

Patient Information for Herpes zoster in Child/Adult

Overview

Shingles, also known as herpes zoster, is a painful rash caused by the varicella-zoster virus, the same virus that causes chickenpox. After a person recovers from chickenpox, the virus remains sleeping (dormant) in certain nerves in the body. As we get older, our immune system becomes weaker and may not be strong enough to control the virus. Shingles occurs if the virus becomes active again, growing down the nerves to reach the skin and appearing as small, painful blisters.

Who's At Risk

Although anyone who has had chickenpox or the chickenpox vaccine can get shingles, it usually occurs in people aged older than 50. People in their 70s are 15 times more likely to get shingles than younger adults. It can also be seen in people with weakened immune systems, such as people with cancer, organ transplants, autoimmune diseases, and HIV/AIDS. Shingles affects approximately 1 million people in the United States each year. Most people who have shingles will not get it again, although on rare occasions it can reappear.

Signs & Symptoms

Pain, itching, and burning or tingling in a specific location on the skin are the first symptoms that develop. After a few days, that same area will develop painful, red bumps that become blisters over 1-2 days and then burst after 5-7 days, leaving sores on the skin that eventually form scabs. You may also have fever, chills, headache, and generalized body aches. Because the virus travels down a nerve to the skin, shingles usually appears on only one side of the body and affects a specific area of the skin. Shingles commonly occurs on the chest, but it may also affect other parts of the body, including the face. The blisters may be in a cluster or a linear pattern. Most people completely recover within 4 weeks.

A particularly serious form of shingles occurs on the face and can affect the eye, possibly affecting vision if it is not promptly treated.

One of the most common complications of shingles is chronic pain in the area of skin where the rash occurred. This is called postherpetic neuralgia, and it occurs in 40% of people who are aged older than 60 when they get shingles. It is more common in older patients and in people who had severe symptoms with the initial rash.

Self-Care Guidelines

Although shingles usually heals without medical care, call your doctor if you suspect shingles *before* following these self-care instructions.

- Keep the area clean with mild soap and water.
- For pain, apply cool, damp compresses and take either acetaminophen (Tylenol) or ibuprofen (Advil, Motrin).

- Apply calamine lotion to relieve itching.

Shingles is only contagious to people who have never had chickenpox or the chickenpox vaccine. It is spread by direct skin-to-skin contact with the blister fluid. When the blisters have formed scabs, you are no longer contagious.

When to Seek Medical Care

Call your doctor if you think you may have shingles, as there are medications that may speed healing if they are given within the first 72 hours after the rash appears.

Treatments Your Physician May Prescribe

Oral antiviral medication, such as acyclovir (Zovirax), valacyclovir (Valtrex), or famciclovir (Famvir) may help if given within 72 hours after shingles lesions first appear. These medicines do not cure shingles, but they can decrease the amount of time you have pain and a rash.

Antiviral medications may also decrease your chance of getting postherpetic neuralgia at a later time and may decrease your risk of developing visual problems if you have shingles on the face.

Oral corticosteroids and pain relievers, such as acetaminophen and ibuprofen, may also be given to control pain. If the area is healed but you still have pain, a topical medication called capsaicin or a local anesthetic patch containing lidocaine may be suggested.

If you have shingles on your face, your doctor will likely send you to an eye specialist to evaluate if the virus is affecting your eye.

In 2006, the FDA approved a zoster vaccine (Zostavax®) to prevent shingles. It is recommended for anyone over the age of 60, regardless of whether they have had shingles before. It is one injection, and typically the only side effect is mild pain at the injection site. Zostavax has been shown to decrease the number of people who get shingles by about 50%. Of the people who still get shingles even after the vaccine, two-thirds fewer will be affected by postherpetic neuralgia.