

Shingles

What's in this patient handout?

- An overview of shingles
- Potential triggers and risk factors
- Signs and symptoms
- Complications
- Holistic treatment aims
- Nutritional recommendations
- Herbal recommendations
- Diet & lifestyle recommendations

An overview of Shingles

Shingles (also known as herpes zoster) is a painful rash caused by the reactivation of the varicella-zoster virus (VZV) (the same virus that causes chickenpox).

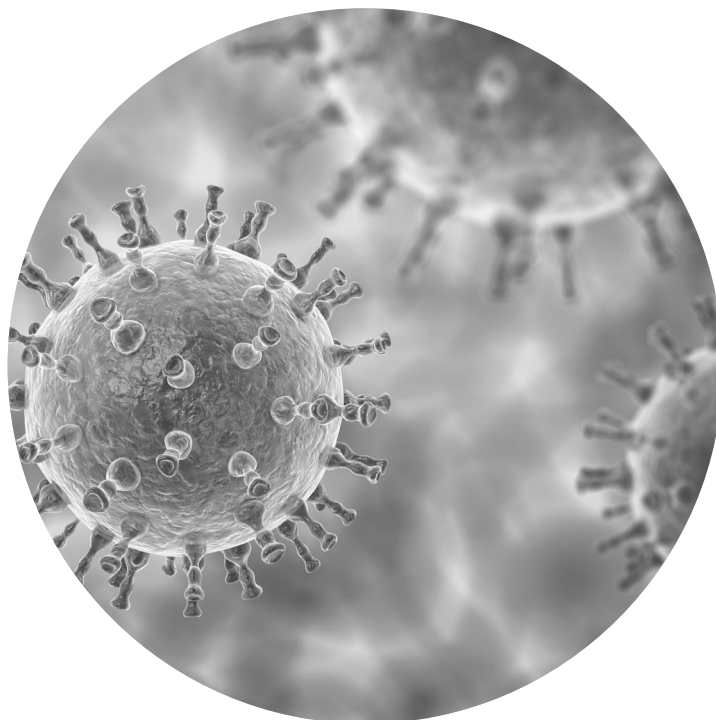
After a person has had chickenpox, the inactive (dormant) virus continues to reside in the body in nerve tissue near the brain and spinal cord. However, under certain conditions, the virus can reactivate many years later and travel down the nerve fibres to the skin, creating painful blisters resembling chickenpox.

This outbreak of blisters (shingles) typically appears on a strip of the skin over the infected nerve fibres (called a dermatome) and only on one side of the body. Less commonly, the rash can be more widespread and affect three or more dermatomes. This condition is called disseminated zoster.

Shingles can affect people of all ages. One in three people will develop shingles in their lifetime. The risk of shingles increases with age and is most common in those aged 50 and older. People who are immunocompromised are also at increased risk. Approximately one in three people will have more than one outbreak of shingles in their lifetime.

Conventional treatments for shingles include antiviral medications, which are most effective when started within 48 hours of the rash appearing. These antivirals can help relieve symptoms and help them resolve sooner, but pain relief medications are often needed. Two shingles vaccines are available and are recommended for adults over 60 years or individuals with compromised immune systems.

It is not possible to catch shingles from another person. However, if an adult or child has direct contact with the shingles rash and has not had chickenpox (or chickenpox vaccine), they can develop chicken pox, not shingles.



Potential triggers and risk factors

- Previous exposure to varicella zoster virus (i.e. chickenpox)
- Age (50 years)
- Immune-suppressing medications, including steroids, chemotherapy and those used to prevent rejection after an organ transplant
- Compromised immunity from cancer, HIV/AIDS or other diseases
- Surgery or any trauma to the spinal cord
- Prolonged emotional and mental stress.

Signs and symptoms

- Pain is typically the first symptom, and can be localised tingling, burning, stabbing, or itching in a strip of skin (a dermatome) on one side of the body.
- Within 72 hours of pain onset, crops of red lesions appear and develop into small fluid-filled blisters, which continue to form for about three to five days. These blisters are contagious until they dry and form a scab.
- The shingles rash most commonly affects the trunk (chest, abdomen and back) but can develop on almost any part of the body. The rash may involve the face, eyes, mouth, and ears.
- Other symptoms may include fatigue, fever, headache, light sensitivity, joint pain, and swollen glands.
- Some patients with shingles have pain with no rash, known as zoster sine herpette. This pain can be misdiagnosed as migraine, appendicitis, dental pain or other pain conditions.

Complications

- **Post-herpetic neuralgia (PHN)** – is the most common complication (about 30% of cases) and is nerve pain that persists in the area where the rash once was for more than 90 days after rash onset. PHN can last for weeks or months, and occasionally, for years.
- **Eye complications** – occur in 10 – 25% of cases when the shingles rash affects the eye or surrounding skin. This infection can cause eye inflammation (herpes zoster ophthalmicus) and impair vision.
- **Ear complications** – shingles may affect the nerve that leads to the ear. This infection (herpes zoster oticus or Ramsey Hunt syndrome) can cause ear pain, blisters in the ear canal, partial paralysis of the face, hearing loss, tinnitus and vertigo.
- **Skin infection** – in rare cases, the blisters can become infected by bacteria, which increases the risk of scarring.
- **Cardiac complications** – HZV can cause inflammation of the blood vessels, increasing the risk of clotting, stroke and heart attack.

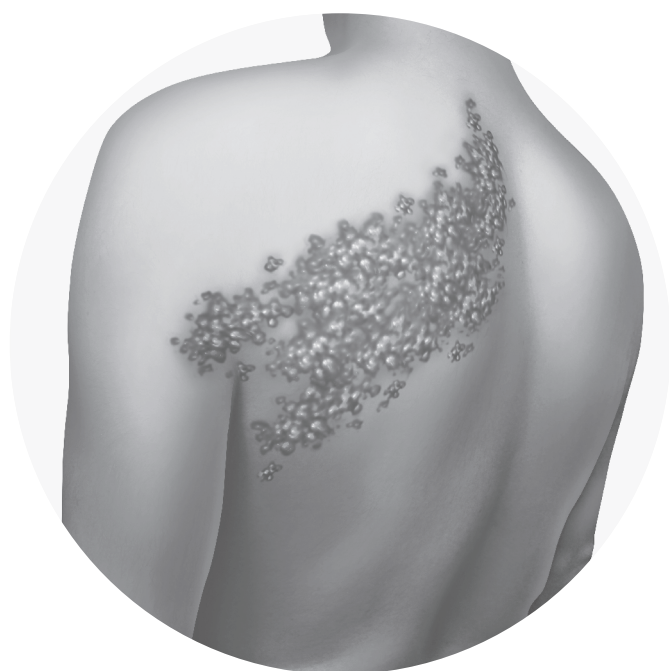
Holistic treatment aims

Short term:

- Reduce viral replication, support immune system defenses and surveillance, support the nervous system, and provide symptom relief.

Long term:

- Enhance immune function, address nutritional deficiencies, and support the nervous system to prevent a recurrence.
- Address PHN – reduce inflammation/neuroinflammation, support nerve function, and provide symptom relief.



Nutritional recommendations

Please consult your health professional for the prescription of herbal and nutritional remedies.

Vitamin C

- Antioxidant and critical nutrient for immune support.
- Supplementation may help reduce pain and skin manifestations of shingles and prevent the development of post-herpetic nerve pain.

Vitamin D

- Deficiency is associated with the severity and duration of nerve pain and higher HZ viral load.
- May increase VZV immunity, reduce the odds of developing shingles and reduce the severity of post-herpetic nerve pain.

Vitamin B12

- Plays an important role in nerve function and maintaining the myelin sheath (fatty tissue that surrounds and protects nerve cells).

Zinc

- Has antiviral effects against VZV.
- Supports immune function and promotes wound healing.

L-lysine

- Acts as an antiviral through competing with arginine within the viral replicating process. Lysine inhibits replication, whereas arginine promotes replication.
- Combining 1 – 3 g/day of supplemental l-lysine with a low-arginine diet may improve symptoms and reduce the recurrence of herpes simplex outbreaks.
- May be beneficial for shingles, although studies are lacking.

Palmitoylethanolamide (PEA)

- Anti-inflammatory, analgesic, and neuroprotective effects.
- Oral and topical applications may reduce shingles-induced nerve pain.

Essential fatty acids

- Anti-inflammatory and aid in regulating the immune system.
- May reduce post-herpetic nerve pain.

Herbal recommendations

Please only commence nutritional and herbal therapies postacute concussion and after clearance from GP.

Oral	<p><i>Ganoderma lucidum</i> (Reishi mushroom)</p> <ul style="list-style-type: none"> • A medicinal mushroom that has antiviral and immune modulating properties. • May reduce pain and decrease duration of symptoms when used alone or in combination with other herbs.
	<p><i>Echinacea spp.</i></p> <ul style="list-style-type: none"> • Immune modulating herb with anti-viral effects against some herpes viruses. • May support immune response to enhance viral clearance and may prevent reactivation of latent VZV.
	<p><i>Passiflora incarnata</i> (Passionflower)</p> <ul style="list-style-type: none"> • Has antiviral activities against several herpes viruses including VZV. • May reduce nerve pain associated with shingles.
Oral & Topical	<p><i>Curcuma longa</i> (Turmeric)</p> <ul style="list-style-type: none"> • Anti-inflammatory, antioxidant, antiseptic and antiviral herb. • The bioactive component, curcumin, can inhibit replication of several herpes viruses. • Can be taken orally and applied topically to relieve itching and promote healing.
	<p><i>Melissa officinalis</i> (lemon balm)</p> <ul style="list-style-type: none"> • Extracts possess a variety of antiviral activities against several herpes viruses. • Topical ointments or preparations may shorten healing time, prevent spread of infection, and shorten resolution time of symptoms such as itching, burning, and redness.
	<p><i>Hypericum perforatum</i> (St John's wort)</p> <ul style="list-style-type: none"> • Possesses anti-inflammatory, anti-bacterial, pain relieving and wound healing properties. • Extracts possess a variety of antiviral activities against several herpes viruses. • Both oral and topical applications may improve nerve pain.
	<p><i>Glycyrrhiza glabra</i> (Licorice)</p> <ul style="list-style-type: none"> • Anti-inflammatory and antiviral herb. Glycyrrhizin, an active component, can inhibit replication of herpes viruses, including VZV, and may relieve shingles pain. • Topical application may aid with healing ulcers and reduce post-herpetic nerve pain.
Topical	<p><i>Capsicum frutescens</i> (Cayenne pepper)</p> <ul style="list-style-type: none"> • The active ingredient capsaicin is a topical anaesthetic which may reduce post-herpetic pain. • Note that capsaicin cream causes side effects (burning, stinging and skin redness). The burning sensation decreases with continued use.
	<p><i>Melaleuca alternifolia</i> (tea tree oil)</p> <ul style="list-style-type: none"> • Has anti-inflammatory, antiviral and antimicrobial properties and can promote wound healing. • Tea tree oil should not be ingested. It can cause an allergic reaction in some people and a test patch is advised before widespread topical application.
	<p><i>Calendula officinalis</i> (calendula)</p> <ul style="list-style-type: none"> • Has anti-inflammatory, antimicrobial and wound healing properties. • Calendula ointment may relieve pain and itching and promote healing of shingles ulcers.



Diet & lifestyle recommendations

Dietary inclusions

- Although more research is necessary to determine whether lysine helps treat shingles, it may help strengthen the immune system, which can help the body protect itself against viruses, such as the VZ virus. Foods rich in lysine include fruit and vegetables (especially avocado, tomatoes, mango's, apricots, pears, apples, figs, papaya, red capsicums and beetroot), legumes, dairy products (milk, cheese, yogurt), eggs, fish, chicken, sprouts.
- Include a variety of fresh, whole foods to boost the intake of nutrients essential for immune function (zinc, vitamins A, C, and D).
- Include foods rich in vitamin B12: fish, poultry, eggs, fortified breakfast cereals and nutritional yeasts.
- Increase the supply of omega-3 polyunsaturated fatty acids (especially DHA and EPA). Marine fish are the best source.
- Drink at least 8 cups of fluid daily, preferably water or herbal teas.

Dietary exclusions

- Limit foods that promote inflammation and suppress immune function. These include foods high in saturated fat and sugar, refined/processed foods, and alcohol.
- Avoid arginine-rich foods, including chocolate, nuts, seeds, oats, wheat, gelatine, soybeans, and tofu.

Stress reduction

- Yoga, tai chi, deep breathing, vagal nerve stimulation, counselling/psychology and ensuring adequate sleep.

Acupuncture

- Can help to relieve acute shingles pain and post-herpetic nerve pain.

Topical symptom relief

- Cool baths and the application of cool, wet compresses on the blisters can relieve itching, inflammation, and pain.
- Oatmeal baths can reduce inflammation and itching. Pour 1 to 2 cups of colloidal (crushed) oatmeal into lukewarm bathwater and soak for 15 to 20 minutes.

Disclaimer: This is not an all-inclusive comprehensive list of information. Consult a qualified healthcare provider before starting any therapy. Application of clinical judgement is necessary.

Seek Medical Care

Treatment recommendations should be carried out concomitant to, and not replace medical treatment. Please consult your medical doctor for advice with compatibility of nutritional/herbal recommendation and any medicine you take.