



## Infection Prevention & Control

### Fact Sheet

# SHINGLES

*Herpes Zoster*

### What is Shingles?

Shingles is the reactivation of the varicella zoster virus. This same virus causes the childhood illness chickenpox. You can only get shingles if you had chickenpox in the past or if you have had the chickenpox vaccine ("shot").



After you have chickenpox (usually as a child), the virus that causes it stays in your body in certain nerve cells. Most of the time your immune system keeps the chickenpox virus in these cells. As you get older, or if your immune system gets weak, the chickenpox virus may escape from the nerve cells and cause shingles.

Most people who get shingles are more than 50 years old or have a weak immune system.

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### What are the signs and symptoms of Shingles?

Shingles causes a painful, blistering rash. Sometimes the pain starts 2 to 3 days before the rash appears.

The rash begins with reddish bumps. In a few days, these bumps turn into blisters. You might feel a stinging or burning pain. The rash may wrap around your back and chest, or it may be on one side of your face.

The blisters usually crust over and fall off after 7 to 10 days. You may see changes in the color of your skin when the scabs fall off.

Even though the rash gets better or goes away in a few weeks, the pain may last longer. In most people, the pain goes away in 1 to 3 months.

Shingles can also affect your eyes, causing swollen eyelids, redness and pain. People who have shingles of the eye should see an eye doctor right away.

### Can I Leave My Room?

Attending activities with other patients/residents is usually possible if the lesions are kept covered. Once the lesions crust over they are no longer infectious. Staff should wear gloves and a gown when applying and removing dressings, and when giving personal care where there is a possibility they will come in contact with vesicular fluid.

### The Immune Compromised Patient/Resident

The immune compromised patient/resident may have more severe shingles where the lesions are generalized (disseminated *herpes zoster*). Participation in activities may alter and measures to control transmission will be different.

**Can I Infect Other People?**

Direct and indirect contact with the fluid in the blisters can cause chickenpox in individuals who have never had it or have not been vaccinated. Shingles does not cause shingles in another person. A person gets shingles from their own chickenpox virus. Your roommate and staff that care for you should have had chicken pox or been vaccinated.

**Will I be treated?**

Antiviral medications are available and should be started 24 to 72 hours after the onset of the lesions. There are measures to control the pain such as medications and creams.

**What is Postherpetic Neuralgia (PHN)?**

"Postherpetic neuralgia" is the name used when the pain of shingles lasts for a long time after the rash is gone. About 1 in 5 people with shingles will get postherpetic neuralgia.

Like shingles, postherpetic neuralgia causes a stinging or burning pain. Your skin might become very sensitive to temperature changes or a light touch, such as from a bed sheet or moving air.

Most people with postherpetic neuralgia get better with time. Almost all of them are free of pain within one year. A few people have chronic pain (pain that doesn't go away).

**How is postherpetic neuralgia treated?**

Postherpetic neuralgia is often treated with over-the-counter pain medicines and capsaicin cream (two brand names: Capsin™, Zostrix™). If these medicines don't help enough, your doctor might try some other treatments, such as a patch that contains lidocaine (brand name: Lidoderm™).

Some medicines that are used to treat depression and seizures can also help the nerve pain of postherpetic neuralgia. These medicines don't work very fast, though. It might be several weeks before they help your pain.

Early treatment may decrease the severity of postherpetic neuralgia.

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