

Shingles

Overview: Shingles is an infection of an individual nerve root by the same virus that causes chicken pox, also known as the herpes zoster virus. The disease can be painful and can develop almost anywhere in the body, but is most commonly displayed on the face, chest and abdomen.

A day or two after the pain begins; a characteristic rash erupts, which is composed of small fluid-filled blisters on top of reddened skin. The blisters are limited to a band on the right or left side of the body. If the rash crosses over the middle of the body it is not shingles because the virus affects one nerve corresponding to an area of the skin. Each cutaneous or skin nerve in the human body stays on the right or left side and does not cross over. Initial infection of the shingles virus occurs when chicken pox is contracted as children or young adults. The body's immune system forces the virus to settle in an inactive form inside the nerve cells. When the chicken pox virus reactivates, it moves down the nerve fibers to the skin and the rash erupts. In addition to the skin, the nervous system is involved. In fact, if the virus attacks the optic nerve of the eye, it may leave the patient with temporary blindness.

In most patients, after the eruption of shingles, the rash will heal and the pain will subside after a period of three to five weeks. However, there are exceptions. In older patients there is a greater risk the virus can actually leave permanent nerve damage, causing pain long after the rash is healed. In some patients, the pain may persist for the rest of their lives.

Treatment: Medical science is now developing antiviral drugs. These are similar to antibiotics that were developed in the 1950's to treat bacterial infections. One of the first antiviral drugs developed was acyclovir. This drug can help resolve herpes infections. As soon as the rash breaks out, acyclovir is prescribed in large doses for a period of approximately 10 days. This can help alleviate the attack and prevent permanent nerve damage in some patients.

Additionally, early intervention with nerve blocks done by pain physicians can also prevent the development of post-herpetic neuralgia. Post-herpetic neuralgia is the name given to the painful condition that exists long after the viral infection is over. Combination therapy of the acyclovir and nerve blocks is the most effective treatment strategy for preventing this painful development.

There is treatment for patients suffering from post-herpetic neuralgia. Drugs used to treat seizures, such as Tegretol and Dilantin, can be of some help. Antidepressants are used to treat post-herpetic neuralgia as well. The antidepressants raise levels of chemicals in our brain that are the body's natural mood elevators. These mood elevators also raise levels of endorphins in the brain, which are the body's natural narcotics. Consequently, by taking antidepressants, we can elevate the body's internal narcotics without having to rely on narcotics prescribed by the doctor. Therefore, antidepressants are superior to narcotics because dependence can develop in narcotics.

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