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Shingles

Overview

Shingles, also known as 'herpes zoster' is a skin rash caused by the same virus that causes chicken pox (varicella zoster virus).

Like chicken pox, the skin rash of shingles has painful blisters, but it usually only occurs in a narrow band extending from the spine to one side of the abdomen, or chest, or on the face or scalp.

Shingles can only occur in people who have already had chicken pox, as it is simply a reactivation of the chicken pox virus that has been hiding inside the body.

Shingles is usually triggered when the body's natural immunity is weak. It starts with painful, sensitive skin that turns red and breaks out into little blisters. Just like chicken pox, the blistering rash will subside naturally over a few weeks.

Shingles and pregnancy

Shingles is contagious and will cause chicken pox (not shingles) in someone who has not had chicken pox before.

For this reason, people with shingles should avoid infants, pregnant women, the elderly or those who have a weakened immune system (eg. people with HIV or on chemotherapy) because exposure to the shingles could give them chicken pox.

Chicken pox can be a significant problem for children under the age of 12 months, especially newborns, and pregnant women who have not had chicken pox.

If either of these groups come into contact with chicken pox or shingles, they should see their local doctor urgently, as early treatment with immunogobulins (antibodies) or antiviral medicines may prevent serious illness.

Treatment

Treatment for shingles is similar to chicken pox and in most cases, bed rest and taking in plenty of fluids is sufficient. Pain medication like paracetamol or ibuprofen can help.

Antiviral medicines are available in more severe cases and can be given to people who are more sensitive to shingles, such as the elderly or people with HIV or cancer.

Complications

Some studies now suggest that most people with shingles should consider early treatment with antiviral medicines to reduce the risk of developing one of shingles nasty complications: post-herpetic neuralgia.

Treatment needs to start within 72 hours of the onset of the rash, so a visit to the local doctor is advised.

Shingles of the eye (herpes zoster ophthalmicus) can cause blindness, so any painful rash around the eye area should be seen by a doctor urgently.

Vaccination – children

Vaccination for the chicken pox virus is

available for everyone aged 18 months and over.

It is free and part of the Australian childhood immunisation schedule for all children at 18 months of age, or a catch-up dose for 10-13-year-olds who missed out.

Vaccination - adults

Adults can also be vaccinated (for a cost) and require two doses; adults who have not had chicken pox (or are not sure if they have) should consider vaccination, especially if they are in a high-risk occupation eg, a childcare worker, a woman planning a pregnancy or in contact with someone who has a weakened immune system such as a cancer patient or someone who has had an organ transplant.

People who have had chicken pox have a 10-20% chance of developing shingles. It is likely that vaccination against chicken pox will reduce this risk dramatically.

Cause

Shingles is caused by the reactivation of the virus varicella zoster which causes chicken pox. The virus is usually spread by direct contact with the blisters or by touching bedding or clothing.

After the chicken pox has gone, the virus that causes it lies dormant inside nerve cells where it is hidden from the body's immune system. It can remain there for many years until the body's immune system is weakened when it can reactivate, causing similar blisters to chicken pox — but usually only on a smaller patch of skin (supplied by that nerve) such as one side of the chest, back, abdomen or face.

Symptoms

Shingles usually develop in adults, with symptoms including:

- Pain, which is an early symptom for shingles. The pain is often located where the rash will appear. The pain may be experienced as sharp, aching, piercing, tearing, or similar to an electric shock.
- The affected skin may itch, or become sensitive. This sensation can occur days before the rash appears.
- Rash: this blistering rash occurs on one side of the trunk of the body in at least 50% of people. Other common places are the head, neck and lower back.
- Fever but this usually only happens in rare instances.

Sometimes the rash may pass but the pain can linger for more than 12 months.

Complications

This condition is known as post-herpetic neuralgia and is more common in people over the age of 50, people who experience pain before the onset of the rash or in people who experience severe pain with the rash.

Early treatment with antiviral medicines and/

or pain medication can reduce the chances of developing post-herpetic neuralgia.

Shingles of the eye (herpes zoster ophthalmicus) can cause blindness, so any painful rash around the eye area should be seen by a doctor urgently.

Diagnosis

Shingles can normally be diagnosed by physical examination alone. Samples from blood and the rash can be collected for testing to confirm the diagnosis, but this is rarely necessary.

Treatment

Just like chicken pox, the body's immune system can deal with shingles without much complication. Simple remedies, such as bed rest and taking in plenty of fluids, can help deal with the discomfort brought on by the rash and skin sensitivity.

Paracetamol or ibuprofen can be taken to releive pain and fever. Cool baths can help relieve the blisters. Hot baths, however, are not recommended as they may irritate the itching.

Application of skin lotions containing calamine and colloidal oatmeal can also help reduce the itching.

Antiviral medications

Antiviral medicines are available and should be considered in people with shingles who:

- Have severe pain, especially before the rash appears or within 72 hours of the rash appearing.
- Are aged over 50.

Have HIV, cancer or an organ transplant. Early treatment can reduce the chances of developing one of the nasty complications of shingles, post-herpetic neuralgia, a chronic condition characterised by severe pain in the area long after the rash has gone.

Some studies even suggest that most cases of shingles should be treated with antivirals, provided treatment starts within 72 hours of the onset of the rash.

Medicines

Aciclovir is the classic antiviral medicine for treatment of the varicella zoster infection that causes chicken pox and shingles. However there are newer ones that are favoured as they require fewer daily doses. These include valaciclovir and famciclovir which belong to the same class of antivirus medications.

Antiviral medicines work best when started within 72 hours from the start of the rash, and are normally prescribed for those who have severe pain, are over 50 or are immunocompromised — that is, have a weakened immune system.

Lifestyle and diet

Vaccination for the chicken pox virus (the same virus that causes shingles) is available for



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everyone aged 18 months and over. Shingles is contagious and can cause chicken pox in other people who have not had chicken pox or have not been vaccinated.

Because of this, people with shingles need to avoid contact with pregnant women, infants and people with weakened immune systems — like cancer patients or those who've had an organ transplant — as chicken pox in these groups can be a significant problem.

Support & online resources Some useful resources for shingles include: The Australian Herpes Management Forum www.ahmf.com.au/patients/conditions/ herpes-zoster/9-things-you-shouldknow-about-shingles

The Australian Immunisation Handbook

www.immunise.health.gov.au/internet/ immunise/publishing.nsf/Content/ Handbook-zoster

It'sMyHealth.com.au

