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## Active Aging Center

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### Shingles — A 'Pain in the Rash'

A Primer on a Painful (but Preventable) Condition



About 1 million Americans a year are affected by shingles, a rash that can cause excruciating pain. (James A. Haley Veterans' Hospital)

By JOHN F. TONEY, M.D.  
May 18, 2007



"Worse than labor pains."

"Excruciating." "It changed my life." "Burning, stabbing, throbbing, shooting pain."

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#### EDITOR'S PICKS

Study: Tai Chi May Help Prevent Shingles

Gov't Panel Recommends Shingles Vaccine

Erasing an Incredibly Painful Disease

Reading the above complaints, one may find it hard to believe that all are attributable to a rash.

But if that rash is shingles, you could be in for a world of hurt.

Rashes are common problems for most persons during their lives, and many are brief and uncomplicated. Some, however, cause significant problems — and shingles is one of these problem rashes.

#### What Is Shingles?

Many people are not familiar with shingles, a disease that can occur at any age, but is common among older people.

Shingles, known in medical circles as Herpes Zoster, is a frequently painful disease that is marked by

a blistering rash.

The cause of shingles — the varicella-zoster virus — is the same virus that causes chickenpox.

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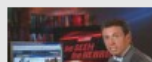
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Shingles can affect an individual at any time without warning. More than 90 percent of adults in the United States have had chickenpox — placing them at risk for shingles — with the occurrence and severity of shingles increasing with age.

### How Chickenpox Can Lead to Shingles

With the initial infection of chickenpox, some of the virus particles leave the skin blisters and move into the nervous system, traveling back down some of the nerve fibers that were involved with the chickenpox outbreak.

The virus then stays in these nerve fibers, where it is dormant, or "asleep." When the varicella-zoster virus reactivates (or "wakes up"), the virus moves back down these long nerve fibers to the skin, where the virus multiplies, causing the rash and the disease we know as shingles.

The shingles rash usually appears on one side of the face or body and lasts from two to four weeks. Its main symptom is pain, which can be very severe.

Other symptoms associated with shingles outbreaks can include fever, headache, chills and upset stomach.

Rarely, a shingles outbreak can lead to scarring, pain from mild stimuli — such as the touch of soft clothing or a light breeze — pneumonia, hearing problems, blindness, brain inflammation (encephalitis), or death.

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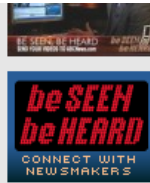
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For about one in five persons with shingles, severe pain can continue even after the rash clears. This condition is called postherpetic neuralgia (PHN). In some individuals, this pain may be debilitating and difficult to control, even with potent pain medications.

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#### Common Questions About Shingles

##### • How common is shingles?

It is estimated that 1 million cases of shingles are diagnosed in the United States each year, 40 percent to 50 percent of which occur in people age 60 and older. It is also more common in people whose immune systems are weakened because of a disease such as cancer, or because of drugs such as steroids or chemotherapy.

##### • Is shingles contagious?

You can't catch shingles from another person with shingles. However, a person who has never had chickenpox (or chickenpox vaccine) could get chickenpox from someone with shingles, though this is not very

common.

##### • Can shingles be treated?

Shingles can be treated with prescription oral antiviral medications and may require medications for pain management. Ideally, the treatment for shingles should begin within 72 hours of when symptoms begin. If the victim is also suffering from postherpetic neuralgia, treatment can be difficult, often requiring the help of a pain management specialist.

##### • Can shingles be prevented?

Yes. The U.S. Food and Drug Administration recently approved a vaccine for the prevention of shingles in individuals 60 and older. Those who wish to learn more about the shingles vaccine should talk to their health care provider to determine if the vaccine is right for them.

*Dr. John F. Toney is professor of medicine in the division of infectious disease and international medicine at the University of South Florida College of Medicine, and director of infectious diseases clinical research at the James A. Haley Veterans' Hospital in Tampa, Fla.*

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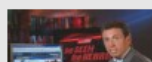
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