Herpes Zoster/Shingles

Caught early in the outbreak various kinds of procedures may reduce the course of the outbreak and ease the pain of Shingles.

Shingles, also known as herpes zoster, is an uncomfortable and often painful rash. It usually appears in a well-defined area on the abdomen or buttocks, although it may also occur on the face or arms. Because it commonly extends around the middle of the body, herpes zoster gets its name from the Greek word zoster meaning “girdle.” The name shingles comes from the Latin word cingulum, a translation of zoster, which also means “girdle.”

What causes shingles?
Shingles is caused by the varicella-zoster virus, the same virus that causes chickenpox. Shingles is one of a variety of skin infections caused by viruses in the herpes family.

What is the relationship between chickenpox and shingles?
When children (or adults) catch chickenpox, they contract the varicella-zoster virus. After the symptoms disappear, the virus “hibernates” in certain nerve cells within the body. During this period of hibernation, the virus causes no symptoms. For many people, this marks the end of chickenpox and problems caused by primary infection with the varicella-zoster virus. Unfortunately, the virus reactivates in some people causing shingles, a skin outbreak that is different from chickenpox. Why some people get shingles and others do not is not fully understood.

How common is shingles?
There are approximately 500,000 cases of shingles each year in the United States. Shingles is most common in people over 50 years of age; however, anyone, even children can get shingles.

What are the symptoms of shingles?
The first noticeable symptom of shingles is a burning pain or tingling in one area of the body. This is a warning sign called a prodrome. Within 1 to 3 days, a rash appears, usually on just one side of the body. Within 2 to 4 days, the rash turns into blisters that are tender to the touch. The blisters may last as long as 2 to 3 weeks. When they disappear, the pain goes away unless a complication called postherpetic neuralgia (described below) develops. Mild, flu-like symptoms, such as fever and headache, may also occur.

Unfortunately, the pain associated with shingles can be quite severe. It has been described as sharp pain, like a stabbing or burning feeling. If the pain affects your daily activities, your doctor or other healthcare provider may need to prescribe pain medication.

How serious is shingles?
In patients with normal immune systems, shingles rarely leads to hospitalization, usually clears up in a few weeks. However, there are several complications that you should know about. The first is called postherpetic neuralgia, or PHN.
People with PHN have pain that lasts for weeks, months, or even years after the skin outbreak has healed. Using medicine in the early stages of shingles may help reduce the duration of PHN. Another complication is that blisters can become infected by bacteria. You should suspect this has happened if the pain and redness suddenly become worse or go away and then return. Antibiotics may be necessary to treat these bacterial infections. Shingles carries a risk of scarring the skin if the blisters become infected with bacteria.

Shingles can also get into the eyes and cause permanent damage. If you have any blisters on your face, nose eyes, or ears, be sure to tell your doctor or other healthcare provider immediately.

**Is shingles contagious-can I give it to someone else?**
When your blisters break and ooze, it is possible for you to spread the virus to people who have never had chickenpox or those whose immune systems are not normal.

**How is shingles treated?**
Anti-itch medications, numbing patches, anti-nerve pain pills and pain relievers can help you get through much of the discomfort of shingles. Only one class of medicine is known to actually treat the diseases itself. These agents are known as antivirals. Along with anti-viral medications, nerve blocks with steroids have been shown to shorten the length of the outbreak and in many cases help reduce the pain (if treated in the early stages). The type of nerve block injection depends on the location of the outbreak.

Both Dr. Bruning and Dr. Eubanks have successfully treated several patients with shingles and have helped decrease the amount of pain as well as the length of the outbreak.