Don’t Make a “Rash Decision” about Shingles Pain: New Techniques Offer a Better Option
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Overview of the Condition
Shingles, a common skin condition, is actually a viral infection resulting in a painful rash. This viral condition is caused by the varicella-zoster virus, the same virus responsible for chickenpox. If you had chickenpox as a child, you are susceptible to shingles as well. In fact, the chickenpox virus lies dormant within your nerve tissues around the spinal cord and brain and may reactivate later in life as shingles. Although shingles can occur anywhere on the body, it is most commonly seen as a single stripe of blisters wrapping around the right or left side of the torso. Some patients report blistering around the eyes or face, as well as fever and headache accompanying the skin ulceration. Common symptoms include pain, a burning sensation, numbness, tingling, and increased skin sensitivity. While adult-onset chickenpox can be very serious and in some cases fatal, shingles are not considered life-threatening. Vaccines can help reduce the risk of developing shingles and early intervention can help shorten the duration and lessen the chances of complications.

Postherpetic Neuralgia: A Painful Complication
Postherpetic Neuralgia, or PHN, is the most common complication of the shingles virus. PHN is a chronic pain response to the virus lasting more than three months. While the risk of developing PHN increases with age (much like the chances of contracting shingles in the first place), anyone can develop this condition. Impaired immunity, as is the case with some co-occurring conditions and immunosuppressant drugs, can also increase patient risk. PHN carries with it a debilitating level of pain, impaired mobility, and physical function. This, in turn, can lead to chronic depression, physical and emotional isolation, and a reduction in patient-identified quality of life. The treatment options previously available represented a sizable cost to patients as well as caregivers and the healthcare industry. While there are vaccines that reduce the risk of complication and in some cases, lessen symptom severity until now there has been no safe or reliably effective treatment option for shingles pain and PHN. However, recent research and
clinical trials have identified an exciting new treatment option that shows great promise in the management of PHN symptoms.

New Treatments for Pain

For PHN affecting the torso, a new treatment consists of an injection beneath the skin’s surface of a solution consisting of lidocaine, epinephrine, and an antiviral known as acyclovir. The lidocaine acts as a local anesthesia, numbing the site. The epinephrine constricts the swollen capillaries, while the antiviral works to break down the viral cause of shingles itself. While this does not equate to a cure as of yet, this solution provides effective and safe symptom management. Most importantly, it works quickly to reduce pain and ulceration at the source. Studies have shown great efficacy, with nearly 100% of treated patients reporting immediate and comprehensive pain relief. The lidocaine (numbing) effect lasts between 18-36 hours following application, which is more than enough time for the other active ingredients to do their job.

Treatment Protocol

For the best possible results, researchers recommend two or three consecutive treatments spread out at intervals of 48 to 96 hours apart. The majority of patients polled reported a prolonged duration of symptom management with a decreased level of pain. This is most likely the result of the effects of the antiviral agents present. While researchers note that it is too early in clinical trials to call this treatment a “cure” for shingles or PHN, or at least define it as a permanent one, the initial clinical trials offer a promising future for this treatment option. The treatment of PHN located in the face and neck area has only limited research, as this procedure is similar in nature to liposuction in terms of the way the solution is administered within the body, and the skin of this area is much more sensitive and thin. However, this procedure is quite non-invasive and relatively painless in nature. The treatment of facial PHN is indeed possible, but it requires a more careful approach and the application method uses a modified technique and is individualized for each patient. In the limited clinical testing required to establish efficacy, researchers have noted that the subcutaneous (beneath the skin’s surface) application of acyclovir (antiviral) to treat PHN and shingles-related pain symptoms is both safe and effective. Even after over 8,000 successful cases, there have been no significant complications.
Where Do I Learn More about This Exciting Therapy?

Spring of Youth Medical Group is excited to expand our service provision to include treatments for Shingles Pain. We are always monitoring current research and clinical trends to help provide innovative treatment options to our friends and neighbors on the Mississippi Gulf Coast, of which we have been serving for over 10 years. Our senior Provider, Dr. Hazem Barmada, MD has over 30 years of experience as a cardiovascular and thoracic surgeon providing patient care and treatment for a variety of conditions. As part of an ongoing effort to provide an even higher standard of patient care, we expanded our services to include a Vein & Laser Center and Aesthetics Center under the umbrella of Spring of Youth Medical Group. Our primary focus is on understanding the patient’s individual experience with their condition through an extensive and comprehensive evaluation. We are conveniently located at 1155 Ocean Springs Rd in Ocean Springs, MS. Call us at (228) 875-0885 or send us an email at info@springofyouthmedical.com to schedule a consultation or to have any additional questions answered.