

Shingles (Herpes-Zoster)

Description:

Shingles (or herpes zoster) is a condition caused by the chickenpox (varicella-zoster) virus.

Shingles can only occur in people who have previously had chickenpox.

When a person recovers from chickenpox, the virus does not completely disappear from the body but stays dormant in the nerves of the spine. However, as a person gets older, it is possible for the virus to reappear in the form of shingles.

Shingles is uncommon before the age of 12 years with most cases occurring in people over the age of 40 years. Most people who have shingles have only one bout of the disease in their lifetime. However, individuals with weakened immune systems such as people with AIDS or cancer may suffer repeated infections.

Symptoms:

Early signs of shingles include a burning sensation or stabbing pain and tingling or itching on the skin. After a few days, a rash or blisters appear usually on one side of the body or face. When the rash is at its peak, symptoms can range from mild itching to extreme and debilitating pain.

Transmission

Direct contact with the fluid in the blisters of the rash may cause chickenpox (but not shingles) in people who have not previously had chickenpox. This is because both diseases are caused by the same virus. In addition to direct contact, shingles can also be spread via the air through coughing and sneezing if the blisters are present in the mouth of the infected person.

The rash or blisters usually last from one to 14 days but can be longer.

Treatment:

Shingles can be treated with antiviral drugs (eg. acyclovir) but to be effective, treatment must be started within 72 hours of the rash appearing. Most treatment is aimed at reducing the initial pain and rash. Other drugs that may be used to help ease symptoms include pain killers and topical ointments.

Shingles to the upper half of the face may cause serious damage to the eye, and medical treatment should be sought immediately.

It is important that the affected skin site be kept clean to avoid secondary bacterial infections. Avoid pricking or scratching the blisters.

Prevention:

A safe and effective chickenpox (varicella) vaccine is now available in Australia.

Evidence suggests a reduced incidence of shingles among healthy recipients of the chickenpox vaccine, although currently there is insufficient information to assess long term effects of the vaccine.

Vaccination with the chickenpox vaccine is recommended for the following groups of people who have not had chicken pox (non-immune):

- Non-immune people in high risk occupations such as health care workers, teachers, and workers in child-care services
- Non-immune women prior to pregnancy
- Non-immune parents of young children
- Non-immune household contacts, both adults and children, of people with weakened immune systems.

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Control

People with shingles and who have blisters should not have contact with people who have not had chickenpox or who are unsure if they have had chickenpox.

Help and Assistance

For further information, please contact your local doctor, community health centre or nearest public health unit.

Other Resources

[Immunise Australia website](#)

Related Content

[Chickenpox fact sheet](#)

Footnotes

Heymann, D., ed. 2004. *Control of Communicable Diseases Manual*, 18th edition. Washington, DC: American Public Health Association. National Health and Medical Research Council, 2003. *The Australian Immunisation Handbook* (8th Ed.) Canberra: National Capital Printing.