Shingles Vaccine

I heard there is a shot for shingles. Who, when and how often should you get it?

Yes, there is a shot (vaccine or immunization) for shingles. It is a good idea for most people over the age of 60 to get it. You only need one dose. Since shingles can come back, you should get the vaccine even if you had shingles before. You should NOT get it if you have cancer of the blood (leukemia or lymphoma) or HIV/ AIDS, or if you are on medications that will weaken the immune system, such as high doses of prednisone. Since the vaccine is manufactured using gelatin and an antibiotic called neomycin, you should not get it if you are allergic to those things.

Do you need it if you had chickenpox? Do you need it if you didn’t have chickenpox?

It does not make any difference if you remember having chickenpox before. Since the chickenpox virus is very infectious, we assume that people born before 1980 have been infected, even if they did not have symptoms. If you are one of the odd people who was never infected, you won’t get shingles, but it would not harm you to take the shingles vaccine.

Does the shingles vaccine work?

People who get the vaccine are half as likely to get shingles as those who don’t. If they do get shingles, the people who get the vaccine tend to have less pain. Most importantly, people who get the vaccine are only one third as likely to get postherpetic neuralgia—the complication where people who once had shingles keep on having pain for many months or even years.

How does the shingles vaccine work?

Shingles is a reactivation of the virus that causes chickenpox. After an initial infection with chickenpox, the body's immune system will fight off the virus, and the rash and other symptoms will usually go away after a couple of weeks. Some of the virus can remain inside the body, laying dormant in one of the nerves of the skin. With aging there is a weakening of the immune system, and the virus can act up again. This time, the rash is usually limited to the skin over the infected nerve. In addition to the rash, there is also a lot of nerve irritation which causes severe pain. People age 60 and older are at an increased risk for developing shingles.

The shingles vaccine is a one-time shot of a weak form of the virus which will help your body keep up protection against the virus returning. In a person with a normal immune system the vaccine is safe and effective, but since it is a live virus vaccine it is not given to people with a defective immune systems (such as people with cancer of the blood, HIV/ AIDS, or who are on medications that will weaken the immune system). Scientists worry it might make such people sick, since they would not be able to fight off even the weak virus in the vaccine. So far, this has not happened, but we worry about it for those few, very sick people.

If you get the chickenpox vaccine, will you still need the shingles vaccine when you are 60?

We will eventually have to figure out what to do with the people who are getting the chickenpox vaccine nowadays, but for now we just don’t know.

Signs and Symptoms of Shingles

Shingles usually begins with unusual sensations such as itching, burning, or tingling in an area of skin on one side of the body. Some people develop a fever, a generalized feeling of being unwell, or a headache. Within one to two days, a rash of blisters appears on one side of the body in a band-like pattern.
The trunk (chest, upper, or lower back) is usually affected by the shingles rash. The rash can also occur on the face; a rash appearing near the eye can permanently affect a person's vision.

The pain of shingles can be mild or severe. It usually has a sharp, stabbing, or burning quality. Pain may begin several days before the rash. Pain is limited to the skin affected by the rash, but it can be severe enough to interfere with daily activities and sleep. Pain is often worse in older adults compared to younger individuals.

Within three to four days, the shingles blisters can become open sores or "ulcers." These ulcers can sometimes become infected with bacteria. In individuals with a healthy immune system, the sores crust over and are no longer infectious by day 7 to 10, and the rash generally disappears within three to four weeks. Scarring and changes in skin color may persist long after shingles has resolved.

In most individuals, shingles runs its course without any lasting health problems. However, the condition can be associated with complications, which are more likely in older adults. Overall, complications occur in about one in eight people who have shingles. Complications may include:

**Postherpetic neuralgia (PHN).** This is the most common complication of shingles. It causes mild to severe pain or unpleasant sensations and is often described as "burning." PHN affects one in ten patients, with about half of these cases in individuals older than 60 years. In most patients, the pain gradually improves over time. Some patients continue to have pain for months to years. This pain can be so severe that it causes difficulty sleeping, weight loss, depression, and interferes with normal daily activities. Several treatments can help PHN, but they don't work all that well.

**Skin infection.** The sores of shingles can become infected with bacteria, and this can delay healing. This complication occurs in about 2 percent of individuals.

**Eye complications.** Eye complications occur in about 2 percent of individuals. Eye complications are much more likely to occur when the shingles rash occurs around the eye. These complications are serious and can lead to vision loss.

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**Pneumococcal Vaccine (Pneumovax®)**

**Who, when and how often should you get the pneumonia shot?**

All healthy adults should receive it when they turn 65 years old. If you are healthy and get the vaccine after the age 65, you only need one dose. If you are over 65 but never got it, you should go ahead and get it now.

Adults ages 19-64 years old and at high risk due to medical problems such as diabetes, sickle cell, kidney disease, heart disease or lung disease should receive this vaccine now. Such people require a booster when they turn 65 if they were younger than 65 years when they received the first vaccine (for example, a diabetic who was immunized as a young adult should receive a booster after he/she reaches 65 years of age). But they should wait 5 years between vaccinations. People with a very weak immune system (for example, from AIDS or certain forms of cancer) should receive a booster after 5 years, without waiting until they turn 65.

**Does the pneumonia vaccine work?**

The vaccine is made using portions of the bacteria which help the immune system to make protective antibodies. This vaccine is effective at reducing complications in patients hospitalized with pneumonia due to these bacteria. People who get the vaccine have only one quarter the chance of getting these bacteria in their blood, which is the type of infection that is most likely to kill you. It is important to know that the vaccine does not completely prevent pneumonia; it just makes it less serious.

**Is it needed after the age of 65?**

If you are healthy and have received the immunization after the age 65, you only need that one dose. High-risk people—who should have received a dose when they were younger than 65 years—need a booster when they reach 65 years of age. But they should wait 5 years between doses.