Shingles

Anyone who’s had chickenpox is at risk of getting shingles in later life. Shingles can be very painful, but there are some good treatments that might make an attack shorter and help prevent long-lasting problems. There is also a vaccine to help prevent shingles.

We’ve brought together the best research about shingles and weighed up the evidence about how to treat it. You can use our information to talk to your doctor and decide which treatments are best for you.

What is shingles?

Shingles is caused by the same virus that causes chickenpox. It’s called the herpes zoster virus. It can cause a painful rash and make you feel very ill.

Most adults in the UK have had chickenpox as children.\(^1\) Once you’ve got over chickenpox, the virus stays in your body, in an inactive form. That means it doesn't cause any problems. Your immune system stops it from doing anything.\(^2\)

The virus lives in your nerve cells. There’s no way to get rid of it altogether. For many people, it never causes any problems. But as you get older, or if your immune system is weak for some reason, the virus ‘wakes up’ and starts reproducing in your nerve cells. The virus travels along your nerves to the nerve endings in your skin. This can cause shingles.

You can’t catch shingles from someone else. And you can’t catch shingles from someone with chickenpox. You can only get shingles if you’ve already had chickenpox.\(^2\)

Shingles is much more common in people over the age of 50 than in younger people, although you can get it at any age. You’re also more likely to get shingles if you have an illness that affects your immune system, such as HIV or some cancers, or if you have had to take high doses of a medicine called prednisolone.\(^3\) (Prednisolone is a steroid that’s used to treat inflammation in illnesses including irritable bowel syndrome, asthma, and rheumatoid arthritis.)
What are the symptoms of shingles?

The most obvious symptom of shingles is a rash, but it can also cause other problems, like headaches. If you have the symptoms of shingles, it's important to see your doctor quickly. That's because treatment works best if you start taking it within three days of getting the rash.

But even after three days, it may be worth taking treatment, so you should still see your doctor. [4]

This is what happens when you get shingles: [4]

• You may start by feeling generally unwell, feeling very tired and having headaches.

• A patch of your skin may start to feel itchy, tingly or very sore. You might have a burning pain, which gets worse if you touch the patch of skin.

• After a day or so, you get a rash of small blisters on one side of your body. They may be around your waist, on your chest or on your head. Where you get shingles depends on which of your nerves is affected by the herpes zoster virus.

• The rash can feel very sensitive and painful. Just the feeling of clothing on your skin can hurt.

Your doctor can usually diagnose shingles from looking at the rash, and asking you about your symptoms. You probably won't need any other tests.

The shingles rash usually heals after two to four weeks. [4] But some people get complications from shingles, which can lead to more long-lasting problems. To learn more, see What will happen to me?
How common is shingles?

About 3 in 1,000 people in the UK get shingles during the course of a year. But it mainly happens in older people. About 1 in 100 people aged over 80 get shingles in the course of a year. [5]

Doctors estimate that everyone has about a 1 in 10 to 2 in 10 chance of getting shingles in their lifetime. [1]

What treatments work for shingles?

The main aim of treating shingles is to stop you from getting complications like long-lasting pain after the infection has cleared up (post-herpetic pain) or eye problems if the shingles rash is near your eye (ophthalmic herpes zoster).

The treatments might also make an attack shorter and make it less uncomfortable. [1] If you do get long-lasting pain, there are some treatments that may help.

There is also a vaccine that can help protect you from getting shingles in the first place. If you do get shingles after having the vaccine, it may be milder and less likely to lead to long-lasting pain.

We’ve looked at the best research and given a rating for each treatment according to how well it works. We’ve divided the treatments into the following categories:

Treatments to prevent shingles

Treatments for when you have shingles

Treatments for long-lasting pain

Treatment Group 1

Treatments to prevent shingles

A vaccine has been created to help protect older people from getting shingles. It’s called Zostazax.

Key points about treatments to prevent shingles

- In the UK, the shingles vaccine is offered to all people in the year after their 70th birthday.

- Having the shingles vaccine can cut your risk of getting shingles by about half.

- If you do get shingles after having the vaccine, it is likely to be milder. You are also less likely to get long-lasting pain from shingles (post-herpetic neuralgia).
The main side effects from the vaccine are redness, pain, itching, or swelling at the site of the jab. The vaccine is unlikely to cause more serious problems.

Treatments to prevent shingles

Treatments that work

- Shingles vaccine

Treatment Group 2

Treatments for when you have shingles

The main goal of treatment for shingles is to stop you from getting complications.

The most serious complications of shingles are long-lasting pain after the infection has cleared up (post-herpetic pain) and eye problems if the shingles rash is near your eye (ophthalmic herpes zoster). Treatments might also make an attack shorter and make it less uncomfortable.

Key points about treatment for when you have shingles

- Taking antiviral drugs can cut your chances of getting long-lasting pain or eye problems.

- You may need to take strong painkillers during an attack of shingles. If your rash is very painful, your doctor may prescribe stronger painkillers than you can buy in the pharmacy.

- Taking steroid tablets probably won't help and may cause more problems.

There are some other things you can try to make yourself more comfortable when you have shingles. For more information, see Self help for shingles.

Treatments for when you have shingles

Treatments that are likely to work

- Antiviral drugs

Treatments that need further study

- Antiviral creams or gels

Treatments that are unlikely to work

- Corticosteroid tablets
Treatment Group 3

Treatments for long-lasting pain

The pain from a shingles attack can last for months, or even years, after the attack. It happens because your nerve endings were damaged by the virus when you had shingles. This long-lasting pain can make you feel very low and depressed. But there are treatments that can help ease the pain.

Key points about treatment for long-lasting pain after shingles

- Drugs called tricyclic antidepressants can help relieve long-lasting pain after shingles. These are the drugs your doctor is likely to prescribe first.
- Another drug, called gabapentin, is also helpful for long-lasting shingles pain.
- You may need to take strong painkillers called opioid analgesics. Your doctor can prescribe stronger painkillers than you can buy in the pharmacy.

Treatments for long-lasting pain

Treatments that work

- Tricyclic antidepressants
- Gabapentin

Treatments that are likely to work

- Opioid painkillers
- Painkilling creams and gels

Treatments that need further study

- Capsaicin cream or gel

Other treatments

We haven’t looked at these drugs in the same detail as other treatments on the site (for more information, see Our method). But we’ve included them because they are sometimes used and you may be interested in them.

- Other anti-epilepsy drugs
What will happen to me?

The rash from shingles usually lasts about two to four weeks.

The tiny blisters crust over and heal up. Sometimes they leave a scar, or change the colour of your skin. [4]

You'll need to wear a dressing over the rash to keep it clean and dry. A sterile, loose dressing is best. [1] A dressing can help protect your skin from pressure (like, for example, the rubbing of your clothes). This can help with the pain. Ask your doctor or nurse about what sort of dressing is suitable. You shouldn't use a dressing that sticks to the skin, such as sticking plaster, as that could damage your skin.

Most people don't get shingles more than once. [6] That's because having shingles 'boosts' your immune system against the herpes zoster virus, so your immune system is able to keep it in check.

But sometimes the pain doesn't go away when the rash heals. Some people get long-lasting pain after shingles, also called post-herpetic neuralgia. [4] This pain can last for months, or even years, after the shingles attack. It happens because your nerve endings were damaged by the virus when you had shingles. This long-lasting pain can make you feel very low and depressed. But there are treatments that can help ease the pain. To find out more, see What treatments work for long-lasting pain after shingles?

In one study, about 8 in 100 people who'd had shingles still had bad pain three months later. [1] But your chances of getting long-lasting pain vary a lot, depending mainly on your age.

You are much more likely to get long-lasting pain after shingles if you are older. It is rare in people under 60. [4] But as many as 1 in 3 people over the age of 80 get longer-lasting pain. [5] You are also more likely to get long-lasting pain if you had a very bad, painful rash.

If you take antiviral medicine at the time of your shingles attack, the pain is likely to go away sooner. [7] To find out more, see What treatments work for shingles?

If the shingles rash is on your face, you need to watch out that it doesn't affect your eye on the side of your face with the rash. If the rash is very close to one of your eyes, it can cause your eyelid to swell up, and sometimes affects the eye itself. [6] This is called ophthalmic herpes zoster. It happens to about 20 in 100 people who get shingles. [6]

It's important to see a doctor quickly if your eye is affected when you have a shingles rash on your face. You may need to see an eye specialist. Your eye could be damaged by the virus. In some cases, if it's not treated, this could affect your eyesight. Treatment with an antiviral drug can cut your chances of a shingles attack damaging your eye. [6]
Sometimes, the damage to your eye can happen months or years after the shingles attack on your face. If you have eye problems in the future, it's important to tell the doctor you've had shingles. This may affect the treatment you need.\(^6\)

People who have weak immune systems, such as people with HIV, are more likely to get complications from shingles. People with HIV sometimes have a shingles attack that affects other parts of their body, such as their lungs. This can be serious. They are also more likely to get repeated attacks of shingles. It's important to get treatment quickly if you have HIV and you think you may have shingles.\(^1\)

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**Treatments:**

**Shingles vaccine**

In this section

A vaccine has been created to help protect older people from getting shingles. It's called Zostavax.

The vaccine is given as a jab in your upper arm. In the UK, it is offered to all people in the year after their 70th birthday. For a while, it is also being offered to people aged 79 as part of a catch-up programme.\(^8\)

The vaccine works by introducing a weakened version of the virus that causes shingles into your body. Your immune system responds to the vaccine by making antibodies against the virus. Not only do the antibodies destroy the weakened version of the virus so you don't get ill, but they also make it easier for your body to recognise the virus if it were to become active in your body again. This means that your body will react more quickly and produce infection-fighting antibodies straight away, before shingles can develop.

Good-quality studies show that the vaccine reduces the chance of shingles by about half for people aged 60 and older, although it gradually works less well as people age. If someone does get shingles after having the vaccine, their symptoms are likely to be milder. They are also less likely to get long-lasting pain from shingles (post-herpetic neuralgia).\(^9\)

It's not clear how long the vaccine helps protect people from shingles, but studies suggest that it works for at least three years.\(^9\)

The main side effects from the vaccine are redness, pain, itching, or swelling at the site of the jab. The vaccine is unlikely to cause more serious problems. But since it contains a weakened version of the virus, it shouldn’t be given to people who have problems with their immune system. This includes:

- People with illnesses that weaken their immune system, such as leukaemia, lymphoma, or HIV / AIDS
• People taking certain medicines that weaken their immune system.

The vaccine also isn’t recommended for pregnant women, people who have an active tuberculosis (TB) infection that isn’t being treated, or people who’ve previously had a severe allergic reaction to ingredients within the shingles vaccine, such as gelatin.

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**Antiviral drugs**

*In this section*

If you take antiviral drugs during an attack of shingles, when the attack is over, your pain is likely to go away more quickly. And taking antiviral drugs may mean your pain will be milder and the rash may clear up more quickly.

If you have shingles rash on your face, taking antiviral drugs may reduce your chances of getting eye problems.

There are several different types of antiviral drugs. You’ll need a prescription from your doctor. They all work for shingles by stopping the virus that causes herpes (the herpes zoster virus) from reproducing. Some common antiviral drugs (and their brand names) are:

- Aciclovir (Zovirax)
- Famciclovir (Famvir)
- Valaciclovir (Valtrex).

They all seem to work as well as each other. Aciclovir is used most often. But you have to remember to take it five times a day. Famciclovir and valaciclovir only have to be taken three times a day.

In one good-quality study, 4 in 100 people who took aciclovir still had pain three months after they’d had shingles, compared to 17 in 100 people who took a dummy (placebo) drug. But not all studies show that antiviral drugs make much difference to long-lasting pain.

In studies, about 1 in 3 people taking antiviral drugs said they got a headache, and about 1 in 10 said they felt sick. But these symptoms are also common in people with shingles not taking antiviral drugs, so it's hard to know if the drugs actually caused the symptoms.

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**Antiviral creams or gels**

*In this section*
These creams or gels include antiviral medicines like aciclovir. You rub them on your skin, over the rash, instead of taking them as tablets. But we don't know if antiviral creams or gels work as well as antiviral tablets. There isn't much good-quality research.

One summary of the research (a systematic review) showed no difference between using an antiviral cream and using a dummy cream (as a placebo). But the studies were not very good, so it's hard to know for certain.\[13\]

Doctors sometimes prescribe antiviral cream as well as antiviral tablets, especially for people with a severe shingles rash around their eye. This is to increase the amount of antiviral medicine getting straight to the area around their eye. But there's no research to show whether or not it helps to use antiviral creams and antiviral pills at the same time.\[6\]

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**Corticosteroid tablets**

In this section

Corticosteroid tablets are sometimes used for shingles, but the research about how much they can help is mixed. Some studies showed that they helped prevent long-term pain, while other studies didn't find any difference.\[10\] \[13\]

These drugs are often called 'steroids' for short. But they are not the same as the anabolic steroids used by some athletes and bodybuilders. Instead, they are similar to chemicals your body makes to reduce inflammation.

Corticosteroid tablets might actually make shingles worse for some people. There is a risk that corticosteroid tablets could encourage the virus to spread around your body. Because of this, corticosteroid tablets are not usually recommended, unless you are taking an antiviral drug as well.\[4\] \[14\]

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**Tricyclic antidepressants**

In this section

Drugs called tricyclic antidepressants are often used to treat pain caused by nerve damage. They work better than normal painkillers for this type of pain. As their name suggests, tricyclic antidepressants are usually prescribed to treat depression. But they can also be prescribed to help with pain. If your doctor suggests you take tricyclics for pain, it doesn't mean he or she thinks you are depressed.

Tricyclics can help relieve long-lasting pain from shingles. Although, they may not get rid of it completely.

One summary of the research showed:\[15\]

- Out of the people who took tricyclics, 57 in 100 got good pain relief
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- Out of the people who took a dummy drug (a placebo), 11 in 100 got good pain relief.

If you take tricyclics for pain, you usually take a much lower dose than you would if you had them for depression. You need to take them for several weeks before you start to feel the benefit from them. The tricyclic used most often for pain is amitriptyline.

Tricyclics can have side effects. Side effects include having a dry mouth, feeling drowsy, and having trouble urinating. [13]

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**Gabapentin**

In this section

Gabapentin is a drug that is sometimes used for people with epilepsy. Research shows it can also be helpful for people with long-lasting pain after shingles. Your doctor may suggest it if you don't find that tricyclic antidepressants help or if you can't take them for some reason. [14]

In studies: [16]

- Out of the people who took gabapentin, 43 in 100 got relief from their pain
- Out of the people who took a dummy treatment (a placebo), 17 in 100 got relief from their pain.

You have to take gabapentin for several weeks to benefit from it. The people in the study had been taking it for 7 to 8 weeks.

About a quarter of people taking gabapentin feel sleepy or dizzy. Some people also get swollen ankles. [16]

There is a very small risk that taking gabapentin might make you more likely to think about suicide or harming yourself. [17] If you are worried about any thoughts or feelings you have, see your doctor straight away.

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**Opioid painkillers**

In this section

If you get very bad pain, your doctor may suggest strong painkillers called opioids. There are several types of opioid painkiller: for example, tramadol, oxycodone, and morphine. Studies show that they can relieve long-lasting pain after shingles. People taking them said they felt less pain than people taking a dummy drug (a placebo). But we don't know if opioid painkillers can make the pain go away completely. [18] [19]
Opioid painkillers do have side effects. Some people get addicted to them and find it hard to give them up. But your doctor should make sure you are taking a dose that’s high enough to help your pain, but low enough to stop you getting addicted.

These are some of the side effects you may have when taking opioid painkillers: [20]

- Constipation
- Drowsiness
- Feeling sick.

Some people find opioid painkillers and gabapentin work better together, if taking one of them alone does not help. [14]

The opioid painkiller tramadol should not be taken at the same time as tricyclic antidepressants, which are also used for long-lasting pain after shingles.

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**Painkilling creams and gels**

In this section

Some people find that patches or creams containing the local anaesthetic lidocaine can be helpful in reducing their pain.

Lidocaine is a substance that can numb your skin. It’s often used, for example by dentists, to temporarily numb an area of your body. It works by stopping your nerves from sending signals to your brain.

Lidocaine patches are often used to help long-lasting pain after shingles. One summary of the research (a systematic review) showed lidocaine was more effective than using a dummy treatment (a placebo) to relieve pain. [21] In another study, 9 in 10 people said lidocaine patches helped with their pain a lot. [19] But not all studies show this. One study found lidocaine didn’t make any difference compared to dummy (placebo) patches. [20]

Lidocaine is also available in gels and creams. You can buy some of these from a pharmacy. But you should be sure not to use more than the recommended dose. Ask a pharmacist or your doctor how much is safe to use, and how often you can use it.

The people in the studies we looked at didn’t get any serious side effects. Some people found the patches irritated their skin.

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**Capsaicin cream or gel**

In this section
Capsaicin is a substance from the chilli pepper plant. It makes chillis hot. Creams and gels containing capsaicin act on the nerve endings in your skin, which sense pain. The idea is that capsaicin 'distracts' your nerves and stops you from feeling pain.

We don't know if capsaicin creams or gels can be helpful if you have long-lasting pain after shingles. The research is mixed. In some studies on capsaicin creams and gels, just over half the people using them got good pain relief. \[22\] But in other studies, capsaicin creams and gels didn't make any difference compared with placebo creams or gels. \[23\]

Some people in the studies found capsaicin caused stinging or burning pain in the skin. But these reactions tended to go away with time. \[22\]

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**Other anti-epilepsy drugs**

In this section

Two other anti-epilepsy drugs apart from gabapentin are sometimes used for long-lasting pain after shingles. They are carbamazepine (brand name Tegetrol) and pregabalin (brand name Lyrica). They are normally used to treat epilepsy.

Studies show that carbamazepine is helpful for other types of long-term nerve pain. But it hasn't been tested on long-lasting pain after shingles. \[16\]

Some studies show that pregabalin can be helpful for long-lasting pain after shingles. In studies, people got good pain relief within three weeks. \[24\] \[25\]

The most common side effects of carbamazepine are: \[25\]

- Drowsiness
- Dizziness
- Constipation
- Unsteady movements.

Some people get other, less common side effects from carbamazepine. These include skin rashes, changes in blood cells and problems with how their liver works. \[26\]

Carbamazepine can decrease the number of blood cells produced by your body. Very rarely, your blood cells are affected enough to cause serious health problems. \[27\]

Rarely, some people taking carbamazepine get a very bad rash. This can be serious, or even life-threatening. But the risk is fairly small. Between 1 in 10,000 and 6 in 10,000 people who take carbamazepine get this rash. \[28\]
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There's a bigger risk of getting a serious rash if you have a particular genetic type. Nearly all people with this genetic type are from Asian backgrounds. Doctors are advised to offer Asian people a blood test to check for their genetic type, before prescribing carbamazepine. It's especially important to have the test if you come from a Han Chinese, Hong Kong Chinese, or Thai background.

The most common side effects of pregabalin are:

- Dizziness
- Swollen ankles
- Putting on weight
- Sleepiness.

There is a very small risk that taking these epilepsy drugs might make you more likely to think about suicide or harming yourself. If you are worried about any thoughts or feelings you have, see your doctor straight away.

Further informations:

Self help for shingles

Shingles can be very uncomfortable. Here are some things you can do to make yourself more comfortable during an attack.

- Simple painkillers, like paracetamol, may help if you have pain
- Wearing cool, loose cotton clothing may stop your skin getting irritated
- Cooling the rash, by using an ice pack or taking a cool bath, may help soothe the irritation
- Calamine lotion may soothe itching and pain.

If you still have pain, despite taking simple painkillers like paracetamol, ask your pharmacist or doctor for help. They may be able to recommend a stronger painkiller.

Glossary:

viruses
Viruses are microbes (tiny organisms) that need the cells of humans or other animals to exist. They use the machinery of cells to reproduce. Then they spread to other cells in the body.

immune system
Your immune system is made up of the parts of your body that fight infection. When bacteria or viruses get into your body, it's your immune system that kills them. Antibodies and white blood cells are part of your immune system. They travel in your blood and attack bacteria, viruses and other things that could damage your body.

**HIV**

HIV stands for human immunodeficiency virus. It's the virus that causes AIDS. It makes you ill by damaging cells called CD4 cells. Your body needs these cells to fight infections. You can get HIV by sharing needles for injecting drugs, or by having sex without a condom with someone who has the virus.

**antibodies**

Antibodies are an important part of your immune system. They are proteins made by white blood cells (another part of your immune system). They help destroy bacteria and other agents that cause infections.

**leukaemia**

Leukaemia is a type of cancer that affects your body's production of white blood cells. White blood cells are important for fighting infections. So, if you have leukaemia, you are more likely to catch an infectious disease.

**AIDS**

AIDS stands for acquired immunodeficiency syndrome. People who are infected with the human immunodeficiency virus (HIV) get AIDS when the virus has destroyed most of their immune system. When people have AIDS, their body isn't able to fight infections. So even common infections, such as colds, can cause serious problems.

**tuberculosis**

Tuberculosis (also known as TB) is an infection caused by certain bacteria. The most common type of tuberculosis affects your lungs. This can give cause chest pain, tiredness and a severe cough.

**placebo**

A placebo is a 'pretend' or dummy treatment that contains no active substances. A placebo is often given to half the people taking part in medical research trials, for comparison with the 'real' treatment. It is made to look and taste identical to the drug treatment being tested, so that people in the studies do not know if they are getting the placebo or the 'real' treatment. Researchers often talk about the 'placebo effect'. This is where patients feel better after having a placebo treatment because they expect to feel better. Tests may indicate that they actually are better. In the same way, people can also get side effects after having a placebo treatment. Drug treatments can also have a 'placebo effect'. This is why, to get a true picture of how well a drug works, it is important to compare it against a placebo treatment.

**systematic reviews**

A systematic review is a thorough look through published research on a particular topic. Only studies that have been carried out to a high standard are included. A systematic review may or may not include a meta-analysis, which is when the results from individual studies are put together.

**inflammation**

Inflammation is when your skin or some other part of your body becomes red, swollen, hot, and sore. Inflammation happens because your body is trying to protect you from germs, from something that's in your body and could harm you (like a splinter) or from things that cause allergies (these things are called allergens). Inflammation is one of the ways in which your body heals an infection or an injury.

**antidepressant**

Antidepressants are medicines used to treat depression and sometimes other conditions. They work by changing the levels of chemicals in your brain called neurotransmitters. There are three main types of antidepressants, which work in different ways: selective serotonin reuptake inhibitors (SSRIs), monoamine oxidase inhibitors (MAOIs) and tricyclic antidepressants (TCAs).

**Epilepsy**

Epilepsy is a condition that affects your brain. If you have epilepsy, the normal electrical activity in your brain gets disturbed from time to time. This leads to seizures (also called fits).

**liver**

Your liver is on the right side of your body, just below your ribcage. Your liver does several things in your body, including processing and storing nutrients from food, and breaking down chemicals, such as alcohol.

**Sources for the information on this leaflet:**


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