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Herpes Zoster

One's first encounter with the herpes zoster virus is usually childhood chicken pox. Later in life, the virus may reactivate, causing a characteristic rash of small blisters, frequently on the chest or forehead, which form crusts and may leave scars. This second encounter with the virus is commonly known as shingles.

Unlike chicken pox, shingles is usually quite painful. Although this disease often occurs in normal, healthy people, it occurs more frequently in elderly or immune-compromised individuals.

It is important to see an ophthalmologist (Eye M.D.) when herpes zoster occurs on the face, because the virus can invade the eye. An ophthalmologist looks for elevated pressure in the eye, inflammation inside the eye, and herpes zoster lesions on the surface of the eye. All of these problems can be treated, but they are sometimes difficult to manage. Careful treatment and follow up are required. Today, new oral antiviral medications are providing shingles patients with a quicker, more complete recovery.

Post herpetic neuralgia is a common problem and is often severe and prolonged. This usually occurs after the intitial infection and can last months or even years. This includes symptoms such as pain, tingling, headache, numbness and others. There are newer medications such as gabapentin that are somewhat effective in relieving this.

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