

FAST FACTS: Shingles/Postherpetic Neuralgia

Shingles, also known as herpes zoster, affects approximately 1 in 3 adults in the US with about half of all cases affecting adults over the age of 60. The same virus that causes chickenpox, varicella zoster, causes shingles. Exposure to chickenpox does not provide immunity to shingles. This painful virus presents on one side of the face or body causing rash-like lesions which raise, blister, then scab over and clear in a process that lasts anywhere from two to four weeks. Postherpetic neuralgia (pain along nerve endings), is a complication of shingles. The risk for postherpetic neuralgia increases with age and causes moderate to severe pain that can last months or even years. The following FAST FACT provides a brief overview of the care and treatment of both shingles and postherpetic neuralgia.

- Recombinant Zoster Vaccine (Shingrix) is the ONLY prevention and is recommended for adults 50 and older. Shingrix should be given in two doses, separated by two to six months. A sore arm at the injection site is very common. Tiredness, muscle pain, headache, shivering, fever, stomach pain, and nausea are common after recombinant shingles vaccine. Education on side effects should be done prior to and after vaccine. Use of over-the-counter fever-reducing medications can ease symptoms.
- Lesions are infectious until crusted over and dry. Individuals most at risk are pregnant women, those who are immunocompromised, advancing age and who have never had chickenpox or the varicella vaccine.
- Antiviral medications such as acyclovir, valacyclovir, and famciclovir should be given in the first few days of infection onset and are used to shorten time of infection and intensity.
- Most commonly presents with pain and/or rash across the body trunk (along thoracic dermatomes) but does not cross the midline of the body.
- Other than rash, symptoms may include pain, itching, tingling, headache, light sensitivity, and fatigue.
- Complications such as scarring, muscle weakness, and skin infection may occur. Additional risk of hearing or vision loss may occur if rash is across the face or head.
- Analgesia for pain should be part of treatment regimen such as:
 - Lidocaine skin patches
 - Tricyclic Antidepressants
 - Anticonvulsants
 - Opioids

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References

Centers for Disease Control and Prevention (2022). [Vaccine Information Statement | Shingles Recombinant | VIS | CDC](#)

U.S. Department of Health and Human Services Centers for Disease Control and Prevention. (n.d.). Recombinant zoster (shingles) vaccine: What you need to know. <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/shingles-recombinant.pdf>