

HERPES ZOSTER

INDIAN ASSOCIATION OF DERMATOLOGISTS,
VENEREOLOGISTS AND LEPROLOGISTS

- The skin rash and blisters should be rinsed gently once or twice per day with cool water. Your doctor may suggest that you use antibiotic ointment on open areas. Because the pain that accompanies shingles can be intense, your doctor probably will prescribe a pain medication.
- For post-herpetic neuralgia, different medications are often prescribed for the pain that lingers well after the rash has gone away. These drugs alter the way pain signals are perceived by our central nervous system. Examples include amitriptyline, doxepin pregabalin and gabapentin in dosages prescribed by your dermatologist.
- When shingles affects the eyes, an ophthalmologist should be consulted immediately.

8. How long does zoster/shingles last?

- Shingles usually takes 7 to 10 days to run its course, although blisters may take several weeks to disappear completely. Within 4 weeks, the appearance of your skin most likely will return to normal. Some people are left with dark spots on the skin in the area of the original rash.
- The duration of pain is highly variable. Most people's pain decreases within 2 or 3 months. About 10% of people have pain for many months and about 2% continue to have pain longer than 1 year.

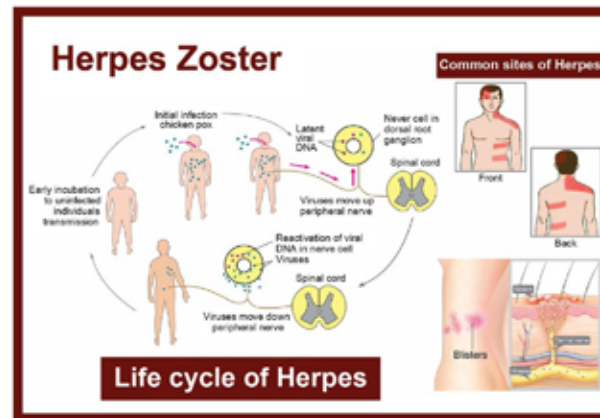
9. Can Herpes zoster be cured? Can it recur?

- Most people recover completely from an acute episode with no pain; and skin color returns to normal. Once you have had shingles, it is unusual for the condition to return.
- Shingles comes back in only about 2% of people, but in up to 20% of people with AIDS.
- Long-term complications from shingles is post-herpetic neuralgia. This is characterized by shooting pain along the nerve and may continue for months or many years. However, if shingles is treated adequately with appropriate antivirals, the incidence of nerve pain is less. The disease also may cause varying degrees of skin discoloration, primarily darkening as well as scarring.

10. What can I do to prevent zoster?

- A vaccine is recommended for people 60 and over to help prevent shingles and to decrease the risk of post-herpetic neuralgia if shingles does occur. The ingredients in the vaccine are the same as the chickenpox vaccine for children, but the dose is 14 times stronger.
- The shingles vaccine is not effective for and should not be used in people with active shingles or people who already have post-herpetic neuralgia.
- The standard chickenpox vaccine for children is still too new to determine how effective it will be in preventing shingles later in life.

Illustrative representation:



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Web link to Patient Information Leaflet:
www.iadvl.org/patient-information-leaflet

- What Is Herpes zoster (shingles)?
- How can one get Herpes zoster?
- What can aggravate the development of shingles?
- How does shingle appear?
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- What should one do if he/she develops shingles?
- Are there tests to confirm the diagnosis of shingles?
- How can zoster be treated?
- How long does zoster/shingles last?
- Can Herpes zoster be cured? Can it recur?
- What can I do to prevent zoster?

1. What Is Herpes zoster (shingles)?

- Herpes zoster is a skin rash which occurs when a virus (varicella-zoster virus) in the nerve cells becomes active again later in life.
- The varicella-zoster virus, is the same virus that causes chickenpox. Once you have had chickenpox, varicella-zoster virus remains in your body's nerve tissues and never really goes away. It can be reactivated later in life causing Herpes zoster.

2. How can one get Herpes zoster?

- It is not sure how or why the varicella-zoster virus reactivates, but it is believed that your immune system's response to the virus weakens over the years after childhood chickenpox.
- When the virus reactivates, it travels through nerves, often causing a burning or tingling sensation in the affected areas. Two or three days later, when the virus reaches the skin, blisters appear, these are grouped and usually occur along the affected nerve on one side of the body.

3. What can aggravate the development of shingles?

- If you have had chickenpox, you are at risk of developing shingles. However, the virus doesn't reactivate in everyone who has had chickenpox. Shingles most often appears in people older than 50 years and in people with weakened immune systems such as patients having treatment for cancer, HIV patients, etc.
- Your chances of getting shingles increases as you get older, although the disease can occur at any age. When shingles appears in children, which is uncommon, it usually is very mild.

4(a). How does shingle appear?

- Shingles generally begins with a burning sensation, a mild itching or tingling or a shooting pain usually located to one side of the chest, abdomen or face or on a portion of an arm or leg. The skin may be extremely sensitive, so that you may not be able to stand clothing touching or rubbing the area.

- After about five days, the skin becomes red and mildly swollen, and a rash appears. Blisters may cluster in patches or form a continuous line that roughly follows the path of the infected nerve. The blisters may be painful or itchy, and may continue to appear over two to seven days and eventually break, form crusts and then heal.
- Shingles also can cause fatigue, a low-grade fever and mild muscle aches.



4(b). What are the complications of zoster?

- Post-herpetic neuralgia - About 10% of adults who get shingles experience long-term pain in the area of skin where blisters occurred, even after the rash has healed completely. This condition may last for months or, very rarely, years. Severe pain is most common in older patients and often is accompanied by extreme sensitivity to heat and cold in the affected area of skin.
- Herpes zoster ophthalmicus- This occurs when shingles involves the eye. Herpes zoster ophthalmicus can affect your vision, even causing blindness, and can be very painful.
- Otic zoster- (Ramsay Hunt syndrome) can cause hearing loss.
- Bell's palsy- Paralysis of facial nerve leading to facial deformity.



5. What should one do if he/she develops shingles?

- Consult your doctor immediately if you are experiencing symptoms of shingles, early treatment may help deter long-term complications.

6. Are there tests to confirm the diagnosis of shingles?

- Shingles can be difficult to diagnose before visible signs of the disease appear. Once a rash and blisters appear, your doctor probably will diagnose shingles based on your symptoms and the appearance of your skin.
- No laboratory tests are usually needed for diagnosis. Rarely, when the diagnosis is less certain, the doctor may scrape tissue, collect cells from the affected skin and examine them under a microscope for cellular changes consistent with a Herpes zoster infection.

7. How can zoster be treated?

- If your condition is diagnosed within 72 hours after the rash appears, your doctor may prescribe antiviral medication. Some antiviral medications used to treat shingles include acyclovir, famciclovir or valacyclovir. Antiviral medications help to reduce the risk of developing chronic pain from shingles.