



Health Awareness

Shingles: Can You Recognize the Virus?



(NAPSA)—Imagine this: You suddenly experience a tingling feeling or itchiness that may be accompanied by stabbing or aching pain in one isolated area of your body. A week later, while the pain persists, a blistering rash appears in the same area as the pain on one side of your face, or abdomen, or one arm or leg. Would you know what was happening? Would you ever guess you might have herpes zoster, a painful viral infection more commonly known as shingles? If you're like most adults age 55 and older, the answer to both questions is “probably not.”

Results of a new international survey show that most adults are aware of shingles, but do not fully understand the symptoms, who is most at risk for contracting it, or the potential impact on their overall health. The *International Shingles Awareness Survey*, commissioned by the International Federation on Ageing (IFA) through an educational grant from Novartis Pharma AG, shed light on the need for ongoing education about shingles, especially among the most at-risk populations—individuals over 50 previously infected with chicken pox during childhood.

The survey, which queried people age 55 and older, across six countries (Australia, Canada, Italy, Spain, United Kingdom and

the United States), suggests that despite high awareness of the condition, general understanding of shingles tends to be superficial. Ninety-one percent of all survey respondents internationally were aware of shingles, but most of these respondents admitted to knowing little or nothing about the condition. Only 21 percent of respondents were able to identify key risk factors, such as having had chicken pox as a child, for developing shingles. Even more surprising is that more than 50 percent of respondents did not consider themselves at risk for developing shingles despite having had chicken pox.

“The results of this survey are particularly important for the older population around the world because research shows that shingles can pose health risks,” said Dr. Jane Barratt, secretary general, of the International Federation on Ageing. “Older people are already more susceptible to health complications and this is one condition we can treat in many patients. Fortunately, this survey gives us insight into the type of programs needed to educate at-risk populations and their health care providers about shingles.”

Despite the availability of prescription treatments, more than half of respondents aware of the condition did not think there were drugs available to treat shingles.

The survey also revealed that among the respondents aware of treatments for shingles, many believe that the use of these drugs is to treat the symptoms of shingles and not to shorten the duration of postherpetic neuralgia (PHN), which is the pain following rash healing.

“Working with my doctor, I was glad to find a treatment that helped shorten the duration of PHN, for me,” said Vernon Ophus.

“Early diagnosis and treatment of shingles is very important for adults over 50,” said Dr. Myron Levin, University of Colorado, United States. “Treating the condition may reduce the length of the outbreak as well as the duration of PHN. It’s unfortunate that people aren’t aware of the availability of oral anti-viral medications to treat shingles. It’s important that healthcare providers and health advocacy groups work with their members to help increase awareness of shingles symptoms and possible treatments.”

Shingles is caused by a reactivation of the varicella-zoster virus, the same virus that causes chicken pox. The virus remains in the body after chicken pox, even from as early as childhood. Shingles is also called herpes zoster.

For information about shingles, visit: www.shingles.com, www.ifa-fiv.org, www.ihmf.org, and www.vzvfoundation.org.