

SHINGLES CASE STUDY

ENTRY FROM: DR R E KIRKBY
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"I must have wrenched my arm, Doctor," Mr AH said, as he ruefully rolled his shoulder around.

"I have never had such pain as last night. It stretches all the way down from here to here", he pointed from behind his right ear down the outer side of his arm to his mid forearm.

"Now today I've developed this rash".

He had started feeling pain in C6 dermatome on the right 4 days prior to the appearance of the rash which had been present for 12 hours.

On examination it was obvious that this fit 59 year old man had Herpes Zoster. The rest of his physical examination was non contributory. The only previous medical history of note was an equivocal hypertension but he was not currently on therapy.

We discussed the options of treatment and he was willing to try the Zovirax Shingles treatment pack. He was "frankly terrified" of the terrible pain he had seen someone suffer from post herpes neuralgia for more than 2 years. Hence the cost involved was not a major consideration "if it (the treatment) does the job".

He was started on Zovirax 800mg 5 times daily for 7 days and as his analgesic combination given Myprodol (Codeine/Paracetamol/Ibuprofen) 2 tid and Amytriptilene 25mg nocte.

The first photos were taken 12 hours after appearance of the rash.

He was seen 4 days later feeling well and wanting to return to work. He had no pain and said this had disappeared after 36 hours. The second batch of photos were taken at this visit.

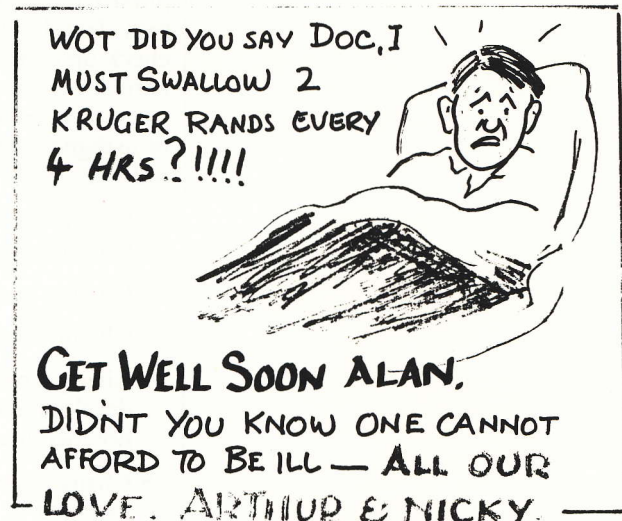
A friend had sent him a "get well soon" card which showed him (the patient) swallowing 2 Kruger Rands as his pills (his drug bill for the Zovirax Shingles Pack was R1 300 from the Pharmacist).

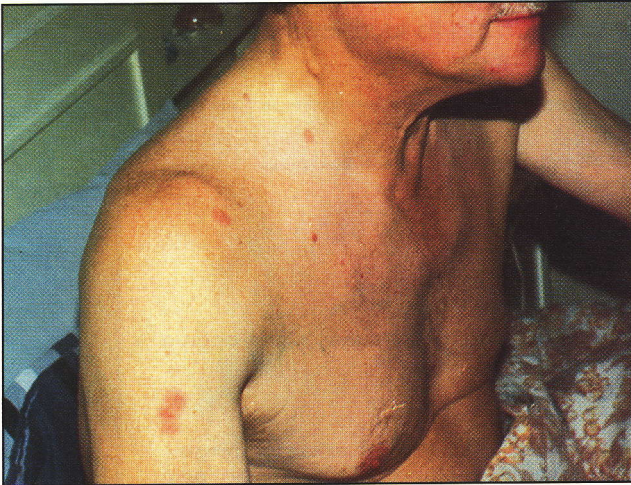
Was it worth it? Mr H's relatively short period of pain and quick return to work is pretty convincing evidence to me of the medication's efficiency. I

recently had a patient who declined the use of this on the basis of cost. Although one can never directly compare shingles in different people, she could only return to work one month after the appearance of the rash and pain control was a much larger problem. Also her rash ended up much more severe and eventually ulcerated and required antibiotics for secondary sepsis.

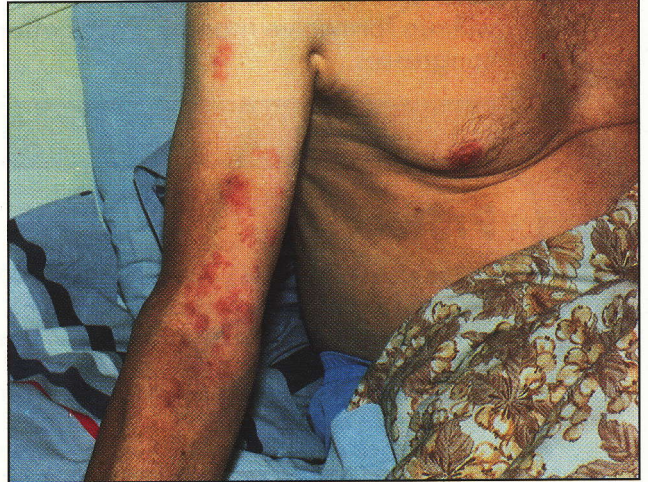
The economics: - Lost time off work and production must also come into the equation which makes this treatment option more economically viable.

What of the patient? Mr H had no doubt that it was worth it as he had first hand experience of a close friend who had suffered severe Post Herpetic Neuralgia for over two years. "I would recommend it to anyone", he said.





12 hours after the appearance of the rash



4 days later



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