

# Shingles

## Fact Sheet

### What are Shingles?

Shingles (otherwise known as *Herpes zoster*) is a painful, blistering rash caused by reactivation of the chickenpox (*Varicella*) virus, which affects only a limited area of skin, and makes you feel tired, run down, and even depressed. Shingles are infectious from as long as 5 days prior to the rash appearing, through the blistering stage and up until the blisters have crusted over and dried completely.

### What are the signs & symptoms of Shingles?

You may feel slightly unwell, have a mild fever and develop a localised area of pain and tenderness a few days or sometimes up to two weeks before the rash appears. The rash starts off as red spots, which quickly turn into blisters. They usually affect only one side of the body. This is because they come out on the area of skin which is supplied by one particular nerve. The rash can affect any part of the body. It may appear as a band around one side of the chest or stomach, or down an arm or leg. It may affect the head, and when it affects the upper cheek or the side of the forehead it may also affect the eye.

***It is important to see your doctor for a correct diagnosis and to receive the appropriate anti-viral treatment and pain killers as early as possible.***

Usually within a week the blisters will burst and then begin to crust over, and the rash slowly settles down, sometimes leaving pale scars. The pain may settle as quickly as the rash, but this is not always the case. Unfortunately, some people are left with pain affecting that area for many months or even years (post herpetic neuralgia).

### How did I acquire Shingles?

You can only get Shingles (*Herpes zoster*) if you have previously had chickenpox (*Varicella*). After having chickenpox, the virus lies dormant in the nerves. Shingles occurs because of a reactivation of

the chickenpox virus. Usually this is caused by a decrease in your body's natural resistance (immunity), which can be due to other illnesses, infections, stress, being generally run down, or occasionally when the body's immune defences are affected by certain drugs or illnesses that cause immune deficiencies.

### Can I get Shingles again?

Yes – Shingles can unfortunately occur more than once. You may have further attacks of shingles, especially at times when you are run down. These attacks may affect a different part of the body.

### Who is at risk from my Shingles infection?

- Anyone who has not had chicken pox before e.g., babies or children can develop chicken pox from the shingles.
- Anyone who has not been vaccinated against chicken pox can develop chicken pox from the shingles.
- Pregnant women
- People with a low immunity.

### How can Shingles be spread?

*Herpes zoster* and *Varicella* (chicken pox) can spread through contact with the virus, which is carried in the fluid of the blisters. The virus responsible for shingles can be spread when a person comes into contact with this fluid, either directly (by touching the fluid) or indirectly (by touching something the fluid is on, e.g., furniture or bedding).

### How will my care change whilst in hospital?

- You will be considered infectious until your blisters or rash have dried out and crusted over.
- Regular and thorough hand hygiene is one of the most successful ways to prevent the spread of **ALL** infections.

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- A sign is placed outside your door to alert hospital staff for the need to use special protective infection control precautions. This sign also alerts visitors of the need to speak with nursing staff prior to entering your room.
- The hospital staff will wear protective apparel such as gloves and an apron or gown when they enter your room. These items are disposed of in a separate waste bin when the staff leave your room.
- You will be allocated a private room with your own en-suite facilities. We ask that your movement throughout the ward is limited to essential movement only, such as physiotherapy. If you are unsure about when you can leave your room, please speak to the nursing staff.

### Good Hand Hygiene Practices

Hand Hygiene is the most effective way to prevent **ALL** infections, including the flu and the common cold. Encourage your family and friends to learn and maintain good hand hygiene practices every day. Please refer to the hand hygiene information in the patient information booklet or hand hygiene leaflet available from the Infection prevention and control team.

During your stay in hospital, you may have seen the staff using an alcohol-based hand rub, as an alternative to soap and water. Alcohol-based hand rubs or gels can be used for hand hygiene as long as your hands are not visibly soiled / dirty. There are a variety of brands on the market and are available for purchase at most pharmacies. You may choose to use this type of product at home.

### Can I still have visitors?

Yes – But visitors who **SHOULD NOT** come to see you are those who **HAVE NOT** had chickenpox before, especially children, newborn babies, pregnant women and anyone who may have a lowered immunity. If you are unsure about having contact with your family and friends during your infectious stage, please speak to your doctor or

ask to speak with the infection control nurse. The nursing staff will educate your visitors on the need to perform hand hygiene before entering your room and when they leave your room. We would appreciate it if you would also encourage your visitors to perform this hand hygiene, as this is the most effective way to prevent any infection. In some situations, your visitors may be asked to wear gloves, gowns, or masks, to protect themselves from infection. If this is required, the nursing staff will direct your visitors in applying these items.

### What happens when I go home?

- When you return home, it is important for you, your family, and your friends to continue the good hand hygiene practices that you have been taught in hospital every day.
- If your blisters still have fluid present or the rash is moist, your family and close contacts should wear gloves if they are assisting you with any dressings or personal care, washing of clothes, linen, crockery and cutlery or for the cleaning of the bath, toilet and shower.
- They must wash their hands well, after removing their gloves and disposing of the gloves immediately in the rubbish bin.

### Where can I get further information?

Talk to your doctor or the nurses caring for you. If you wish to speak with the Infection Control department, ask your nurse to contact us. Our office hours are 8am to 4pm Monday to Friday. Our contact numbers are:

- Office: (02) 9480 9433
- Office: (02) 9480 9732

**Alternatively contact your Local Public Health Unit 1300 066 055.**

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### References

NSW Dept of Health; Communicable Disease Factsheets – Shingles (Herpes-Zoster) (29 August 2019)

Centers for Disease Control and Prevention (CDC); Infectious Diseases Factsheets – Shingles (Herpes-Zoster) (October 5, 2020)

NSW Dept of Health; Infection Prevention and Control Policy PD2017\_013

National Health and Medical Research Council; Australian Guidelines for the Prevention and Control of Infection in Healthcare (2019)

Australian Technical Advisory Group on Immunisation (ATAGI). Australian Immunisation Handbook, Australian Government Department of Health, Canberra, 2018, [www.immunisationhandbook.health.gov.au](http://www.immunisationhandbook.health.gov.au)