

## INFORMATION PAPER

DHA-IHB  
1 October 2015

SUBJECT: Herpes Zoster (Shingles)

1. Purpose. To describe Herpes Zoster (Shingles) disease and vaccine to prevent it.

2. Facts.

a. Microbiology. Shingles is caused by the varicella zoster virus (VZV); this is the same virus that causes chickenpox. The primary infection typically occurs during childhood and is a member of the herpes virus group and like other herpes viruses can persist in the body after primary infection. After initial infection, the virus remains hidden (dormant) in the nerve endings of the body until it reactivates, producing shingles.

b. Disease. Shingles is a painful rash that develops on one side of the face or body. The rash forms blisters that usually scab over in 7-10 days and clears up within 2-4 weeks. Prior to the outbreak, people often experience pain, itching, or tingling in the area where the rash will develop. This may occur anywhere from 1-5 days before a usually very painful rash appears. The rash occurs in a single stripe located either on the right or left side of the body. There have been cases where the outbreak can appear on one side of the face.

c. Epidemiology. Shingles cannot be passed from person to person, but the virus that causes shingles, can be spread from a person with active shingles to another person who has never had chickenpox. The virus is spread through direct contact with fluid from the rash blisters caused by shingles and a person with shingles can spread the virus when the rash is in the blister stage. After the rash has developed a crust like appearance, the person is no longer contagious.

(1) Avoid scratching or touching the rash, keep it covered and to prevent the spread of the virus, wash your hands often.

d. Vaccine. The CDC recommends that people aged 60 years and older get vaccinated, to help prevent shingles and to shorten the long painful rash that may occur following infection.

(1) There are medications that can fight the virus and the inflammation that can occur.

e. Caution. In people with weakened immune systems, the rash may be more common and look similar to a chickenpox rash. Shingles can affect the eye and cause loss of vision. Other symptoms of shingles can include: fever, chills, headache, or an upset stomach. It has been noted that pain lasting several months at the site of the rash occurs in 10-20% of some individuals.

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f. Adverse Reactions/Events. The most common side effects of the immunization reported includes: redness, pain, and swelling at the injection site, and headache. Contact your healthcare provider as soon as possible if you think you may have shingles to discuss treatment options.

### 3. References.

a. CDC. Prevention of herpes zoster: recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR Recomm Rep. 2008;57(05):1-30.

b. Thomas SL, Hall AJ. What does epidemiology tell us about risk factors for herpes zoster? Lancet Infect Dis. 2004;4(1):26-33.

c. Tseng HF, Smith N, Harpaz R, Bialek SR, Sy LS, Jacobsen SJ. Herpes zoster vaccine in older adults and the risk of subsequent herpes zoster disease. JAMA. 2011 Jan 12; 305(2):160-6.

d. Mahamud A, Marin M, Nickell SP, Shoemaker T, Zhang JX, Bialek SR. Herpes zoster-related deaths in the United States: validity of death certificates and mortality rates, 1979-2007. Clin Infect Dis. 2012 Oct;55(7):960-6.

e. Leung J, Harpaz R, Molinari NA, Jumaan A, Zhou F. Herpes zoster incidence among insured persons in the United States, 1993-2006: evaluation of impact of varicella vaccination. Clinical Infectious Diseases. 2011;52(3):332-340.

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