

Psst!

Plan to Stay in Shape Today

SHINGLES

SHINGLES

Most people remember getting varicella when they were kids. After you get over chickenpox though, the virus stays in your body in a dormant state. It can resurface years later as rash called shingles or herpes zoster. Shingles can be extremely painful. Its common name comes from the Latin cingulus, meaning "belt," and one of its nicknames tells you a lot: "a belt of fire".

Why is shingles so different from chickenpox? Is there a way to prevent shingles? What side effects and complications can occur with it? This guide is designed to answer those questions, because not only can you often prevent shingles, but being informed about the disease can make it easier to understand and live with.

DID YOU KNOW?

Between 10% and 30% of people who get chickenpox get shingles.



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WHAT IS
SHINGLES?

DESCRIPTION

Shingles, also known as herpes zoster, is caused by a virus called varicella zoster. This same virus, as you can tell by the name, also causes varicella, i.e., chickenpox.

After you recover from chickenpox, that varicella zoster virus doesn't go away. It's still there, inactive, hidden in the nerve cells near your spine. There it may remain dormant, for a long time, even decades. But sometimes, when your **immune system** is weakened or through normal aging, the virus wakes up.

Then you develop shingles, with its characteristic rash and blisters. It hurts, producing what's often described as a burning sensation. We'll discuss the main shingles risk factors on page 15.

WHAT IS THE IMMUNE SYSTEM?

The immune system is made up of the cells that protect your body from viruses, bacteria, parasites, and toxins. The job of these cells is to defend the body and destroy intruders.





HERPES? BUT THAT'S WHAT CAUSES COLD SORES, ISN'T IT?

The viruses that cause cold sores and shingles are both members of the Herpes family, but it's a big family. Herpes labialis, commonly known as cold sores, is caused by the herpes simplex virus.

SIGNS AND SYMPTOMS

Shingles may first appear as a red band on the skin, which then turn into a spotty rash. It tends to occur on a restricted patch of skin and on one side of the body only.

The rash is made up of many little red blisters, or pustules, all bunched together. Each little bump will be about one to three millimetres across. Inside it is a fluid that starts out clear then turns opaque. The fluid is also quite **contagious**. After a while the sores crust over and scabs form.



DID YOU KNOW?

The rash isn't necessarily the first symptom of shingles you will notice.

The First Symptoms

Some symptoms often appear before you see anything on your skin. Generally this happens anywhere between one and ten days before the rash. You might for instance feel some of the following in the area where the rash is about to appear:

- > Pain
- > Itching
- > Tingling
- > Numbness/pins and needles

Some people describe feeling something like electric shocks, stabbing, or burning at the spot.

Other early symptoms:

- > General discomfort
- > Headache
- > Sensitivity to light

A Most Particular Rash

As we've seen, the varicella zoster virus lies dormant in your nerve cells after you've had chickenpox. When and if it wakes up, it starts reproducing and spreads along the nerve it was hiding in.

The resulting rash appears on the skin supplied by that nerve, which is called a *dermatome*. The result is that shingles can appear practically anywhere there's a nerve, even on the face.

What makes shingles so distinctive is the way and form the rash develops. It's almost always unilateral, meaning that it sticks to just one side of the body or face. It might for instance appear on the right side of your stomach and not on the left.



EXCEPTIONS TO THE RULE

Although most cases of shingles fit the description we've just seen, there are exceptions. The shingles rash sometimes covers the entire body. This mainly occurs in people whose immune system is badly weakened.

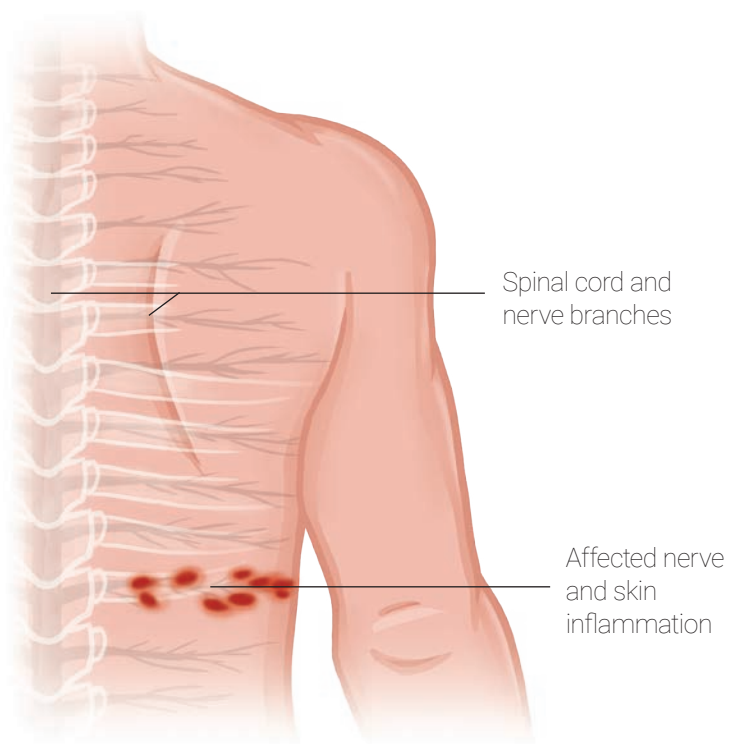
WARNING

If you have a painful rash on just one side of your body, you should suspect shingles. See your healthcare professional as soon as possible to find out what to do.

If the signs and symptoms show up near your eyes, that's an even bigger red flag—shingles around your eyes can lead to vision loss.



Skin Inflammation Along a Nerve



Chickenpox and Shingles: One Virus, Two Faces

Main differences and similarities between the two diseases

	CHICKENPOX	SHINGLES
Signs and symptoms	<ul style="list-style-type: none">• Rash• General discomfort• Itching• Loss of appetite• Headache• Fever	<ul style="list-style-type: none">• Rash• Pain• Fatigue• Fever• Burning, tingling, or numbness of affected area
Description of rash	<ul style="list-style-type: none">• All over	<ul style="list-style-type: none">• Limited to one spot, often on one side of the body only• As a cluster
Age group mainly affected	<ul style="list-style-type: none">• Age 1–14	<ul style="list-style-type: none">• 50 and over
		

TRANSMISSION AND TRANSMISSION RISK

As we discussed earlier on, the varicella zoster virus causes both chickenpox (varicella) and shingles (herpes zoster). That means that you can't get shingles if you've never had chickenpox. In other words, the first time a person is infected with the virus, he or she gets **chickenpox**.

MYTH

If you have shingles, you have to stay home so everybody else doesn't get it from you.

REALITY

Shingles isn't all that contagious, although there are some precautions you need to take.



Warning: The fluid inside the blisters has active virus in it, which can infect through direct contact and cause chickenpox.

Once the blisters break, they dry out and develop yellowish crusts. When all the blisters are crusted over, the disease is no longer contagious.

So if you do get shingles, stay away from the following people until the contagious phase is over:

- > Newborns
- > People who've never had chickenpox
- > Pregnant women
- > People with weakened immune systems

People in these groups have a higher risk of getting chickenpox and of developing complications if they do. They should see a doctor if they come in contact with someone who has shingles or chickenpox.

MYTH

I have shingles—I better not cough, because I could spread the varicella zoster virus!

REALITY

There's hardly any chance of getting a varicella zoster virus infection from the saliva or nasal secretions of someone with shingles.





KEEPING IT TO YOURSELF

There are certain things you can do to prevent the virus from spreading when you have active shingles blisters.

- > Keep your blisters covered up with a dressing.
- > Wash the rash and keep the affected area clean, which will also reduce the risk of secondary bacterial infection.
- > Wash your hands frequently.
- > Don't touch your blisters.

SHINGLES RISK FACTORS

The main risk factors for shingles all relate to immune system health. A weakened immune system can't destroy intruders or, in this case, keep the latent varicella zoster virus in the nerve cells under control. The virus can break free, spread, and cause shingles.

The following groups are at a higher risk of developing shingles:

- > People over 50 (66% of shingles cases are in people over 50).
- > People being treated for cancer (radiation therapy or chemotherapy), since cancer and cancer treatment weaken the immune system.
- > People with a disease that weakens the immune system, such as HIV.
- > People undergoing long-term corticosteroid therapy.
- > People taking immunosuppressant drugs (which reduce the effectiveness of the immune system).

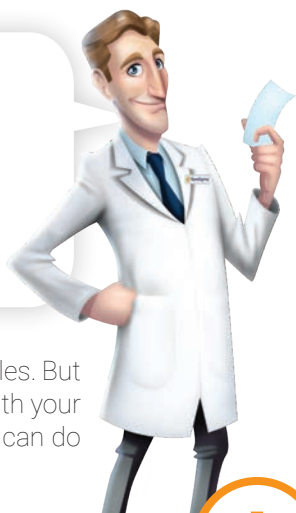
Immunosuppressants? Corticosteroids?

Wondering if you're taking something like that? Ask your pharmacist for the answer to these and other questions!

DID YOU KNOW?

Shingles is a debilitating condition, mainly affecting people over 50. But there are exceptions to every rule, and sometimes younger folks get it too.

Having risk factors doesn't mean you'll get shingles. But if you're worried, take a moment to talk it over with your healthcare professional and find out what you can do improve your odds.



MYTH

Shingles is like chickenpox, you can only get it once.



REALITY

However, the risk of a second episode of shingles is less likely. However, it is still important to get vaccinated even if you've already had shingles.



DID YOU KNOW?

Vaccination against chickenpox is on the routine immunization schedule in Quebec, New Brunswick, and most other Canadian provinces. The number of kids who get chickenpox has dropped dramatically since vaccination was introduced. Better yet, getting vaccinated against chickenpox reduces the risk of shingles later on.



COMPLICATIONS

The symptoms of shingles are awful enough, but its complications can be even more debilitating. The problem is that for some people the rash and blisters go away, but the pain doesn't. This condition is called **postherpetic neuralgia**.

In postherpetic neuralgia, the pain seems to come from where the original rash appeared. Often it's more intense and debilitating than it was during active shingles. For some the pain is constant, and for others intermittent.

Generally, the pain has the following characteristics:

- > It persists and recurs for more than 30 days after the sores have disappeared.
- > It's felt in the area where the rash was.
- > It's severe and debilitating.
- > It takes a long time to go away.
- > It resembles a burning sensation.

The severity and duration of postherpetic neuralgia may be much greater in elderly people. It may go on for months or even years and have devastating effects on quality of life.



Severe postherpetic neuralgia can cause sleep problems, weight loss, anxiety, and depression.

- > The older you are, the greater the risk of postherpetic neuralgia.
- > The risk of postherpetic neuralgia is even higher when shingles affects the eyes.

IMPORTANT NOTE!

The risk of postherpetic neuralgia is dramatically lower if you start antiviral treatment as soon as symptoms start. That's another good reason to see your doctor or your pharmacist right away if you suspect you might have shingles.



A vertical strip on the left side of the page shows a microscopic view of cells, likely from a tissue sample, with various cellular structures and nuclei visible.

HOW IS
SHINGLES
TREATED AND
PREVENTED?

TREATMENT

Shingles treatment works along a number of fronts. First you need to get the virus under control. You also minimize the itching and protect the affected area. Then you need to manage postherpetic neuralgia if and when it appears. This section looks at the options you have.

MYTH

The best thing to do if you think you have shingles is just to wait till it goes away.

REALITY

If you suspect shingles, consult a doctor or your pharmacist immediately! The treatments available for shingles are most effective when they're started as quickly as possible.



Getting the Virus Under Control

Our weapons for fighting shingles don't actually cure the disease. Their purpose is to control it as much as possible so that the damage caused by the virus is minimal.

The drugs used for shingles are **antivirals**. They keep the virus from reproducing in the nerve to reduce the risk of damage and complications.

Starting shingles medication as soon as possible does the following:

- > Helps the blisters heal faster
- > Limits the size of the rash
- > Reduces the intensity and duration of the pain
- > Reduces the risk of complications
- > Reduces the risk of postherpetic neuralgia

It's important to see a doctor or your pharmacist quickly for shingles because antiviral treatment should ideally be started within **48 to 72 hours** of the appearance of the rash. That's when the drugs work the best! All the same, if you miss that window, your doctor might still prescribe antivirals.

DID YOU KNOW?

It can take two to three weeks for the symptoms and sores of shingles to go away. You'll need to be patient.

Starting treatment 72 hours after the appearance of the rash can still reduce the risk of complications and long-term pain.

Rash Relief

Once again, the first thing to do if you suspect shingles is to see a doctor or your pharmacist. Remember that even if you take the prescribed antivirals, there is still a chance you might have the inconvenience of the sores and rash - and they can be very itchy.

Luckily there are things you can do for relief, along with some over-the-counter drugs. Here are a few options:

> Apply a damp compress

Wet a washcloth with cold or warm water and place on the affected area for five minutes or until the itching feels better. Repeat two or three times a day as needed.

> Take cool baths

Cool baths can relieve shingles pain. It can also help to add baking soda or colloidal oatmeal for the itching.

OATMEAL, YOU SAY?

That's right. Colloidal oatmeal has been found to reduce itching and possibly pain as well. You can get it in moisturizing creams or as a powder to add to bathwater.



> Take an antihistamine

Oral antihistamines are mainly used for allergies. Their purpose is to reduce itching, and they often work for shingles itching as well.



CAUTION!

Check with your health professional before you take antihistamines. They have side effects of their own and may interact with other medications.

Over-the-counter medications such as acetaminophen and ibuprofen can be effective for shingles pain and fever.

Since there is a break in the skin, it could be the perfect opportunity for bacteria to create an infection. The priority is to heal the blisters as soon as possible to avoid any skin infection as well as keep the shingles virus from spreading.

Here are a few tips to help the healing process:

- > Don't scratch the affected area.
- > Keep it clean and dry.
- > Wear loose-fitting clothes that won't rub and irritate the sores.

Remember not to break the blisters. Let them heal on their own. Otherwise you'll increase the chances of scarring.

Take time to talk these things over with your healthcare professional so you can make the best choices for your condition.

Treating Postherpetic Neuralgia

If you start experiencing pain after a shingles episode, be aware that there are **prescription drugs** that can reduce postherpetic pain. Since many medications are available for such conditions, your doctor will sit down with you to decide what's best for your situation. Talk to your healthcare professional for more information.

DID YOU KNOW?

So-called alternative treatments such as acupuncture, relaxation, and meditation can help with postherpetic pain. Studies have shown that non-drug-based approaches are often effective for this type of pain.



PREVENTION BY VACCINATION

At first, you might think there's no way of preventing shingles. Fortunately, there is a vaccine that can greatly reduce your risk of developing shingles. The shingles vaccine is recommended for people aged 50 and over, if there are no contraindications. A shingles vaccine may be recommended for people under 50 with certain conditions, such as a compromised immune system. Talk to your healthcare professional for more information.

MYTH

My immune system is just fine—I don't need to get vaccinated.



REALITY

A good immune system is no guarantee you won't get shingles. If you've ever had chickenpox, you're at risk.

Fascinating vaccination facts:

- > A person who's never had chickenpox can still get vaccinated.
- > It's suggested that even people who've had shingles before be immunized, to reduce the chance of another outbreak.

MYTH

I've been vaccinated, so I can't get shingles.



REALITY

Getting vaccinated for shingles greatly reduces the risk that you'll get it, but unfortunately it's not a sure thing.

So why get the shot? Mainly because it makes your chances of developing postherpetic neuralgia a lot lower too.



Some people, however, can't be vaccinated. Here are some of the reasons:

- > They're allergic to something in the vaccine.
- > They've had active shingles in the past 12 months.

Your healthcare professional will check if there are any reasons why you shouldn't be vaccinated.



CONCLUSION

Shingles is caused by the reactivation of the varicella zoster virus. When you get chickenpox, the virus remains latent in your body. The risk of developing shingles increases significantly as you get older. If you get shingles, it's important to see a doctor or your pharmacist as soon as possible, because shingles can be debilitating. Fortunately there's a vaccine to prevent it. Forewarned is forearmed where shingles is concerned. Don't hesitate to talk it over with your healthcare professional.



SHINGLES

SOURCES AND USEFUL LINKS

Familiprix

familiprix.com

Government of Canada

healthycanadians.gc.ca

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- > Signs and Symptoms
- > Transmission and Transmission Risk
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Only pharmacists are responsible for the professional activities of the pharmacy practice. They use various tools such as the PSST! (Plan to Stay in Shape Today) program.