

# Lightning Learning: Shingles (Herpes Zoster)

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## STOP!

Shingles is a painful rash caused by the reactivation of the Varicella-Zoster virus – **the same virus that causes chickenpox.**

Reactivation often occurs in immunocompromised individuals who have previously had chickenpox.

**50% of those who live to 85 years old** will have *at least* one episode.

While normally self-limiting, it does have some **rare complications** such as:

- Post-herpetic neuralgia
- Aseptic meningitis
- Encephalitis
- Ramsay Hunt syndrome
- Herpes zoster ophthalmicus

## LOOK

The rash is unilateral and limited to a dermatomal distribution. In some cases the **pain may start BEFORE the rash appears.**

It begins with erythematous papules and progresses on to vesicles and papules.

**Have symptoms started <72 hours ago OR >72 hours ago (but new lesions are still appearing)?**  
To help reduce pain and shorten duration of symptoms, *antiviral treatment is recommended.*

**Hutchinson's Sign:** lesions to the tip of the nose indicate possible herpes zoster ophthalmicus – possibly leading to serious eye complications. Prompt treatment and ophthalmology review is advised.

## LEARN

- 1. Recognise shingles and prescribe antivirals** (if within 72 hours of onset) to reduce pain and duration of symptoms.
- 2. Reassure patients.** Shingles can be very painful but is usually a self-limiting condition.
- 3. Contagious until the last blister scabs over!** Individuals who have never had chickenpox could catch it during that window. Vulnerable people who have never had chickenpox should be avoided.

