

Helping Hand™

Shingles (Varicella Zoster)

Shingles is an infection caused by the same virus that causes chickenpox. After a person has had chickenpox, the virus stays dormant (sleeping) in the nerves of the body. Stress or a weakened immune system can cause this virus to come back as shingles in people who have already had chickenpox.

If you had chickenpox or the chicken pox vaccine, you are not at risk of catching shingles from someone else. If you never had chickenpox or the vaccine, you can catch chickenpox from someone who has shingles. Shingles is contagious until scabs cover the blisters.

Signs and symptoms

The signs and symptoms of shingles appear in a strip or band on one side of the body. The path follows the line of nerves to that area. Early signs can be numbness, tingling, or burning before the rash appears. Then, red bumps and blisters come out. They can be itchy and painful and ooze fluid. If the shingles rash is on the face, eyes can be sensitive to light. Blisters usually scab over by 10 days and completely heal within 2 to 3 weeks. Sometimes the person will only have flu-like symptoms without a fever.

Treatment

Most cases of shingles heal on their own without treatment. You can do some things to help relieve the itchiness and pain:

- Use moist compresses (like folded washcloths) with cool water or mix water with aluminum acetate (Domeboroò).
 Aluminum acetate will also help dry the blisters.
- Take baths in cool or lukewarm water every 3 to 4 hours for the first few days. Oatmeal (Aveenoò) baths can help to relieve itching. (Picture 1). After the bath, pat the body dry with a towel. Do not rub.
- Put calamine lotion on itchy areas. Sometimes lotions with camphor or menthol can help. Do not use these lotions on the face, especially near the eyes.



Picture 1 Oatmeal baths can ease pain and itching.

Ask your health provider about using an over-the-counter antihistamine for itching or taking acetaminophen (Tylenolò), ibuprofen (Advilò, Motrinò) or naproxen (Aleveò) for pain.

Treatment, continued

- Antiviral medicine like acyclovir (Zovirax^o), famciclovir (Famvir^o) or valacyclovir (Valtrex^o) may be prescribed by your health provider. It must be started within 72 hours to have any effect. This is especially important in severe cases or for people who are immunosuppressed.
- Keep fingernails clean and trimmed. Avoid scratching.

Preventing shingles

- Immunizations need to be up to date. Two doses of chickenpox vaccine (Varivax[®]) are recommended for all children. The first dose should be given between 12 to 15 months of age. The second dose should be given before the child enters kindergarten, between 4 and 6 years of age. Those who are 13 years or older and have not been immunized, may be given 2 doses at least 28 days apart. Most people who get the vaccine do not get chickenpox. If they do, it is a milder case.
- A shingles vaccine (Zostavax®) is available for people over the age of 60. It may help prevent shingles or lessen its harmful effects.

Pain after shingles

Although less common in children, sometimes the pain of shingles stays on after the sores have healed. If the pain continues after a few months, the condition is called post-herpetic neuralgia (PHN). The health provider can prescribe medicines for the pain.

When to call the doctor

Call the doctor if your child has:

- a shingles rash that spreads to the face, **especially near the eyes. Call immediately.**
- trouble looking at bright lights.
- fever higher than 102° F and lasts more than 3 days or is 104° F or more.
- an area of rash that leaks pus (thick, discolored fluid) or gets red, warm, swollen or sore.
- trouble breathing, a severe cough or is very ill.
- a severe headache or stiff neck.
- unusual drowsiness, confusion, trouble waking up or a hard time walking.

Return to school, daycare and activities

Report the infection to the school staff. Your child may be excluded from school and activities until the rash can be covered or until all the sores are scabbed over. The school staff will alert people at risk. This means anyone who is not immunized, is pregnant or is immunosuppressed. At a daycare center, newborns are also at risk if they come in contact with someone with shingles.