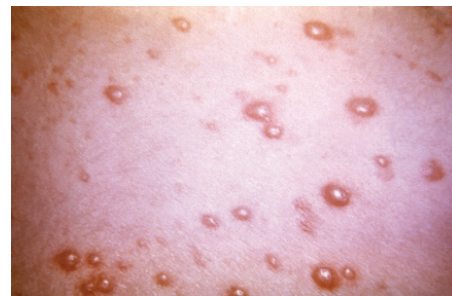


# Shingles

The virus that causes chickenpox also can bring about shingles BY STACEY MILLER



About 90 percent of people over the age of 10 have had chickenpox. Once infected with the varicella-zoster virus — the herpes virus that causes chickenpox — an individual gets a rash of hundreds of small, itchy bumps or blisters over his or her body. Generally, the rash is not serious, and the person may experience other symptoms like a mild fever and a sore throat.

Although the rash clears up on its own within 1-3 weeks, the virus that caused chickenpox never leaves the body. It lies inactive in nerve roots near the spinal cord. In about 10-20 percent of people, the virus can become active again and cause shingles.

Like chickenpox, shingles shows up in the form of blisters on the body. Unlike chickenpox, however, shingles is very painful, and the blisters often form in bands on the skin.

Because the virus lives near the spinal cord, the bands usually start in the middle of the back and wrap around one side of the body to the chest and breastbone. Other parts of the body also may be affected, including the neck, face or scalp.

Shingles is not a life-threatening condition. Most people with shingles experience:

- 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; and
- upset stomach and abdominal pain.

In rare cases, shingles can lead to pneumonia, hearing loss, blindness, encephalitis (which is severe swelling of the brain) and, in few cases, death.

After the rash clears, about one in five patients develops postherpetic neuralgia (PHN), a weakening, unbearable pain caused from nerve damage that can be felt in the same location as the rash or in areas beyond the rash.

## Sources of Relief

Generally, shingles heals on its own within 2-3 weeks, but treatment is available for pain, to speed healing and reduce risks of problems.

The purpose of this patient education handout is to further explain or remind you about a medical condition. This handout is a general guide only. If you have specific questions, be sure to discuss them with your healthcare provider. This handout may be reproduced for distribution to patients.

Physicians usually suggest an over-the-counter pain reliever or anti-inflammatory drug, such as ibuprofen. Corticosteroids (prednisone) are occasionally used to reduce inflammation.

In severe cases, physicians prescribe high doses of an antiviral drug to reduce the length and severity of symptoms. Common antiviral medications, like acyclovir (Zovirax), valacyclovir (Valtrex) or famciclovir (Famvir), are helpful. Physicians also may prescribe opioids for patients in severe pain. Anti-itch cream with at least 1 percent hydrocortisone can help. Over-the-counter antihistamines like diphenhydramine (Benadryl) also help relieve itching.

People with shingles should wash the blisters twice a day with regular soap and water. Bandages should not be applied to the blisters. Cool, wet cloths or pads placed on the blisters help the pain and itch. Taking a bath in cool water that has been sprinkled with uncooked oatmeal or baking soda also soothes the skin.

## Who Gets Shingles?

Anyone who has had chickenpox is at risk for developing shingles. However, the virus is more likely to become active in older adults and people with weak immune systems.

More than half the shingles cases occur in adults over age 60. In addition, people with weakened immune systems from HIV/AIDS; those undergoing medical treatments, such as steroids, radiation and chemotherapy; or those who have a history of bone or lymphatic cancer are more likely to develop shingles.

A person with shingles can pass the virus that causes it to anyone who hasn't had chickenpox. This occurs through direct contact with the open sores of the rash. Once infected, the person will develop chickenpox, not shingles. During the viral infection, a person with shingles should stay away from anyone who has not had chickenpox, anyone with a weak immune system, babies and pregnant women.

## Virus Vaccines

A vaccine for shingles is available for people over age 60. The varicella-zoster vaccine (Zostavax) can prevent shingles in adults age 60 and older who've had chickenpox. The vaccine doesn't guarantee the person won't get shingles. The live vaccine, however, will reduce the severity of the disease. Doctors recommend the vaccine for all adults age 60 and older, whether or not they have had shingles before.

Not all insurance plans cover the shingles vaccine. Medicare Part D insurance plans do, for example, but Medicare Part B plans don't. The amount of money the patient has to pay for the shot varies. People who have private insurance should ask their insurance companies whether they cover the shot. ■

Stacey Miller is associate editor at *ADVANCE*.