Shingles (Herpes Zoster)

Brown Health Services Patient Education Series

What is shingles?

Shingles, also known as herpes zoster, is a painful rash caused by the varicella zoster virus. This is the same virus that causes chickenpox, also known as varicella. Shingles is a reactivation of the virus, so you can get it if you had the chickenpox, or received the chickenpox vaccine, as a child. The classic shingles rash consists of painful, blister-like lesions appearing in a band or stripe pattern across one side of the body. In fact, the name “shingles” comes from the Latin word for belt or girdle.

How often does it occur?

After you recover from chickenpox or receive the chickenpox vaccine, the varicella zoster virus remains inactive and dormant in the body. The virus is usually dormant in the roots of the nerve cells. Shingles is the result of the varicella zoster virus reactivating years later.

It is unclear what causes the reactivation of the virus, though a weakened immune system is a common culprit. Infection, injury, illness, or physical or emotional stress can challenge the immune system, which in turn can reactivate the virus. It is also seen in individuals who already have weakened immune systems due to preexisting factors including chemotherapy, surgery, or immunosuppressive medications. Shingles can occur in anyone over 3 years of age, but the risk increases significantly with age, especially for those over 50.

What are the symptoms?

Before a rash presents, many people first experience:

- burning, sharp pain, tingling, or numbness sensation to one side of the body or face
  - back and/or abdomen are most common
- severe itching or aching rather than pain
- fatigue, fever, chills, headache, and upset stomach

After a few days of the burning, pain, and/or tingling, a rash will likely begin to develop.

A typical progression of the rash:

- starts out as groups of red bumps that turn into small, clear, fluid-filled blisters on reddened skin
- blisters can look similar to chickenpox
- over the next several days, the blisters tend to drain and (within 7-10 days) then crust over before eventually beginning to disappear
- lesions should completely resolve between 2 to 4 weeks
- scarring or discoloration where the rash was may persist for several months before clearing

The degree of pain and discomfort caused by shingles is variable and subjective. It can range from a slight burn, sting, or itch to extreme pain.
Unfortunately, sometimes the burning, tingling, and/or sharp pain can persist for several months after the rash has resolved. This condition is known as post-herpetic neuralgia. Although uncommon, it is most likely to manifest in individuals over 50 years old.

**What is the treatment?**

Although there is no cure or treatment for shingles, there are interventions to help make the virus a bit more manageable:

**Antiviral medications:**
- prescribed by a medical provider
- can be prescribed only if shingles is identified in the first 72 hours for an otherwise healthy individual
- help to shorten the course of painful symptoms
- minimize blister formation
- quicken the healing of blisters

**Pain medication:**
- Acetaminophen (Tylenol) and/or Ibuprofen (Advil)  
  ○ Both manage mild to moderate pain from shingles
- If severe burning and sharp pain, stronger pain medication may be warranted.
- Contact your medical provider if over the counter medication is not helping.

To minimize discomfort:
- Apply cool compresses to the rash.
- Wear loose clothing to avoid further irritation from contact to the rash.
- Avoid itching or touching with your hands to prevent a secondary skin infection.

**Is shingles contagious?**

Yes, in certain circumstances. Individuals with shingles can pass the varicella zoster virus to people who have never had chickenpox OR who have never had the chickenpox vaccine. However, the virus can only be spread through direct contact with the fluid of the blisters of someone with shingles. Shingles is not contagious before the blisters appear and is no longer contagious once they are crusted over. While the fluid-filled blisters are present, it is most important to avoid contact with infants, children, pregnant women, and other immunocompromised individuals.

**Tips to decrease spread:**
- keep the rash covered
- avoid touching the rash
- wash hands frequently

**When do I need to be seen at Health Services?**

Make an appointment at Health Services at the first sign of symptoms for the initial diagnosis and treatment. After your initial visit, you should contact Health Services if the following symptoms occur.
- Your symptoms worsen or you develop increasing pain or fever.
- You develop signs of a bacterial infection within your rash (increasing pain, swelling, redness or milky, yellow drainage).
- The blisters are close to the eyes or ears.
- You experience vision or hearing changes.