Shingles (Herpes Zoster) Fact Sheet

What is shingles (herpes zoster)?
Shingles, also called herpes zoster or zoster, is a painful skin rash caused by the varicella zoster virus (VZV). VZV is the same virus that causes chickenpox. After a person recovers from chickenpox, the virus stays in the body. Usually the virus does not cause any problems; however, the virus can reappear years later, causing shingles. The same virus that causes genital herpes, a sexually transmitted disease, does not cause herpes zoster.

What does shingles look like?
Shingles usually starts as a rash on one side of the face or body. The rash starts as blisters that scab after three to five days. The rash usually clears within two to four weeks. Before the rash develops, there is often pain, itching, or tingling in the area where the rash will develop. Other symptoms of shingles can include fever, headache, chills and upset stomach.

Are there any long-term effects from shingles?
Very rarely, shingles can lead to pneumonia, hearing problems, blindness, brain inflammation (encephalitis) or death. For about one person in five, severe pain can continue even after the rash clears up. This pain is called post-herpetic neuralgia. As people get older, they are more likely to develop post-herpetic neuralgia, and it is more likely to be severe.

How common is shingles in the United States?
In the United States, there are an estimated one million cases of shingles each year.

Who gets shingles?
Anyone who has recovered from chickenpox may develop shingles, including children. However, shingles most commonly occurs in people 50 years old and older. The risk of getting shingles increases as a person gets older.

People who have medical conditions that keep the immune system from working properly, like cancer, leukemia, lymphoma, and human immunodeficiency virus (HIV), or people who receive immunosuppressive drugs, such as steroids and drugs given after organ transplantation are also at greater risk to get shingles.

How often can a person get shingles?
Most commonly, a person has only one episode of shingles in his/her lifetime. Although rare, a second or even third case of shingles can occur.

Can shingles spread to others?
Shingles cannot be passed from one person to another. However, the virus that causes shingles, VZV, can be spread from a person with active shingles to a person who has never had chickenpox through direct contact with the rash. The person exposed would develop
chickenpox, not shingles. The virus is not spread through sneezing, coughing or casual contact. A person with shingles can spread the disease when the rash is in the blister-phase. Once the rash has developed crusts, the person is no longer contagious.

A person is not infectious before blisters appear or with post-herpetic neuralgia, pain after the rash is gone.

**Can the spread of shingles be prevented?**
The risk of spreading shingles is low if the rash is covered. People with shingles should keep the rash covered, not touch or scratch the rash, and wash their hands often to prevent the spread of VZV. Once the rash has developed crusts, the person is no longer contagious.

**Is there a 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 healthcare provider as soon as possible to discuss treatment.

Pain medicine, either over-the-counter or 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.

**Is there a vaccine to prevent shingles?**
CDC recommends that adults 50 years and older get two doses of the shingles vaccine called Shingrix (recombinant zoster vaccine) to prevent shingles and the complications from the disease. Adults 19 years and older who have weakened immune systems because of disease or therapy should also get two doses of Shingrix, as they have a higher risk of getting shingles and related complications.

Your doctor or pharmacist can give you Shingrix as a shot in your upper arm. Shingrix provides strong protection against shingles and PHN. In adults 50 years and older who have healthy immune systems, Shingrix is more than 90% effective at preventing shingles and PHN. Immunity stays strong for at least the first seven years after vaccination. In adults with weakened immune systems, studies show that Shingrix is 68%-91% effective in preventing shingles, depending on the condition that affects the immune system.

**Can the shingles vaccine be given to people who have already had shingles?**
Yes. People who have had shingles can receive the shingles vaccine to help prevent future occurrences of the disease.

**Who should get Shingrix?**
Adults 50 years and older should get two doses of Shingrix, separated by two to six months. Adults 19 years and older who have or will have weakened immune systems because of disease or therapy should also get two doses of Shingrix. If needed, people with weakened immune systems can get the second dose one to two months after the first.
You should get Shingrix even if in the past you:
- Had shingles
- Received Zostavax®
- Received varicella (chickenpox) vaccine

There is no maximum age for getting Shingrix. If you had shingles in the past, Shingrix can help prevent future occurrences of the disease.

There is no specific length of time that you need to wait after having shingles before you can receive Shingrix. You should make sure the shingles rash has gone away before being vaccinated.

Chickenpox and shingles are related because they are caused by the same virus (varicella-zoster virus). After a person recovers from chickenpox, the virus stays dormant (inactive) in the body. It can reactivate years later and cause shingles.

**How are vaccine recommendations made?**

Once a vaccine is licensed by the FDA, the federal Advisory Committee on Immunization Practices (ACIP) votes on whether to recommend this vaccine, and if so, who should get it and at what ages. Neither the ACIP nor the federal government makes mandates or laws requiring immunization for adults. The CDC Director and the Department of Health and Human Services (HHS) will review recommendations made by the ACIP. Recommendations become official when published in CDC's Morbidity and Mortality Weekly Report (MMWR).

**Has the ACIP recommended the FDA-approved vaccine?**

Yes. CDC recommends two doses of Shingrix separated by two to six months for immunocompetent adults aged 50 years and older: Whether or not they report a prior episode of herpes zoster. See MMWR: Prevention of Shingles (ACIP Recommendations).

**Is the FDA-approved vaccine safe?**

Studies show that Shingrix is safe. The vaccine helps your body create a strong defense against shingles. As a result, you are likely to have temporary side effects from getting the shots. The side effects might affect your ability to do normal daily activities for two to three days.

Most people got a sore arm with mild or moderate pain after getting Shingrix, and some people had redness and swelling where they got the shot. Some people felt tired, had muscle pain, a headache, shivering, fever, stomach pain, or nausea. Some people who got Shingrix experienced side effects that prevented them from doing regular activities. Symptoms went away on their own in about two to three days. Side effects were more common in younger people.

**How effective if the FDA-approved vaccine?**

Two doses of Shingrix provide strong protection against shingles and postherpetic neuralgia (PHN), the most common complication of shingles.
In adults 50 to 69 years old with healthy immune systems, Shingrix was 97% effective in preventing shingles; in adults 70 years and older, Shingrix was 91% effective.

In adults 50 years and older, Shingrix was 91% effective in preventing PHN; in adults 70 years and older, Shingrix was 89% effective.

In adults with weakened immune systems, Shingrix was between 68% and 91% effective in preventing shingles, depending on their underlying immunocompromising condition.

In people 70 years and older who had healthy immune systems, Shingrix immunity remained high throughout seven years following vaccination.

Will insurance cover Shingrix?

Medicare
- Medicare Part D plans cover the shingles vaccine, but there may be a cost to you depending on your plan. There may be a copay for the vaccine, or you may need to pay in full then be reimbursed for a certain amount.
- Medicare Part B does not cover the shingles vaccine.

Medicaid
- Medicaid may or may not cover the vaccine. Contact your insurer to find out.

Private health insurance
- Many private health insurance plans will cover the vaccine, but there may be a cost to you depending on your plan. Contact your insurer to find out.

Vaccine assistance programs
- Some pharmaceutical companies provide vaccines to eligible adults who cannot afford them. You may want to check with the vaccine manufacturer, GlaxoSmithKline, about Shingrix.

Where can I get more information?

- Contact your doctor, nurse or clinic, a community pharmacist, or your local public health unit.
- Visit the Centers for Disease Control and Prevention (CDC) website