



Shingles vaccination

HCA PLT 2022

SALLY WHITE CLINICAL TUTOR OPEN DOORS



What is Shingles?

- Shingles is also called Herpes Zoster
- It is caused by the Varicella zoster virus
- This is the same virus that causes chicken pox
- When you recover from chicken pox some of the virus remains in your body and remains dormant in your nervous system
- If your immunity is reduced the virus can be reactivated as Shingles
- Your immunity can be reduced by age, stress, other medical conditions

How common is it?

- About 1 in 4 people who have had chickenpox develop shingles.
- It is more common in people aged over 70 years
- Over 1,400 people over 70 years are admitted to hospital with Shingles a year
- Vaccination uptake rates are falling in London and England

What are the symptoms?

- Pain and tingling usually start a few days or weeks before the blisters, often described as burning pain
- May have headache, tiredness, fever
- Clusters of painful, itchy, fluid filled blisters which burst and crust over
- Rash can last 2-4 weeks
- Usually one side of the body only
- Often on chest, head, face or eye area
- Can affect eyelid and cause swelling
- Immunocompromised people can have a worse rash







Can you catch Shingles?

- You can't catch shingles from someone-it is the reactivation of the chicken pox virus
- If you have not had chicken pox you can catch chicken pox from someone with shingles
- The virus is transmitted from the fluid in the blisters

Complications

Post Herpetic Neuralgia (Pain that appears or lasts >90 days after rash)

Can cause long-lasting severe pain caused by damage to nerve fibres which can affect quality of life, can last from 3 months to several years

No treatment for this

14,000 of those over 70 years go on to develop this a year

Death

Mortality 1 in 1000 in those over 70 years

Face

Facial palsy-weakness on one side of the face

Eye problems

Decreased vision

Severe Pain in eye

Blindness in severe cases

Why have the vaccine and who is eligible?

- It reduces the chance of getting Shingles
- If you do get shingles you are less likely to get severe disease or complications following Shingles
- Offered to all 70-79 year olds up to their 80th birthday



Why are we offering vaccinations to those >70 years?

- 1 in 1000 will die from Shingles
- Worse symptoms
- More likely to be admitted to hospital
- More likely to have long term complications such as Post herpetic neuralgia (PHN)-long lasting severe pain
- More likely to have eye problems
- Have lowered immunity with age so more likely to get shingles
- Vaccines reduce likelihood of getting shingles by 38% and the chance of PHN by 67%. It reduces the chance of being admitted to hospital.



Why are we not vaccinating people over 80 years?

Research shows that the vaccines were less
effective at preventing Shingles in this
group

Which vaccines are available?

Zostavax-Live shingles vaccine



Shingrix-inactivated vaccine (not live)





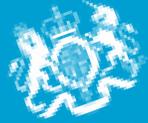
What could impact uptake?

- Misconceptions
- Zostavax contains porcine gelatin
- Vaccine hesitancy

Why porcine gelatine?

Porcine vaccine ensure safe and

The product highly purified into very small peptides.



Public Health
England

Vaccines and porcine gelatine

This leaflet describes how and why porcine gelatine is used in vaccines

Ingredients in some vaccines
some groups.
provide

Why can't vaccines be made with other stabilisers or types of gelatine?
Developing a vaccine takes
laboratory testing and clinical

Where are the vaccines given?

- Upper arm-Deltoid muscle
- Intramuscular injection





Zostavax vaccine

- Contains Porcine Gelatine-a trace
 - We would still recommend this vaccine for all patients that do not have a weakened immune system as the best shingles vaccine
 - Stored 2-8 C, must be used within 30 minutes of reconstitution
 - SINGLE DOSE 0.65mls
 - Can be given by subcutaneous injection for those with a bleeding disorder
 - Cannot be given to those who are immunocompromised or pregnant
 - (See Shingles section in Green book for full list of conditions that are contraindicated) [Green Book of immunisation - Chapter 28a Shingles \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/67192/green-book-chapter-28a-shingles.pdf)
- Cannot give to those who have history of anaphylaxis to components
- If in doubt if safe to give, check with experienced clinician

Shingrix (recombinant) vaccine

- Not a live vaccine
- TWO DOSE SCHEDULE
- 0.5ml dose given minimum of 2 months apart
- Intramuscular injection into deltoid-upper arm
- Cannot be given subcutaneously
- Limited supply
- Only to be used for those patients who are immunosuppressed and cannot take Zostavax
- If in doubt if patient is eligible always check with an experienced clinician
- List of conditions attached

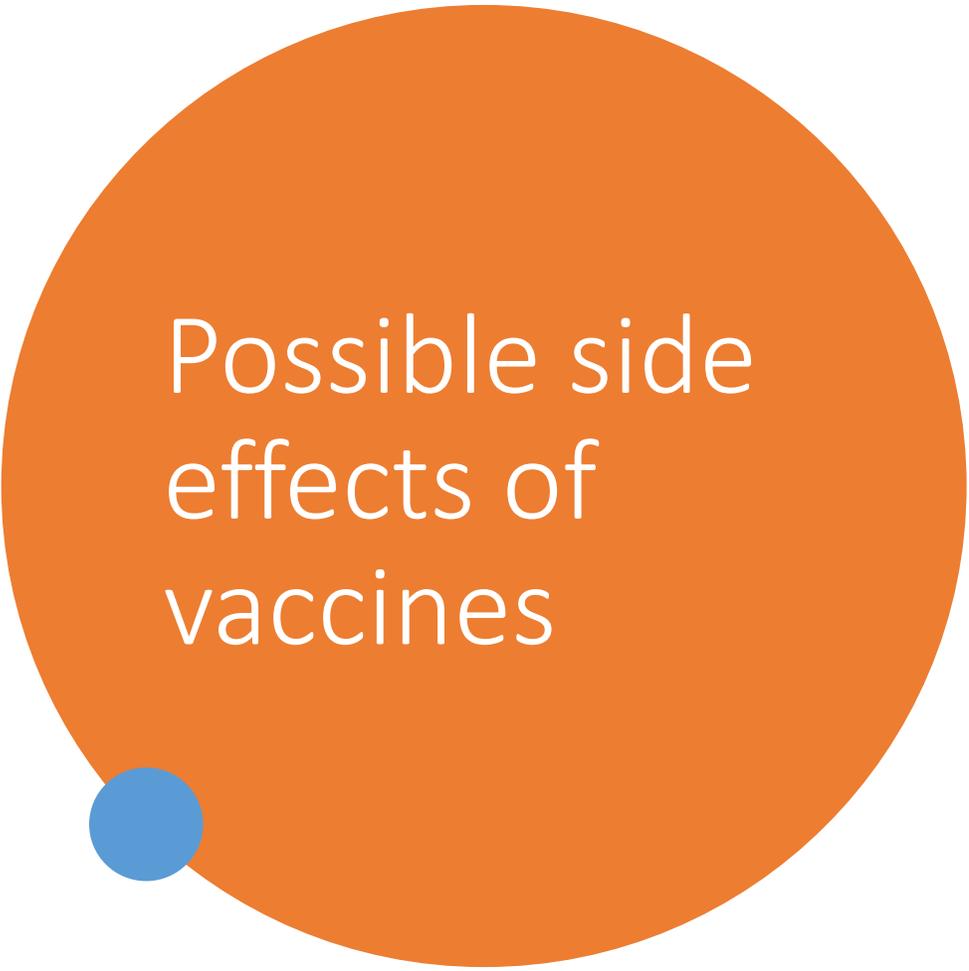


Can I give with other vaccines?

- **Zostavax** can safely be given with the **Influenza** or **Pneumococcal** vaccination
- Preferably give in separate limbs
- If given in the same arm, give 2.5cm apart
- Document which vaccine given in each area, e.g Upper left deltoid, lower left deltoid
- **Shingrix** should not routinely be given with **Influenza** vaccine, preferably wait for 7 days to not confuse side effects but can be given if needed urgently
- **Both Zostavax and Shingrix**- Should delay for 7 days after **Covid-19** vaccination and vice versa

Why? No research done, Shingrix side effects may be confused with covid vaccine side effects and Zostavax may have reduced effectiveness

MMR and Yellow fever-should not be given within 4 weeks of **Zostavax**



Possible side effects of vaccines

Zostavax

- 1 in 10: Redness, swelling, pain, itching at injection site
- 1 in 100: bruising, induration, warmth at injection site, pain in arm or leg, headache
- 1 in 10,000: Vesicular rash and chicken pox like illness

If develop rash, should keep it covered and stay away from those that have never had chicken pox, seek medical advice

Shingrix

Pain at injection site

Muscle pain

Fatigue

What do I need to do to give these vaccines?

- ✓ Two day immunisation course (Or annual update if you have already done this in the past)
- ✓ Formal training and sign off in intramuscular injections
- ✓ Understand what a PSD is and how to use in practice
- ✓ Understand which vaccine for which group of patients
- ✓ Understand contraindications to Zostavax
- ✓ Signed off by a competent nurse/ GP in practice giving the vaccine, after observation
- ✓ Do not give until you have been signed off and feel competent & confident

Patient Specific Directive (PSD)

- Always use a PSD
- Should be signed before a vaccine is given not after
It should,
- State the name of the patient
- State the name and dose of the prescription only medicine to be administered
- Route of administration
- Signature of prescriber
- Show evidence to confirm that the patient has been considered as an individual.

Is this task in your job description ?

Does the medical indemnity provider have this on your list of tasks?



References

- [Green Book of immunisation - Chapter 28a Shingles \(publishing.service.gov.uk\)](#)
- [Shingles vaccination toolkit \(england.nhs.uk\)](#)
- [Shingles vaccine \(Zostavax[®]\): patient group direction \(PGD\) template - GOV.UK \(www.gov.uk\)](#)
- [Shingles vaccine \(Shingrix[®]\): patient group direction \(PGD\) template – GOV.UK \(www.gov.uk\)](#)
- [Shingles - NHS \(www.nhs.uk\)](#)
- [Green Book: Chapter 5 Immunisation by nurses \(publishing.service.gov.uk\)](#)

Resources

- [Immunisation - elearning for healthcare \(e-lfh.org.uk\)](https://www.e-lfh.org.uk)
- [Shingles vaccination: eligibility poster - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/933552/Vaccines_porcine_gelatine_2020_A4.pdf

Scenarios

Scenario 1

- Mohammed, 45 has had his spleen removed.

Which shingles vaccine can he have?



Scenario 2

- Joan has Shingles, she wants to know if her pregnant daughter can visit her. Her daughter has never had Chicken Pox.

Is she at risk of catching Shingles?

Scenario 3

- Shahida, 73 yrs has no medical problems. She would like to have a Shingles vaccination but has heard it contains Gelatine. She is worried that this conflicts with her Muslim beliefs. What advice could you give to her? Which Vaccine would she be eligible for?