

Shingles

and post-herpetic neuralgia

Homeopathy has something to offer at every stage, says *Tom Whitmarsh*

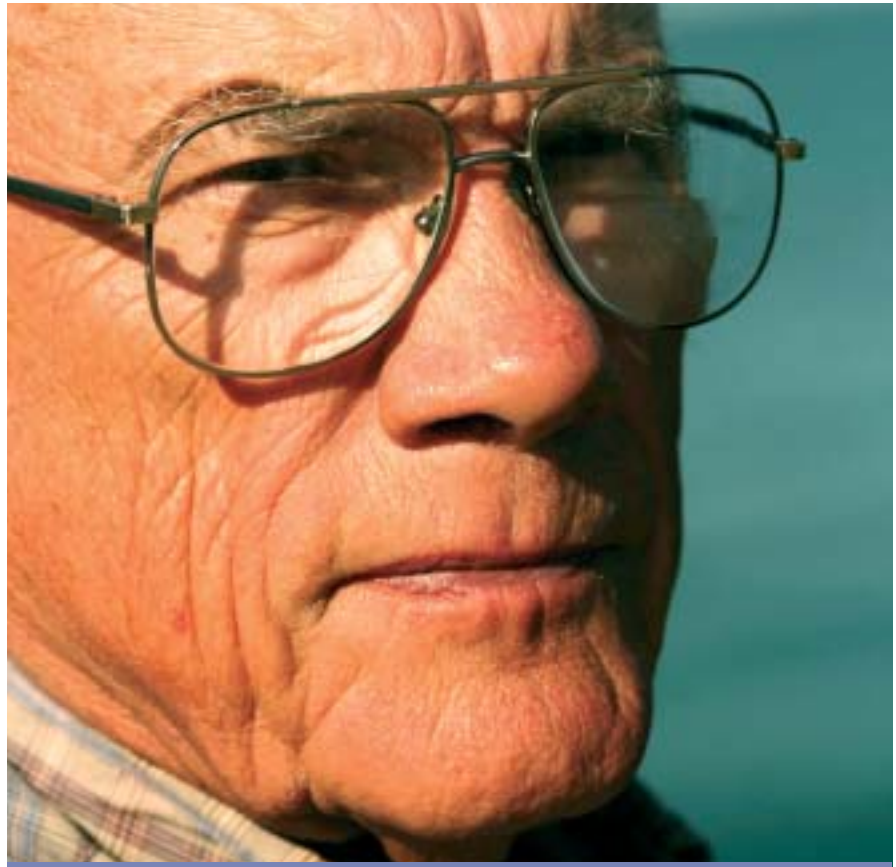


Photo: istockphoto.com/Jordan Chestrough

Most bouts of shingles occur in people over the age of 65

Shingles

Shingles usually presents as a painful blistering eruption on the skin. It is caused by the same herpes virus as chickenpox, varicella zoster. Anyone who has had chickenpox can get a bout of shingles at some point in their lives. This, of course, means most people! After the initial infection, the virus lies dormant in nerve roots near the spinal cord, kept in check by a normally functioning immune system. If there comes a time when the immune system becomes temporarily or permanently less effective and its guard is down, the virus can “seize its chance”. It multiplies and migrates out along the nerve and shows how much damage it can cause in the nerve and in the area supplied by that nerve. The skin is the most frequently damaged

tissue and sensory nerves are those most commonly involved. Motor nerves (those which are responsible for movement) can be affected too, especially in the face (causing one-sided drooping) and other organs, particularly the eye.

The commonest reason for the decline in function of the immune system is the ageing process. Most bouts of shingles occur in those over 65 and one estimate reckons that half of those over 80 years will suffer at least one attack. Other states of compromised immunity that can lead to shingles include some patients with cancer (especially those on chemotherapy), people who have had transplants, people on long-term immunosuppressive drugs like steroids or people with HIV infection or AIDS. Shingles is

not contagious, but people who have not had chickenpox or who are in one of these risk groups can catch chickenpox from it and should avoid exposure to open shingles, as should pregnant women.

The most frequent factor that seems to be associated with reactivation of the virus in some studies appears to be physical trauma to the affected area, but this is by no means always the case. Emotional trauma or psychological stress on top of a relatively weakened immune system can be enough to bring on a shingles attack. For example, it is common for bereavement to be soon followed by shingles.

An attack of shingles is very often preceded by tingling and numbness over the affected skin. In addition, two thirds of



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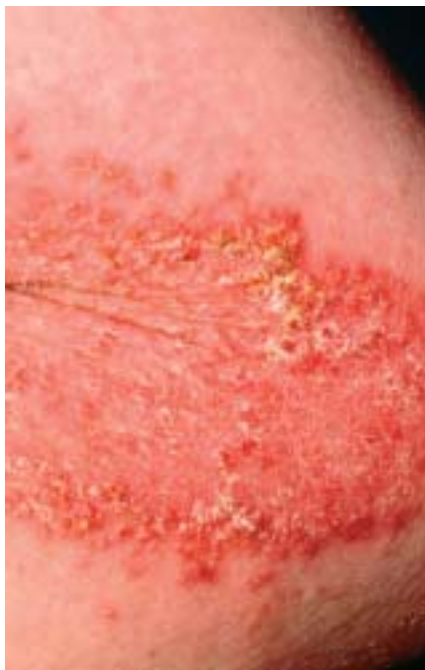


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Photo: Courtesy of Archive of Central Texas Plants, University of Texas, Austin

A typical shingles rash (left) resembles the rash (centre) brought on by contact with poison ivy (right)

people experience shooting pains as well, up to three weeks before any sign on the skin. Some people only get pain after the rash has appeared. The rash starts as a band or patch of raised dots on one side of the trunk, face, arms, abdomen or legs. The rash occurs nearly always on one side of the body, hence the names “shingles” (from the Latin word for a belt or girdle) and “zoster” (a belt in Greek). The spots enlarge and become fluid-filled blisters, only to dry out and crust over within about two weeks. Once they are dry, they no longer contain the virus and are not infectious. The attack generally lasts about one month.

Pain is an almost invariable accompaniment of the shingles rash, emphasising that although the obvious signs are in the skin, the actual disease process is within the nerves. The pain can be extremely severe as the rash reaches its height. In Norway, it is sometimes known as a “belt of roses from hell” and in Denmark, it is “hellfire”. These descriptions give an idea of just how awful an attack can be. Sufferers describe the pain as sharp, stabbing, burning, piercing, throbbing or a combination of all of these! Rarely, there can be a rash with no pain. Very rarely, people get the pain without the rash and then the diagnosis can only be confirmed by blood tests.

Post-herpetic neuralgia

One imagines that it might be possible to cope with these symptoms for a short time, but 20 per cent of those who have an attack of shingles find themselves left

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with a degree of pain after the rash has gone and the skin is intact again, a situation known as post-herpetic neuralgia (PHN). It happens more frequently in older people and there is some suggestion that early treatment reduces the likelihood of it occurring. It can be unbearable to suffer this pain, sometimes for months or years following the attack, frequently along with hypersensitivity of the skin, so that the slightest touch or draft of air is intolerable. Most cases like this do gradually improve over time.

Conventional treatment relies on anti-viral drugs such as Acyclovir taken as soon as shingles is diagnosed. Painkillers and anti-inflammatories can help during an attack. As a pain caused by nerve destruction – a neuropathic pain – PHN, is hard to treat, but longer-term powerful painkillers are a mainstay.

Antidepressants and anticonvulsants can help, as can the application of a patch which slowly releases the local anaesthetic drug lignocaine. A cream containing capsaicin is sometimes helpful in neuropathic pain. Capsaicin is a pain-producing drug derived from chilli peppers and is used in a pain-relieving cream in orthodox medicine, the rough idea being that the nervous system is in some way distracted from the neuropathic process. This seems to me to be a great example of inadvertent homeopathy! PHN is so unpleasant that it drives many sufferers to depression and social isolation. Any help we can give to this dreadful situation is of major benefit.

Homeopathic treatment

Homeopathy has something to offer in shingles at every stage. Before the rash has appeared, when there is just some tingling, if you are familiar with an attack (and some people do get recurrent bouts) or if it is suspected, it is well worth taking some Aconite. I favour a high potency (200c, 1M or 10M), but 30c frequently is just fine. Aconite is helpful at the first stages of many acute illnesses to cut down their duration. One way of practicing homeopathy takes the view that a single remedy should be helpful for an individual whatever the particular illness. For example, if you know that (say) *Natrum mur* is always a remedy that helps you, you should try that in more or less any acute situation before other remedies.

Once the rash is appearing, other



Photo: GAP Photos/John Glover

Aconite (monkshood)



Photo: istockphoto.com

Ranunculus bulbosus (buttercup)



Photo: istockphoto.com/Ben Kopilow

Iris versicolor (blue flag)

remedies come into play. The major remedy in shingles and one which many prescribers would give before any other, is *Rhus toxicodendron* (poison ivy). Of course, this is often used with great success in cold sores, another common herpes-virus infection. The use of *Rhus tox* in shingles is a very obvious and useful example of the similia principle. In sensitised individuals, the rash caused by a poison ivy plant brushing against the skin resembles shingles quite remarkably. There is inflammation, intense blistering and intolerable itching of the skin which continues for several days before healing and resolving. As in just about any joint disease, it is all too easy to give *Rhus tox* to someone with a blistering, itchy painful rash when other factors might lead you to different remedies. To confirm *Rhus tox* as a possibly useful prescription, you might look to it being more applicable in the relatively young who have some relief from moving about.

If the patient is very chilly with restlessness, anxiety, exhaustion and a worsening of symptoms between midnight and 2am, then *Arsenicum album* is likely to help. *Arsenicum*, of course, has a major keynote with burning pains apparently paradoxically relieved by warmth. It also has many interesting skin symptoms.

Mezereum (spurge olive) is useful for rashes which are very painful and intensely itchy, especially on the scalp and particularly in older people. The blisters may burst to form brown scabs.

Ranunculus bulbosus (buttercup) is often indicated with severe nerve pains, when the slightest touch or movement makes the pain worse. It is also particularly helpful for rashes on the left chest wall which are slightly bluish in colour.

For a rash that is described as feeling like a burn, *Cantharis* (Spanish fly) might be a good choice.

A remedy which sometimes is overlooked, but which is very useful, is *Iris versicolor* (blue-flag). This seems to be most applicable to right-sided rashes. It is also used a lot for migraineous headaches with a lot of burning in the stomach and vomiting, which are characteristically better for a walk in the open air. This general feature could be a pointer to the remedy in a case of shingles. Other remedies mentioned for shingles include *Lachesis*, *Petroleum*, *Causticum* and *Mercury*.

Another approach would concentrate on events in life before the attack and whether there was anything particular which might have triggered it. An example might be to use a grief remedy like *Ignatia* for shingles coming on in close proximity to a bereavement, or an injury remedy like *Arnica* if it came on

soon after a car accident.

The challenge of post-herpetic neuralgia can be met sometimes using homeopathy. All of the remedies mentioned previously may apply, though *Ranunculus*, *Mezereum* and *Rhus tox* are most often used. I would also add *Spigelia*, with its shooting pains along nerves.

Variolinum, the nosode made from potentising fluid from the skin lesions of smallpox, deserves a special mention. Many prescribers will give this, either as a single 30c or 200c dose before other remedies, or as a prescription to take alongside other remedies (say 30c daily). It does seem to cut down on the suffering associated with shingles and is especially useful in PHN.

Some topical preparations can help. *Rhus tox* cream is very helpful early in the bout in cutting down the spread of blisters and in the pain of PHN, though great care and attention to cleanliness needs to be taken if the skin is very broken. Similarly, applications of sterile *Hypercal* (*Hypericum* and *Calendula*) solution are pain relieving.

Anything that might reduce the suffering associated with shingles has to be a good thing. Enter homeopathy!

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