing in a band across your body or your eyelid region? If you think you have shingles, visit a physician as soon as possible. Early treatment can reduce the severity of pain and risk of complications. This is especially important if your eye region is involved.

Shingles is usually not life-threatening. Nonetheless, it is important to visit your physician and monitor your well-being as your body recovers. 

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