

Stewardship of the Body By Virginia Esslinger, RN

“I give you thanks that I am fearfully, wonderfully made” (Ps. 139)

Shingles (Herpes Zoster)

What is Shingles? Shingles is a viral infection that causes a painful rash that often appears as a band of blisters that wraps from the middle of the back around one side of the chest to the breastbone. It can involve other parts of the body as well, including the neck, face, eyes, or scalp.

What causes shingles? Shingles is caused by the varicella-zoster virus, which is the same virus that causes chickenpox. Anyone who has had chickenpox may develop shingles. If the immune system does not totally destroy the virus during chickenpox, the remaining virus can enter the nervous system and lie dormant for years. Later, the virus may be reactivated and travel along nerve pathways to the skin, causing shingles.

Who gets shingles? Shingles is most common in older adults, often over 60. It also can occur in people who have a weakened immune system, who are receiving medical treatments, such as chemotherapy, radiation, or steroids, or who have a history of bone or lymphatic cancer.

Is shingles contagious? A person with shingles can pass the virus to anyone who has not ever had chickenpox, usually through direct contact with the open sores of the shingles rash. Once infected, the person will develop chickenpox, however, not shingles. The virus cannot be spread to another person with a normal immune system who has already had chickenpox. Persons with shingles should avoid: anyone who has never had chickenpox, anyone with a weak immune system, newborns, and pregnant women.

What are the symptoms of shingles? Symptoms include pain, burning, tingling, numbness or extreme sensitivity in a certain part of the body, a red rash that begins a few days after the pain, fluid-filled blisters that break open and crust over, itching, fever and chills, headache, upset stomach or abdominal pain.

How is shingles treated? Contact your doctor immediately if you suspect shingles as prompt treatment can ease pain, speed healing and reduce the risk of complications. Antiviral drugs can reduce the duration and severity of symptoms. Cortisone drugs may be used to reduce inflammation and lower the risk of postherpetic neuralgia. Pain relievers are used to control pain.

The person with shingles also should get plenty of rest and avoid strenuous activities, as well as avoid stress, which can worsen the pain. Tips to help minimize the pain include: taking an over the counter pain reliever or anti-inflammatory drug, such as motrin, advil, etc., applying an anti-itch cream or calamine lotion to the rash, washing the blisters twice a day with regular soap & water, but not bandaging them, applying cool, wet compresses to the blisters using water or water mixed with white vinegar (1 ounce vinegar to 32 ounces water), taking cool baths with baking soda, uncooked oatmeal or colloidal oatmeal in the bathwater.

What complications can occur? The complication that occurs in about one in five people who have shingles is “postherpetic neuralgia”. This is a condition in which the nerve fibers that have been damaged by the virus send confused and exaggerated messages of pain from the skin to the brain. This leaves the affected area of skin sensitive to even the slightest touch. This condition can last for quite a while after having shingles. Other complications include: encephalitis and other neurological problems, hearing or vision problems or facial paralysis, if it has occurred on the face, or bacterial skin infections if the blisters are not treated properly.

Can Shingles be prevented? There are two vaccines that may help prevent shingles: the chickenpox vaccine (Varivax) and the shingles (varicella-zoster) vaccine.

Chickenpox Vaccine: The chickenpox vaccine prevents chickenpox in most people and reduces the chance of complications and reduces the severity of the disease in the few people who get chickenpox after having the vaccine. Being immunized against chickenpox reduces the risk of getting shingles.

Shingles Vaccine: The shingles vaccine (Zostavax) can help prevent shingles in adults age 60 and older who have had chickenpox. Like the chickenpox vaccine, the shingles vaccine does not guarantee you won’t get shingles. But this vaccine will likely reduce the course and severity of the disease and reduce your risk of postherpetic neuralgia.

The shingles vaccine is recommended for all adults age 60 and older whether or not they have had shingles previously. It is given as a single injection, usually in the upper arm. Common side effects of the vaccine include redness, pain and swelling at the needle site, itching and headache.

Shingles vaccine should not be given to anyone who:

- Has ever had a life-threatening allergic reaction to gelatin, the antibiotic neomycin or any other component of shingles vaccine. Be sure to inform your doctor of any allergies before getting the vaccine.
- Has a weakened immune system from HIV/AIDS or another disease that affects the immune system.
- Is receiving medical treatments such as steroids, radiation and chemotherapy.
- Has a history of bone marrow or lymphatic cancer
- Has active, untreated tuberculosis.

The shingles vaccine is available by prescription only, so you must talk to your physician or health care practitioner about it. The cost of the vaccine ranges from \$150 to \$200 per injection. Some insurance plans may pay for it and some prescription drugs plans pay for it. You may contact your insurance company yourself or have your health care provider inquire as to whether or not your plan pays for the vaccine.

References: www.mayoclinic.com

Dept. of Health & Human Services, Centers for Disease Control & Prevention (CDC)