One shingles shot can prevent future pain

ike the roofer paced uncomfortably and in obvious pain, holding his shirt delicately pinched between thumb and index finger, pulling it away from his flank. I noticed a line of scattered, fluid-filled blisters and scabs that traced the contour of his lowest rib.

"It's the shingles," I said. "Not shingles in your line of work. The shingles, as in a virus causing the pain and blisters. It affects baby boomers, like you." Although the blisters scabbed over several days, Mike complained of pain "like a constant toothache" that would torment him for the next three years. The pain was worse than when he passed a kidney stone. He was restless, lost his appetite, couldn't sleep. Prescription painkillers barely helped and made him so woozy and constipated he stopped them. He became depressed and avoided socializing. The pain dominated his existence.

Mike had a Varicella Herpes Zoster virus infection, which afflicts one in four people over their lifetime. The risk rises for baby boomers, eventually affecting half of us as we age. One in five



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with shingles develops the condition Mike had, called post-herpetic neuralgia. This disorder follows a flare of Zoster, the same virus that causes chickenpox. After chickenpox, for unclear reasons, the virus "hides" in the nerves that branch beneath the skin of the face, chest, trunk, abdomen, groin and buttocks.

The virus is dormant for decades, provided a person's "cell-mediated immunity" is active and keeps it in check. Unfortunately, as we age, our cell-mediated immunity may sputter. When that happens, the virus inside the nerve roots activates. The nerve becomes inflamed and the virus escapes the nerve along its length, sprouting through the skin, producing virus-filled blisters that eventually pop and scab.

In the Middle Ages the infection was called "the shingles" from the Latin cingulum, which means "belt" or "gar-

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FIND OUT MORE

For more about the Zoster vaccine: www.cdc.gov/shingles/vaccination.html.
To view a video of Dr. Ricardo Jose Gonzalez-Rothi discussing shingles, got to http://goo.ql/7k5c4.

ter," because of the way the lesions wrap around the body. Left unchecked in people with weakened immunity, Zoster may be lethal, spreading to the lungs or damaging vision if nerves near the eye are affected. Acute shingles causes pain that may resolve after weeks or months. With post-herpetic neuralgia, though, persistently irritated nerves cause throbbing pain for months, even years. It has been cited as the No. 2 suicide

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trigger among the elderly.

Had Mike known about the vaccine he might have avoided Zoster altogether and the misery of post-herpetic neuralgia. Although valcyclovir, prednisone and narcotic analgesics can be prescribed once the infection arises, those therapies don't work well in preventing progression to postherpetic neuralgia. The Zoster vaccine is made of an attenuated (weakened) live virus. It has been studied extensively and found to

be safe and highly effective in preventing disseminated Zoster infection as well as the shingles. The vaccine "jolts" immune memory and enhances vigilance against Zoster reactivating in the nerve roots, thus markedly reducing the chances of post-herpetic neuralgia.

The vaccine is approved by the FDA for people older than 50. It costs about \$220 and is covered by Medicare D and many private insurers. Even if your insurance might not cover the cost, consider that you'd be spending less than what you pay for a cup of coffee a day for one year to protect and possibly spare you from Mike's misery.

Ask your physician about the Zoster (shingles) vaccine. If you've already had the shingles, the vaccine could protect against recurrence in another spot. It's not recommended for people whose immune response is weakened. Oh, and for those public-health-costconscious baby boomers out there: If the vaccine were administered to 1 million of you, modeling estimates would translate to medical savings of as much as \$100 million!

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