

INFECTION CONTROL MEASURES AT RUNNYMEDE IF A PATIENT IS DIAGNOSED WITH LOCALIZED SHINGLES

Posting a precautionary sign outside the patient's room and above the patient's bed.

- All patient activities are restricted inside the patient's room until all skin lesions are dry and crusted
- Dedicating a commode chair for the bedside
- Wearing a protective gown and gloves when having contact with a patient or the patient environment
- Practicing proper hand hygiene when entering and exiting the patient's room
- Cleaning and disinfecting patient care equipment after each patient's use
- Daily cleaning and disinfection of each patient room and washroom
- Only staff and visitors who are immune to Varicella Zoster Virus can have contact with a patient or the patient's environment



FOR MORE INFORMATION,
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Shingles
(*Herpes Zoster*)

WHAT IS SHINGLES?

Shingles (Herpes Zoster) is an acute, painful inflammation of a nerve that is accompanied by an eruption of blisters on the skin.

It is caused by the same virus that causes chickenpox, called Varicella Zoster Virus (VZV).

IS SHINGLES CONTAGIOUS?

Shingles is contagious to anyone who has not had chickenpox or the varicella vaccine.

They become at risk of infection by touching the open blisters of a person with shingles, or items contaminated with the virus, and then, without cleaning their hands, touching their own mouth, nose, or eyes.

Instead of developing shingles, these people would develop chickenpox.

WHO IS AT RISK OF DEVELOPING SHINGLES?

Anyone who has had chickenpox is at risk of developing shingles. After a person recovers from chickenpox, the virus stays in the body in an inactive state but can reactivate years later, causing shingles.

People who are run down due to stress, illness, shock, or who are receiving medical treatment are more likely to develop shingles. The older an individual is, the greater their risk of developing shingles.

WHAT ARE THE SYMPTOMS?

The symptoms of shingles include:

- Skin that feels itchy, tingling, or burning
- Fever
- Blister-like rash that appears within two or three days
- New blisters that continue to form on the skin for up to a week

HOW IS SHINGLES TREATED?

There are medications available for shingles; consult a physician for more information.

- Try to avoid touching or scratching the rash
- Avoid contact with others to prevent the spread of the infection
- Wear loose-fitting clothes to minimize skin irritation and prevent rubbing
- Apply ice packs or take cool baths to minimize itching and burning sensation
- Anti-itch lotions, like calamine, can also be applied to the skin
- Make sure to eat sensibly and rest

POSTHERPETIC NEURALGIA (PHN)

As the rash heals, pain may persist. The pain is called postherpetic neuralgia (PHN) and can be debilitating in individuals over 60 years old.

The symptoms of PHN may include:

- Fatigue
- Disrupted sleep
- Depression and social withdrawal
- Decreased hearing
- Skin infections and scarring

HOW CAN SHINGLES AND PHN BE PREVENTED?

To prevent shingles and PHN, the Centre for Disease Control and Prevention (CDC) and the Canadian Immunization Guide recommend a shingles vaccine for adults aged 50 or older.