



island health

## Shingles (Herpes Zoster)

### What is Varicella Zoster Virus (VZV)?

- VZV is a virus that causes shingles (also called herpes zoster)
- After a primary infection with chickenpox, the virus is not eliminated from the body, but lies dormant in the nervous system. It can be reactivated later in life and then present as shingles

### Shingles can be spread:

- By **direct contact** with blister fluid
- **Indirectly** through contact with items soiled by fluids from the blisters
- If oro-facial (trigeminal), **disseminated** shingles or compromised host: through **airborne** spread from respiratory secretions

**Disseminated herpes zoster** is one of the most severe complications of shingles. It can occur in patients with poor immune function. The disease spreads to include more than one dermatome. Disseminated herpes zoster is defined as 20 skin lesions that develop separately outside of the affected dermatome

***Did You Know...*** There is now a vaccine available to prevent infection with chickenpox and another vaccine to prevent re-activation of the virus later in life (Shingles). Talk to your doctor, Occupational Health Nurse or local Public Health Nurse to find out more.

Island Health: Infection Prevention & Control (IPAC)

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### Shingles (Herpes Zoster) - Reactivated Infection with VZV:

- Advancing age, stress and other immune-compromising conditions can cause reactivation of the virus in the body and results in shingles, also called herpes zoster
- Shingles only occurs in people who have previously had chickenpox
- When the virus reactivates, it causes painful blisters, on the skin along nerve paths. The nerve paths are called dermatomes. Normal shingles (not disseminated) tends to be isolated to one side of the body or face on a single nerve
- There may be intense pain and numbness along the involved dermatome several days prior to eruption of blisters
- Virus is present in the vesicle (blister) fluid until the blisters have dried and crusted over
- Respiratory secretions are not a source of infection except in those with oro-facial (trigeminal) or disseminated disease



## Additional Precautions For Shingles:

- If the blisters are isolated to a single dermatome place patient on **CONTACT Precautions**
- CONTACT Precautions can be discontinued when all the blisters are dry and crusted

## Additional Precautions for oro-facial (trigeminal), disseminated shingles or localised VZV in a compromised host:

- Maintain both **AIRBORNE and CONTACT precautions** until all the lesions are dry and crusted
- Place the patient in an **Airborne Isolation room with negative pressure**
- When outside of the room for tests or transfers, the patient will wear a surgical grade (120mm Hg) fluid resistant mask (without visor), if their respiratory status permits
- Talk to Infection Control before removing precautions as some patients may be infectious for longer periods

**DERMATOME:** an area of skin that is mainly supplied by a single spinal nerve. There are 8 cervical nerves (C1 being an exception with no dermatome), 12 thoracic nerves, 5 lumbar nerves and 5 sacral nerves. Each of these nerves relays sensation (including pain) from a particular region of skin to the brain.

[https://en.wikipedia.org/wiki/Dermatome\\_\(anatomy\)](https://en.wikipedia.org/wiki/Dermatome_(anatomy))

