

# Shingles (Zoster): Questions and Answers



## INFORMATION ABOUT THE DISEASE AND VACCINES

### What causes shingles?

Both chickenpox and shingles are caused by the same virus, the varicella zoster virus (VZV). After a person has had chickenpox, the virus stays in the body's nerves permanently. Approximately one in three people who have been infected with chickenpox will later develop herpes zoster, commonly known as zoster or shingles.

### Why do some people develop shingles and others don't?

Shingles occurs when VZV reactivates and causes rash and pain. The risk of getting shingles increases as a person gets older. People who have medical conditions that keep the immune system from working properly, or people who receive immunosuppressive drugs are also at greater risk to get shingles.

### What are the symptoms of shingles?

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.

Shingles usually starts as a rash with blisters that scab after 3 to 5 days. The most frequent symptom is pain. The rash and pain usually occur in a band on one side of the body, or clustered on one side of the face. The rash usually clears within 2 to 4 weeks.

### What are possible complications from shingles?

Very rarely, shingles can lead to pneumonia, hearing problems, blindness, scarring, brain inflammation (encephalitis), or death.

For one person in five, severe pain can continue even after the rash clears up, a situation called post-herpetic neuralgia (PHN). As people get older, they are more likely to develop PHN, and it is more likely to be severe and long lasting. The pain may be sharp or throbbing, and it may extend beyond the area of the original rash. The skin may be unusually sensitive to touch and to changes in temperature. PHN can last for months, or even years.

### Is there a treatment for shingles?

Several antiviral medicines can be used to treat shingles. These medications should be started as soon as possible after the rash appears. They can help shorten the length and severity of the episode. Antiviral treatment is most effective if started within 24 to 72 hours after the rash appears.

Medication may also help with pain caused by shingles.

### Is there a test for shingles?

Yes, but shingles is usually diagnosed based on symptoms and the appearance of the rash.

### Can you catch shingles from an infected person?

No, shingles cannot be passed from one person to another, not even through sneezing, coughing, or casual contact. While it is possible for the VZV virus to be spread from a person with active shingles to a person who has never had chickenpox or never been vaccinated against chickenpox (if they contact the rash directly), the person exposed would develop chickenpox, not shingles.

### How common is shingles in the United States?

Before vaccines became available, about 1 million cases of shingles occurred in the U.S. each year.

### Can you get shingles more than once?

Yes. Most people will have only one occurrence of shingles in their lifetime, but second and third occurrences have been reported.

### What kind of vaccine is available?

Recombinant zoster vaccine (RZV; Shingrix, GSK) contains a single protein from the zoster virus. RZV is not alive and cannot replicate in the body.

Between 2006 and 2020, a live zoster vaccine (ZVL; Zostavax, Merck), was distributed in the U.S. ZVL contained a weakened form of the virus that produced immunity in the body without causing illness.



**How is this vaccine given?**

Shingrix is injected into the deltoid muscle of the upper arm.

**Who should get this vaccine?**

The Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) recommends that all adults age 50 years and older receive a 2-dose series of RZV (Shingrix). The doses should be given 2 to 6 months apart. People 50 years and older should receive RZV even if they previously received the live zoster vaccine or have had shingles.

Shingrix is also recommended for all adults age 19 years and older who have a weakened immune system as a result of disease or treatment for disease. This includes people with cancer treated with radiation or chemotherapy, people treated with long term high-dose steroids, people with conditions such as HIV/AIDS, autoimmune diseases, or those who have had a solid organ or stem cell transplant.

**How effective is the Shingrix vaccine?**

In clinical trials Shingrix reduced the occurrence of shingles by 97% among people 50 years and older. A second study found that Shingrix reduced the occurrence of shingles by 90% among people 70 years and older. In this study Shingrix reduced the occurrence of shingles by 85% four years after vaccination.

**Does zoster vaccine prevent post-herpetic neuralgia (PHN)?**

Yes. In clinical trials, Shingrix was shown to reduce the risk of PHN by 89%.

**Who recommends zoster vaccine?**

Zoster vaccine is recommended by CDC's Advisory Committee on Immunization Practices, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, the American College of Physicians, the American College of Nurse-Midwives, and the American Pharmacists Association.

**What side effects have been reported with zoster vaccination?**

The most commonly reported side effects following Shingrix included pain at the injection site (69%–88% depending on age group), redness (38%), and swelling (30%). People who received Shingrix also reported symptoms such as muscle pain, tiredness, and headache more frequently than those who received a placebo.

About 9% of people who received Shingrix experienced pain at the injection site severe enough to prevent normal activities. About 11% of people who received Shingrix experienced systemic events (myalgia, fatigue, headache, fever, shivering, and gastrointestinal symptoms) severe enough to prevent normal activities.

**If I have a strong reaction after my first dose of Shingrix should I still take the second dose?**

Yes. People do not consistently react the same way to both doses. CDC encourages people to get the second dose even if a strong reaction occurs with the first dose.

**Who should NOT receive zoster vaccine?**

People who are allergic to any component of the vaccine or who had an allergic reaction following a previous dose should not receive that vaccine again. If the person has a severe acute illness, vaccination should be delayed until the illness has improved.

If Shingrix is indicated for a person known to be pregnant, CDC recommends waiting until after the pregnancy. If it is indicated for a person who is lactating, CDC recommends administering it.

**Is Shingrix safe for people with a weakened immune system?**

Yes. Because Shingrix does not contain any live virus, only a small piece of the virus, Shingrix is safe and recommended for adults with a weakened immune system.

People who have a weak immune system may not gain as much protection from vaccination as people with a normal immune system. However, it is important to vaccinate them because they are also at higher risk of developing serious shingles illness than people with a normal immune system.

**Is the cost of zoster vaccine covered by insurance?**

All Medicare Part D plans cover zoster vaccination, meaning that a pharmacy can bill Medicare for the cost of the vaccine, with no out-of-pocket costs for the recipient. Most health insurance plans cover Shingrix as recommended by CDC. Contact your insurer with coverage questions.

**Can the zoster vaccine cause shingles?**

No.