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On the alert for shingles ; Doctors say knowing about the disease is key to prevention and treatment.

[FINAL Edition]

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First photo ran on page E1. Darryl E. Owens can be reached at dowens@orlandosentinel.com or 407-420-5095.

In his dermatology practice, Dr. Matt Leavitt regularly sees the aftermath of a childhood illness return to assault his senior patients. Each year an estimated 1 million Americans are afflicted anew by the virus that causes chickenpox, but this time it appears in the guise of a chronic, painful infection of the nerves called herpes zoster, or shingles.

Though shingles can attack at any age, up to half of all cases involve those 60 and older, and that number is poised to explode as baby boomers near retirement.

"The longer somebody lives, the greater the opportunity they have to get shingles," says Leavitt, founder of Advanced Dermatology and Cosmetic Surgery in The Villages. In his multi-office practice, the majority of patients "we see are people 60 and older, and the number one thing they come in with is severe pain or burning and itching. The numbers are actually increasing."

But awareness isn't. A recent national survey of older Americans by the American Pain Foundation found that many were uninformed of their risk for shingles. That prompted the foundation to launch a national education program, "Spotlight on Shingles: Know what you can do."

"What seniors who have had chickenpox need to do is to talk to their doctors about their risk for shingles," says Dr. Stephen Tyring, a professor at the University of Texas Health Science Center in Houston who collaborated on the SOS campaign.

Easy-to-miss diagnosis

By age 30, most Americans have crossed paths with calamine lotion and chickenpox, notes the Harvard Medical School Family Health Guide. After that introduction, the virus varicella-zoster takes up quiet residence in the spinal nerve, usually never to be heard from again.

But as Americans age, their immune systems weaken, leaving them more susceptible. Sometimes the virus snaps out of hibernation, and the attack begins with a burning, itching, sharp painful sensation near the skin's surface.

"As there is no rash at that time, the diagnosis can be missed," says Dr. Richard N. Greenberg, a professor of medicine at the University of Kentucky School of Medicine. "Only an alert health-care provider may recognize that the pain is the `aura' of shingles."

Blisters usually erupt two to five days later, confined to one side of the body, often on the face, the extremities or ribs, but never crossing the midline of the body.

"A distinguishing characteristic of shingles is that it's one of very few skin rashes that actually hurts," says Dr. Michael J. Bond, a dermatologist with Advanced Dermatology and Cosmetic Surgery. "Other rashes itch, but shingles is actually true pain."

Because the blisters aren't immediately present, Bond says "anybody with a painful rash -- whether it's nothing visible or a little pink patch that's painful -- needs to come in immediately."

The virus can spread through direct contact while the blisters are active. Anti-viral drugs can reduce the severity of the outbreak. Within a month, the rash usually fades, and recurrences are rare.

An ounce of prevention

Pain triggered by the slightest breeze or brush of clothing can persist at the site of the rash for weeks after onset. More common in victims older than 60, this pain is treated with a medley of prescription antidepressants, anti-convulsants and painkillers, says Dr. Jordana S. Gilman, an assistant clinical instructor of dermatology at Mt. Sinai Medical Center in New York.

But Leavitt says prevention beats treatment, and suggests seniors consider zostavax (pronounced ZOS tah vax), the vaccine for adults 60 and older to help prevent shingles and its residual pain.

The vaccination doesn't treat shingles or its complications, but Leavitt is bullish on its benefits. "From the standpoint of the senior population," he says, "it's a lot better trying to prevent it [shingles] than treat it. There's no real panacea. The only home-run is the vaccine."

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Abstract (Document Summary)

SHINGLES Physicians, such as Dr. [Michael J. Bond], work to inform seniors about the disease. STEPHEN M. DOWELL/ORLANDO SENTINEL Dr. Michael Bond holds medications used in the treatment of herpes zoster, commonly known as shingles, a disease that affects mostly seniors. STEPHEN M. DOWELL/ORLANDO SENTINEL . BOX: Learn more For information about shingles or the "Spotlight on Shingles: Know what you can do" program, go to spotlightonshingles.com. You can download a free brochure on the Web site or request it by calling 1- 877-747-5474.

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