

A CUP OF HEALTH WITH CDC

Stopping Shingles

Recommendations of the Advisory Committee on Immunization Practices for Use of Herpes Zoster Vaccines Recorded: January 23, 2018; posted: January 25, 2018

[Announcer] This program is presented by the Centers for Disease Control and Prevention.

[Dr. Kathleen Dooling] Welcome to *A Cup of Health with CDC*, a weekly feature of the *MMWR*, the Morbidity and Mortality Weekly Report. I'm your host, Dr. Kathleen Dooling.

Shingles, also known as herpes zoster, is a disease characterized by a painful skin rash, with blisters usually occurring on one side of the body. Each year, approximately one million people in the U.S. get the disease.

Dr. Mark Pallansch is with CDC's National Center for Immunization and Respiratory Diseases. He's joining us today to discuss a newly approved vaccine to prevent shingles. Welcome to the show, Mark

[Dr. Pallansch] It's good to be here, Kathleen.

[Dr. Dooling] Mark, how common is shingles in the U.S.?

[Dr. Pallansch] The short answer is very common. Our risk of getting shingles increases as we age. If you're in your fifties, your risk of getting shingles is about one in 200 in any given year. If you're in your eighties, the risk of getting shingles is more like one in a hundred. In fact, one in three people will get shingles at some point in their life. That amounts to about one million cases every year in the U.S.

[Dr. Dooling] What causes shingles?

[Dr. Pallansch] A virus called the varicella zoster virus causes shingles. Most adults in the U.S. were exposed to that virus as children and got chicken pox. The virus stays dormant in our bodies, and for reasons we don't fully understand, will reactivate, or wake up, and cause shingles.

[Dr. Dooling] What health complications can result from shingles?

[Dr. Pallansch] The most common serious complication following shingles is called postherpetic neuralgia. That's when pain persists for months to years after the shingles rash goes away. The pain can be so severe that it prevents people from doing everyday activities. Other, more rare, complications include blindness, if shingles occurs near the eye, or skin infections involving the rash.

[Dr. Dooling] How can shingles be prevented?

[Dr. Pallansch] The best way to prevent shingles is to get vaccinated. There are two vaccines currently recommended: Zostavax and Shingrix. Shingrix is a newly available vaccine that was found to be safe and very effective in large clinical trials. It is over 90 percent effective at preventing shingles, even among elderly people who often don't respond as well to vaccines. That protection remains high for at least four years and protection appears to remain stronger for a longer time. In fact, Shingrix is now the preferred shingles vaccine for adults 50 and older.

[Dr. Dooling] If a person has already received the old vaccine, should they get the new one?

[Dr. Pallansch] Yes. People who already got Zostavax should get Shingrix. Talk with your doctor about when to get Shingrix. Unlike Zostavax, which only requires one dose, Shingrix requires two doses, two to six months apart. You're likely to get temporary side effects, like pain and redness, where you got the shot, and you may experience headache, muscle aches, or other general symptoms. For most people, these symptoms get better in two to three days.

[Dr. Dooling] Where can listeners get more information about the shingles vaccine?

[Dr. Pallansch] Listeners can go to cdc.gov/shingles.

[Dr. Dooling] Thanks, Mark. I've been talking today with Dr. Mark Pallansch about shingles and the new shingles vaccine, Shingrix. Shingrix is highly effective, even among the elderly. If you're 50 or older, ask your health care provider about getting vaccinated against shingles.

Until next time, be well. This is Dr. Kathleen Dooling for A Cup of Health with CDC.

[Announcer] For the most accurate health information, visit <u>cdc.gov</u> or call 1-800-CDC-INFO.