

DISSEMINATED ZOSTER

What is disseminated zoster?

Disseminated zoster is a severe form of herpes zoster (shingles). It happens when the virus that causes chickenpox (called varicella-zoster virus) becomes active again later in life.

Disseminated zoster causes a rash with blisters that spreads across large areas of the body, not just in one spot or along a single nerve line. This condition mostly affects people with weakened immune systems, such as those with cancer, HIV, or who have had an organ transplant. It is most commonly seen in immunocompromised individuals, such as those undergoing chemotherapy, organ transplant recipients, or people with HIV/AIDS.

What are the symptoms of disseminated zoster?

Symptoms may include:

- Pain, burning, or tingling in the affected area before the rash appears
- A painful, blistering rash that spreads across different areas of the body
- Fever, headache, fatigue
- In severe cases, it can cause neurological complications such as encephalitis or meningitis
- Postherpetic neuralgia (PHN) – long-lasting nerve pain that can last for months or years after the rash goes away

How does disseminated zoster spread?

Disseminated zoster can spread through the air by coughing or sneezing and by touching the fluid from the blisters. It can be just as contagious as chickenpox. People who haven't had chickenpox or the chickenpox vaccine can get sick if they're exposed to someone with disseminated zoster.

Clinical diagnosis by a health care professional is essential, since disseminated zoster can look like other conditions like chickenpox, herpes simplex, or contact dermatitis.

How can disseminated zoster be prevented?

The best way to prevent it is by getting the shingles vaccine.

PUBLIC HEALTH

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The Shingrix® vaccine is recommended for:

- Adults 50 years and older
- Adults 18 years and older with weakened immune systems

In Ontario, the vaccine is free for people aged 65 to 70.

How is disseminated zoster treated?

Talk to your health care provider about treatment options, which may include:

- Antiviral medications such as acyclovir, valacyclovir, famciclovir – most effective when started within 72 hours of rash onset
- Pain relievers, including analgesics and sometimes corticosteroids

Hospitalization may be required for severe or systemic cases, especially in immunocompromised individuals.