

# Prevention and control of Herpes Zoster ('shingles') in aged care homes

Herpes zoster or 'shingles' is a localised, painful, vesicular skin rash resulting from reactivation of the the varicella-zoster virus that causes chickenpox earlier in life. Although usually self-limiting, shingles can lead to post-herpetic neuralgia (PHN), a long-term neuropathic pain syndrome.

About 20–30% of people will develop shingles during their lifetime, most after the age of 50 years. Older people (particularly those aged over 70 years) are also more likely to have shingles complicated by PHN.

## Clinical Presentation

- Shingles usually manifests as a self-limiting, vesicular rash (small fluid-filled blisters in skin) which is painful and lasts approximately 10–15 days
- Typically, the rash does not cross the midline. The rash often takes the shape of a belt from the midline on one side of the body because the virus works down the nerves that branch from the spinal cord. Chest and lower back regions are most commonly affected
- In 80% of cases early symptoms (during first 48–72 hours) include itching, tingling or severe pain in the affected skin site and sometimes headache, sensitivity to light and feeling generally unwell
- The nature and severity of symptoms are dependent on the location of the skin rash, underlying immunity, age, and whether therapeutic medication has been administered

Symptoms of shingles infection	
pain	vesicular rash - unilateral
burning, tingling or itching sensation	fever and/or headache
sensitivity to touch	sensitivity to light
a feeling of numbness in the affected area of the body	fatigue
confusion	memory loss
fever	

## How can shingles be prevented?

### 1. Vaccination for adults

The Australian Immunisation Handbook recommends shingles vaccinations for specific groups, including

- adults aged 60 years and over
- adults aged 50 years and over who live in the same household as someone who has a weakened immune system.

There are two shingles vaccines:

- Zostavax (live-attenuated varicella virus vaccine)
- Shingrix (zoster vaccine recombinant, adjuvanted (non-live))

Shingles vaccination with the Zostavax vaccine is free under the National Immunisation Program for immunocompetent adults aged 70 years. Catch-up vaccination is also available for adults aged 71 to 79 years until 31 October 2023.

The shingles vaccines are available on prescription for people aged 50 to 69 years and from 80 years but must be funded by the patient.

Vaccination is recommended for people who have had shingles infection in the past. Prior to vaccination, it is recommended to wait at least one year after recovery.

### 2. Infection prevention and control measures

Shingles can be spread when a person comes into contact with fluid contained in the skin blisters. The virus can be spread by direct contact with the rash or by touching any dressings, sheets or clothes soiled with discharge from the blisters. The following measures reduce the risk of transmission:

- Strict hand hygiene practices by staff
- People not immune to chickenpox should not care for residents with shingles
- If lesions are on face, additional precautions are required:
  - Gown, gloves, surgical face mask to be used by staff
  - Affected resident to be cared for in a single room
  - Avoidance of mingling in group settings

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## Diagnosis of shingles

Shingles is usually diagnosed on the basis of medical review and visual examination, particularly once the rash appears. Sometimes, other conditions may have a similar appearance (e.g. bacterial skin infections, dermatitis) and in this setting specific testing is performed.

- Laboratory confirmation is obtained by taking a small sample from a skin blister and performing a nucleic acid detection test for virus DNA (e.g. PCR test)

## Management of shingles

- Anti-viral medications may help to ease the pain and reduce the duration of an attack of shingles.
- Medication must be administered within 72 hours for best effect, ideally within 24 hours of rash onset
  - pain relief
  - drinking more fluids
  - admission to hospital for severe cases

### Further reading:

1. National Health and Medical Research Council, 2013 (Updated 8<sup>th</sup> March 2022), Australian Immunisation Handbook
2. National Centre for Immunisation Research & Surveillance (NCIRS) 2018, Zoster vaccine for Australian adults, <http://www.ncirs.org.au/ncirs-fact-sheets-faqs/zoster-vaccine-australian-adults>
3. Victorian Department of Health and Human Services, Chickenpox and shingles (varicella/herpes zoster), <https://www2.health.vic.gov.au/public-health/infectious-diseases/disease-information-advice/chickenpox-and-shingles>

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