

Frequently Asked Questions

SHINGLES (Herpes Zoster)

What is shingles?

Shingles (also known as herpes zoster) is a localized infection caused by varicella zoster virus (VZV), the same virus that causes chickenpox. After a person recovers from chickenpox, the virus stays dormant (inactive) in the body. This virus can reactivate years later, causing shingles. It occurs only in people who have had chickenpox in the past and represents a reactivation of the inactive varicella virus. About one of every three people in the United States will develop shingles in their lifetime.

Who gets shingles?

If you've ever had chickenpox, you can get shingles. Even children can get shingles. Your risk of shingles increases as you get older or if you are immunocompromised. The disease is primarily seen in the elderly, but occasionally it occurs in younger individuals. It affects both sexes and all races equally and can occur at any time of the year.

What are the symptoms of shingles?

Shingles is a painful rash that develops on one side of the face or body. The rash consists of blisters that typically scab over in seven to 10 days and fully clears up within two to four weeks. Before the rash appears, people often have pain, itching, or tingling in the area where it will develop. This may happen several days before the rash appears.

Most commonly, the rash occurs in a single stripe around either the left or the right side of the body. In other cases, the rash occurs on one side of the face. Shingles on the face can affect the eye and cause vision loss or blindness. In rare cases (usually in people with weakened immune systems), the rash may be more widespread on the body and look similar to a chickenpox rash. Other symptoms of shingles are fever, headache, chills, and upset stomach. Rarely, shingles can also lead to pneumonia, hearing problems, encephalitis, or death.

How is shingles spread?

People get shingles when the varicella zoster virus, which causes chickenpox, reactivates in their bodies after they have already had chickenpox. A person must have already had chickenpox in the past to develop shingles. Contact with an infected individual does not cause another person's inactive virus to reactivate. However, the virus from a shingles patient may cause chickenpox in someone who has not had it before.

How soon after infection do symptoms appear?

The virus is inactive in someone who has had Chickenpox in the past. It can reactivate many years later. There is not a way to predict when a shingles reactivation may occur.

Office of Infectious Disease Epidemiology 24/7 Emergency Contact Number: 1-888-295-5156

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When and for how long is a person able to spread shingles?

A person exposed to someone with shingles will not get shingles but may get chickenpox. The virus is present at the rash site and is contagious for a week after blisters appear. If you have shingles, direct contact with the fluid from your rash blisters can spread VZV to people who have never had chickenpox or never received the chickenpox vaccine. If they get infected, they will develop chickenpox, not shingles. They could then develop shingles later in life.

The risk of spreading VZV to others is low if you cover the shingles rash. People with shingles cannot spread the virus before their rash blisters appear or after the rash crusts.

People with chickenpox are more likely to spread VZV than people with shingles.

Does past infection make a person immune?

Most people who develop shingles have only one episode. However, you can have shingles more than once, especially if you are immunocompromised.

What are the complications associated with shingles?

Shingles is not usually dangerous to healthy individuals although it can cause great discomfort during an attack. Anyone with shingles on the upper half of their face, no matter how mild, should seek medical care. There is some danger that the virus could damage the eye, resulting in blindness. Complications are rare but may include partial facial paralysis (usually temporary), ear damage, or encephalitis (inflammation of the brain).

What is the treatment for shingles?

Several antiviral medicines – acyclovir, valacyclovir, and famciclovir – are available to treat shingles and shorten the length and severity of the illness. These medicines are most effective if you start taking them as soon as possible after the rash appears. If you think you have shingles, contact your health care provider as soon as possible to discuss treatment.

Over-the-counter pain medicine or from a prescription from your doctor may help relieve the pain caused by shingles. Wet compresses, calamine lotion, and colloidal oatmeal baths (a lukewarm bath mixed with ground-up oatmeal) may help relieve itching.



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What can be done to prevent the spread of shingles?

Chickenpox must be prevented to prevent shingles.

To prevent spreading VZV to others:

- Cover the rash.
- Avoid touching or scratching the rash.
- Practice good hand hygiene.
- Avoid contact with the following people until your rash has crusted over:
 - o Pregnant women who have never had chickenpox or the varicella vaccine
 - Immunocompromised persons
 - o Infants, particularly premature or low birth weight babies.

The best way to prevent chickenpox and, therefore, shingles is to receive the varicella vaccination prior to having or being exposed to VZV. A health care provider can help determine if you are eligible for the varicella vaccine. Immunized individuals will be less likely to develop shingles later in life. Unvaccinated individuals or individuals who have never had chickenpox can develop chickenpox from a person who has shingles.

There is currently a vaccine specifically for shingles. The Centers for Disease Control and Prevention recommends two doses of recombinant zoster vaccine (RZV, Shingrix) to prevent shingles and related complications in adults 50 years and older. Shingrix is also recommended for adults 19 years and older who have weakened immune systems because of disease or therapy.

Do people with shingles need to be excluded from work or school?

No, individuals with shingles do not need to be excluded unless the rash cannot be well covered and/or proper hand hygiene cannot be guaranteed.

Resources

Centers for Disease Control and Prevention:

- Home page for shingles, https://www.cdc.gov/shingles/about/index.html
- Shingles vaccination page, https://www.cdc.gov/shingles/vaccination.html
- Chickenpox page, https://www.cdc.gov/chickenpox/index.html
- Immunization Schedule page, https://www.cdc.gov/vaccines/schedules/index.html