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## Shingles

### Overview

#### What is shingles?

Shingles is another name for a condition called "herpes zoster." It is an infection that results from the reactivation of the same virus that causes chickenpox (the varicella-zoster virus). Shingles causes a painful rash.

#### What is herpes zoster ophthalmicus (HZO)?

Herpes zoster ophthalmicus (HZO) is caused by the same virus that causes chickenpox and shingles. When the virus involves the skin around the eye and the eye itself, it is called HZO. It is not the same virus that causes herpes simplex.

#### Can I give shingles or HZO to others?

No one can catch shingles or HZO from you. However, they can catch chickenpox if they haven't already had chickenpox or had the chickenpox vaccine. The varicella-zoster virus (which is the virus that causes chickenpox, shingles and HZO) lives in the blisters from shingles and HZO. The virus can be spread until the blisters are completely healed. If you have blisters that have not crusted over yet, you should stay away from anyone who has never had chickenpox, babies younger than 12 months of age, pregnant women and very sick patients (such as patients who have cancer or AIDS). If you live with children who have not had chickenpox, you should tell your doctor. They may need to be vaccinated.

#### What is postherpetic neuralgia?

Postherpetic neuralgia is the name used when the pain of shingles lasts for a long time after the rash is gone. About 10% of people who have shingles will develop postherpetic neuralgia. It is caused by damaged nerve fibers that send exaggerated pain messages from your skin to your brain.

Most people who develop postherpetic neuralgia get better with time. Almost all of them are free of pain within 1 year. However, a few people have chronic pain (pain that doesn't go away).

## Symptoms

#### What are the symptoms of shingles?

Shingles usually causes a painful, blistering rash. Sometimes the pain starts a few days before the rash appears. You may also have a fever, chills, nausea, diarrhea and difficulty urinating.

The rash begins with reddish bumps. In a few days, these bumps turn into fluid-filled

blisters. You might feel a stinging or burning pain. The rash might also itch. Shingles occurs most often on the trunk of the body, such as a band of blisters around your back and chest.

The blisters usually crust over and fall off after about a week. You may see changes in the color of your skin when the scabs fall off. In more severe cases of shingles, these color changes are permanent.

Even though the rash from shingles gets better or goes away in a few weeks, the pain may last longer. This condition is known as postherpetic neuralgia. In most people, however, the pain of shingles goes away in 1 to 2 months.

### **What are the symptoms of HZO?**

HZO can cause a rash with small blisters to break out on the forehead and around the eye, typically on one side of your face. Sometimes you will have pain in the same area of your face a few days before the outbreak. Infection of the eye causes extreme pain, swelling of the eyelid, light sensitivity and redness.

In severe cases, the cornea can be damaged. This can affect your vision.

People who have herpes zoster ophthalmicus should see an eye doctor right away.

### **What are the symptoms of 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 bedsheet, your clothing or moving air.

## *Causes & Risk Factors*

### **Who gets shingles?**

After you have chickenpox (usually as a child), the virus that causes it stays inactive in your body inside certain nerve cells. Most of the time your immune system keeps the virus in these cells. As you get older, or if your immune system gets weak, the varicella-zoster virus may escape from the nerve cells and cause shingles. If you have had the chickenpox vaccine, you are less likely to get chickenpox and therefore less likely to later develop shingles.

Most people who get shingles are older than 50 years of age or have a weak immune system. For example, you might get shingles if you have cancer, take medicines that weaken your immune system, or have HIV (human immunodeficiency virus) or AIDS (acquired immunodeficiency syndrome).

### **Who gets HZO and why?**

It is not common in children, rather it occurs more often as people get older. Men and women are equally affected. People who develop HZO have typically had chickenpox or have been exposed to the chickenpox virus in the past.

## *Diagnosis & Tests*

### **How can my doctor tell if I have HZO?**

If you have HZO, you will probably have a rash that looks like chickenpox, usually on one side of your face or forehead. Besides examining you, your doctor will not need to do any

additional tests to see if you have HZO. Sometimes herpes simplex infections can resemble HZO. However, the patterns of the rashes are different and your doctor will be able to tell them apart.

### **How often is the eye involved?**

The eye itself is affected in 10% of patients. Your doctor will examine you to see if your eye is affected by HZO. If it is, you may need to see an ophthalmologist (a doctor who specializes in treating eyes) for further treatment.

## *Treatment*

### **How is shingles treated?**

Shingles is often treated with an antiviral medicine to reduce the severity and duration of your symptoms. Acyclovir, famciclovir or valacyclovir are commonly prescribed. Your doctor will decide whether one of these medicines is right for you. These medicines work better if you start taking them in the first 3 days after you get the rash.

Your doctor might also have you take a steroid medicine to reduce your pain and swelling. This medicine will also reduce your risk of developing postherpetic neuralgia.

### **What can I do about the pain?**

To help with the pain of shingles, your doctor might have you take an over-the-counter (OTC) pain medicine such as acetaminophen (one brand name: Tylenol) or ibuprofen (two brand names: Motrin, Advil).

Applying a medicated anti-itch lotion (two brand names: Benadryl, Caladryl) to the blisters might reduce the pain and itching. Placing cool compresses soaked in water mixed with white vinegar on the blisters and sores might also ease pain and itching.

If shingles causes severe pain, your doctor might prescribe a stronger pain medicine.

### **How is postherpetic neuralgia treated?**

Postherpetic neuralgia is often treated with OTC pain medicines and capsaicin cream (two brand names: Capzasin-P, Zostrix). If these medicines don't help enough, your doctor might try some other treatments, such as a stronger pain medicine or a patch that contains a numbing medicine called lidocaine.

Some medicines that are used to treat depression and seizures can also help relieve the nerve pain of postherpetic neuralgia. These medicines may take several weeks before they begin to ease your pain.

### **How is HZO treated?**

If you think you might have HZO, see your doctor right away. Early treatment with antiviral medicines (usually in pill form) can reduce pain and the duration of symptoms. Your doctor may also give you a corticosteroid (in eye drop form) to relieve inflammation.

Cool compresses can help ease the pain and rash. Pain medicine that is available over the counter, such as aspirin, ibuprofen (some brands: Motrin, Advil) or acetaminophen (one brand: Tylenol) may help.

### **How long will I have HZO?**

The pain from HZO, should get better as the rash goes away. With uncomplicated HZO, you

should recover in a few weeks, but it may take longer in older or sicker patients.

## Complications

### What are the complications of HZO?

HZO can cause scars that damage your vision. It can also lead to [glaucoma](#) later in life.

Glaucoma is an eye disease that can cause blindness

## Prevention

### Is there a vaccine for shingles?

The shingles vaccine is recommended for adults 60 years of age and older. The vaccine can prevent shingles, but cannot treat active shingles or postherpetic neuralgia.

Common side effects of the vaccine are headache and redness, swelling, itching and soreness at the injection site. People who have had shingles should get the vaccine to help stop the disease from reoccurring. The vaccine protects for at least 6 years, but may last a lot longer.

The shingles vaccine is **not** recommended for the following groups:

- People who have had an allergic reaction to gelatin or the antibiotic neomycin
- People who have an allergy to any component of the shingles vaccine
- People who have a weakened immune system due to conditions such as leukemia, human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS)
- People who are receiving treatment for cancer
- People who are being treated with drugs that suppress their immune system, including high-dose steroids
- Women who are pregnant or might become pregnant within 4 weeks of getting the vaccine

### Can I prevent HZO?

There is nothing you can do to prevent HZO.

## Questions to Ask Your Doctor

- I've had chickenpox. Am I at risk of developing shingles or HZO?
- Is the shingles vaccine right for me?
- What is the best treatment for my shingles?
- Will I have any eye damage from my HZO?
- The pain from shingles isn't going away. What can I do to make myself more comfortable?
- I'm on treatment for shingles/HZO. When should I call my doctor if things don't get better?
- I have shingles and my children haven't had the chickenpox vaccine. Should I get them vaccinated?
- Are there any risks associated with the shingles vaccine?
- Will my postherpetic neuralgia ever go away?
- Will the shingles vaccine prevent me from getting HZO?

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