Who Should Be Vaccinated

A one-time vaccination against herpes zoster (also known as shingles) is routinely recommended for all people age 60 years and older who do not have a valid contraindication to the vaccine.

Talking Points with Patients

• People are at risk for developing shingles if they have had an earlier infection with chickenpox. Studies have shown that over 99% of adults in the U.S. age 60 years and older have been previously infected with chickenpox, whether or not they recall the episode.
• About 1 in 3 people will develop shingles at some time in their lives unless they are vaccinated against it. The older you are, the greater your risk for developing shingles.
• Shingles usually starts as a blistering rash which can become severe.
• Shingles can be extremely painful and can cause serious problems, such as blindness if it affects the eyes. Other serious problems that may result from shingles include skin infections, muscle weakness, scarring, and loss of hearing.
• Many people experience long-term nerve pain that can last for months, even years, and can interfere with eating and sleeping. For some, the pain has been so severe that it has led to suicide.

Important Points for Healthcare Providers

• Shingles is caused by the reactivation of the dormant chickenpox virus that lives in the nerve cells of people who have been infected with chickenpox.
• Even though zoster vaccine efficacy decreases with age, getting vaccinated significantly reduces the risk of developing post-herpetic neuralgia in all age groups. In fact, the oldest adults are at the highest risk of postherpetic neuralgia, and they are least able to tolerate the condition or the medications used to control pain.
• Because zoster vaccine is routinely recommended for people age 60 and older, it should be covered by most health insurance plans. For those enrolled in Medicare, it is currently available under Part D, the prescription drug benefit.
• Don’t ask your patients to purchase the vaccine from their pharmacy and then carry it to your office for administration. This “brown bagging” might significantly jeopardize the stability of the vaccine.
Healthcare professionals: Be sure to recommend zoster vaccine for your patients age 60 and older.

Contraindications and Precautions

• Do not give zoster vaccine to a person who has had an anaphylactic reaction to gelatin, neomycin, or any other component of the vaccine.
• Do not give zoster vaccine to a person who has known severe immunodeficiency or is pregnant.
• If possible, do not give zoster vaccine to a patient who has received specific antivirals (i.e., acyclovir, famciclovir, or valacyclovir) 24 hours before vaccination; delay resumption of these antiviral drugs for 14 days after vaccination.
• Minor illness with or without fever is not a valid reason to withhold zoster vaccine.

Vaccine Storage, Dosing, and Administration

• Store zoster vaccine in a freezer unit designed specifically for storing biologics at 5°F (-15°C) or colder, but no colder than -58°F (-50°C).
• Reconstitute vaccine only with the diluent supplied and administer within 30 minutes of reconstitution.
• Administer 0.65 mL zoster vaccine subcutaneously in the fatty tissue over the triceps (back of the upper arm) with a 23–25g, %34 needle.

Side Effects

• No serious problems have been identified with zoster vaccine.
• Mild problems identified include redness, soreness, swelling, or itching at the site of the injection (about 1 in 3 vaccinated people) and headache (about 1 in 70).

The Role of Pharmacists in Administering Zoster Vaccine

• At least 47 states and the District of Columbia permit pharmacists to administer zoster vaccine, including many who administer it on a walk-in basis, using a protocol or standing orders. Not all pharmacists in the 47 states provide vaccination services, and of those who do, not all administer zoster vaccine.
• If you do not administer zoster vaccine in your practice, your patients may be able to be vaccinated by a local pharmacist. Check ahead with the pharmacy to see if they will accept your patients and under what circumstances.