

SHINGLES CASE STUDY

C O M P E T I T I O N

This case history concerns shingles occurring on myself, a practising Obstetrician and Gynaecologist, aged, aged 55 years, healthy and taking no medication.

I first noticed some discomfort at about 9pm on 19 November 1993, in the area of nerve distribution T2, on my left side and lower down the left shoulder – close to the armpit posteriorly. This can best be described as a chaffing sensation which rapidly became worse over the ensuing 24 hours, until at 21h00 hours on the evening of 20th November, when I asked my wife to examine the areas. She noticed an area of blister formation, typical of early shingles, measuring 5 x 5cm. Thereafter, over the next 24 hours, further lesions appeared in the T1 distribution of the left armpit, again measuring about 5 x 5cm and associated with an uncomfortable sensation tracking down the left arm to the left wrist, aggravated by movement of the left shoulder, cold water and any movement of cool air over this area.

On Monday 22 November, no further lesions had appeared, though the rash in both areas described had increased in intensity and certainly were more erythematous. Very fortunately, I just so happened to have an appointment with the Wellcome Representative on Monday 22 November and she urged me to go onto Zovirax, though I felt that the lesions were not severe enough, and that I would get better anyway. I did however, phone Dr Rob Trive, a Physician in the area, who advised that I go onto oral Zovirax immediately, as there was no knowing what the extent of the affected areas could be or what the morbidity would be for somebody trying to practice in this kind of speciality, particularly long term, for example, depression, discomfort. I therefore went onto oral Zovirax which I commenced on the evening of 22 November, at 16h30 hours, at the dose of 800mg taken exactly 5 times a day, which is about 4,8 hours apart,

day and night over the ensuing week. At the time the Zovirax was started on 22 November, I noted some discomfort in the area of T3, left of the midline of my spine and on examination, a lesion measured about 3 x 3cm was noted. Within the first 24 hours of taking the oral Zovirax, I noted the formation of further vesicles to the left of my sternum, again measuring about 3 x 3cm in the area of T3 distribution. From that point on, no further lesions developed, while the most severe discomfort was down my left arm chiefly in the area of T1 and perhaps slightly in T2 distribution.

As far as the healing of the lesions is concerned, the last lesion to appear was the first lesion to heal completely – within days – followed by the third lesion to the left of my spine, measuring about 3 x 3cm in the area of T3, while the last lesions to heal completely were the 5 x 5cm lesions in my left armpit. And indeed, as I write to you on 12 July 1994, the only area which indicates that I ever had shingles, was the very first area which was noted in T2 distribution, which appeared about 48 hours before I started the treatment, although symptomatic 72 hours before treatment. What was so very interesting about the healing process was that the most severe symptoms were associated with the lesions which appeared about 48 hours and 24 hours before I started the treatment. What was also interesting, was that the lesion that appeared within the 24 hours after I started the treatment healed very quickly and has left no residual scar whatever and was never associated with much discomfort in the acute phase. As regards the symptoms, the referred pain down my left arm in the T2 and T1 distribution, all ceased exactly 5 weeks, to the day, after the treatment was started. (I know this as I was due to play a golf match in Port Alfred on 23 December, and it was on this day, that I noticed for the first time that I no longer had any discomfort from the shingles on swinging a golf club).

In retrospect, I clearly should have started the Zovirax earlier, and would have no hesitation in recommending to anybody who develops shingles that they should go onto a 1 week course of oral Zovirax, which needs to be started within 72 hours at the latest, preferably sooner. In my case there was a close relationship, not only to the attenuation of the symptoms, but also the healing of lesions and the time the medication was taken. Further, no side effects of any kind were noted on taking the Zovirax.

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