

### THE RISK OF DEVELOPING SHINGLES IS SIGNIFICANT<sup>1</sup>

- 97% of adults aged 60+ have been exposed to the virus that causes shingles<sup>1</sup>
- 4% of adults aged 60+ believe they are at high risk of developing shingles<sup>2</sup>

1. Shain AN et al. Vaccine 2005;24:520-29. 2. Shingles Study 150000 n=1,025. Seroprevalence data on file, September 2015, 12/02.

### THE RISK OF DEVELOPING SHINGLES IS SIGNIFICANT<sup>1</sup>

- 120,000**  
Annual incidence of shingles per year in Australia<sup>1</sup>
- 2%**  
of adults aged 60+ are aware of the availability of a shingles vaccine<sup>2</sup>  
\* Online survey 60-80 year olds, n=1,028.

1. MacIntyre R et al. Increasing Trends of Herpes Zoster in Australia. PLoS ONE 2014; 10(4):e0125025. 2. Private Market Research, Seroprevalence data on file, July 2015.

### SHINGLES PAIN CAN BE EXCRUCIATING<sup>1</sup>

- Sharp pain and hypersensitivity can occur before a rash appears<sup>2</sup>
- Often described as burning, stabbing and sharp pain<sup>1,2</sup>
- Can disrupt sleep, mood, work, daily activities and impact quality of life<sup>1</sup>

1. Herpes Zoster et al. BMJ 2008 Jun 6;377(96-5):1-30. 2. Oseini MN et al. In: Arvin AA et al. editors. Varicella-Zoster Virus. Virology and Clinical Management 2000 p.246-75.

### NERVE DAMAGE BEGINS BEFORE THE RASH APPEARS<sup>1</sup>

- Virus replication causes inflammation and injury to the nerve before rash appears<sup>1</sup>
- Even with antiviral therapy, the risk of developing PHN remains substantial<sup>2</sup>
- Cochrane Review: insufficient evidence to recommend antivirals to prevent PHN<sup>2</sup>

Rash Onset		Rash Healing	
Prodromal Pain	Acute Pain	Subacute Herpetic Neuralgia	Chronic Pain: PHN
Nerve damage begins	Initiate antiviral within 72 hours of rash onset		
Day 0	2-4 Weeks	3 Months	

1. Oseini MN et al. In: Arvin AA et al. editors. Varicella-Zoster Virus. Virology and Clinical Management 2000. 246-275. 2. Chen N et al. Cochrane Database of Systematic Reviews 2014, Issue 2. 3. ATG compile (online) Therapeutic Guidelines 2013.

### POSTHERPETIC NEURALGIA (PHN) IS THE MOST FREQUENT DEBILITATING COMPLICATION OF SHINGLES<sup>1</sup>

- PHN can be excruciating and may last for years<sup>1,2</sup>
- PHN patients report experiencing pain in the area of their shingles rash for an average of 3.5 years<sup>3</sup>

**20%**


Up to 20% of adults aged 50+ with shingles may develop postherpetic neuralgia (PHN)<sup>2</sup>

1. IAHMRC. The Australian Immunisation Handbook - 10th Edition 2013. 2. Herpes Zoster et al. BMJ 2008 (June 6); 377 (96-5): 1-30. 3. Berglund M et al. Health Qual Life Outcomes 2014; 12: 92.

## SHINGLES COMPLICATIONS CAN BE SERIOUS<sup>1</sup>

Ophthalmic zoster

- Occurs in 10-25% of shingles cases<sup>1</sup>
- Complications may include facial scarring and loss of vision<sup>1,2</sup>



Stroke Risk

- Shingles may also increase the risk of stroke in the following 6 months<sup>3</sup>
- There is a 63% higher risk in the 4 weeks after shingles vs. baseline period<sup>3</sup>

1. Herzig R et al. SRAFR 2008 (June 6); 57 (RR-5): 1-302. 2. Yawn BP et al. Mayo Clin Proc 2013; 88: 562-670. 3. Langan SM et al. Clin Infect Dis 2014; 58: 1487-1503

## HELP PROTECT OLDER PATIENTS FROM THE THREAT OF SHINGLES WITH SHINGLES VACCINE<sup>1-2</sup>

The NHMRC Australian Immunisation Handbook recommends people aged 60+ are vaccinated with zoster vaccine<sup>1</sup>

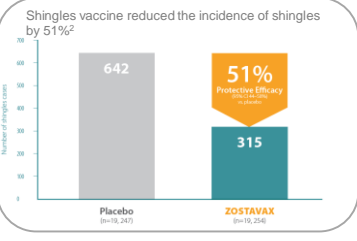
The Australian and New Zealand Society for Geriatric Medicine also recommends people aged 60+ are vaccinated with zoster vaccine<sup>2</sup>

Zoster vaccine is currently scheduled to be listed on the National Immunisation Program (NIP) from November 2016 for 70-79 year olds<sup>3</sup>

1. NHMRC. The Australian Immunisation Handbook, 10th Edition 2013. Australian and New Zealand Society for Geriatric Medicine Position Statement No. 7, Immunisation of Older People – Revision Number 2, 2013. 2. Australian Government Department of Health. Review: Australia program. Older Australians. Australia at <http://www.immunise.health.gov.au/immunise/immunisation/Content/older-Australians> Accessed July 2016.

## HELP PROTECT ADULTS 60 YEARS AND OVER FROM SHINGLES WITH SHINGLES VACCINE<sup>1</sup>

Shingles vaccine reduced the incidence of shingles by 51%<sup>2</sup>



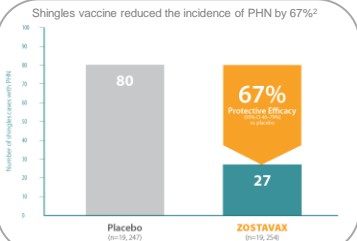
*In vaccinated patients who developed shingles, the vaccine significantly reduced shingles associated pain compared to placebo in 60+ patients<sup>2</sup>*

A placebo controlled, double-blind clinical trial, 38,546 subjects aged 60 years or older were randomised to receive a single dose of either shingles vaccine or placebo and were monitored for the development of shingles for a median of 3.1 years. Graph adapted from Oxman et al NEJM 2005

1. ZOSTAVAX Approved Product Information, Amended Nov 2015. 2. Oxman MN et al. NEJM 2005; 352:2274-84

## HELP PROTECT ADULTS 60 YEARS AND OVER FROM PHN WITH SHINGLES VACCINE<sup>1</sup>

Shingles vaccine reduced the incidence of PHN by 67%<sup>2</sup>




*Patients vaccinated with the shingles vaccine who did develop shingles had a significantly lower incidence of PHN compared to placebo<sup>2</sup>*

A placebo controlled, double-blind clinical trial, 38,546 subjects aged 60 years or older were randomised to receive a single dose of either shingles vaccine or placebo and were monitored for the development of shingles for a median of 3.1 years. PHN – post herpetic neuralgia defined as pain and discomfort associated with shingles rated as 3 or more, on a scale ranging from 0 (no pain) to 10 (pain as bad as you can imagine), persisting or appearing more than 90 days after the onset of rash. Graph adapted from Oxman et al NEJM 2005

1. ZOSTAVAX Approved Product Information, Amended Nov 2015. 2. Oxman MN et al. NEJM 2005; 352:2274-84

## Help protect your patients aged 60+ from the threat of shingles by proactively recommending Shingles Vaccine<sup>1-3</sup>



*Aged 60+    Receiving influenza vaccine    Seen impact of shingles    Insured with extras cover*

1. ZOSTAVAX Approved Product Information, Amended Nov 2015. 2. NHMRC. The Australian Immunisation Handbook, 10th Edition 2013. 3. Australian and New Zealand Society for Geriatric Medicine Position Statement No. 7, Immunisation of Older People – Revision Number 2, 2011

## GETTING WITH THE GUIDELINES

60-69 years	70-79 years	80+
Raise NHMRC recommendations with patients at next routine visit		
Offer Shingles Vaccine to your 60+ patients receiving a flu vaccination – can be co-administered <sup>1</sup>		
Prioritise those where time is less tight (e.g. repeat visits)	Alert to NIP coverage in November 2016 and flag patient for follow up	Prioritise those where time is less tight (e.g. repeat visits)
Discuss with patients during travel health consultations		Ensure that patients aged 80+ understand that by age 85, approximately 1 in 2 will experience shingles <sup>2</sup>
Consider patients who are proactive about their health		Consider patients who are proactive about their health
Consider those insured with Extras cover who can claim up to 85% of the cost of the vaccine <sup>3</sup>		

<sup>1</sup>Using separate syringes and injection sites!  
<sup>2</sup>ZOSTAVAX Approved Product Information, Amended Nov 2015. 2. NHMRC. The Australian Immunisation Handbook, 10th Edition 2013. 3. Private Health Insurance Summary, Sepsis data on file, July 2015.

**PBS Information: This product is not listed on the PBS or the National Immunisation Program (NIP)**

**Before prescribing, please review the Product Information available at [www.seqirus.com.au/PI](http://www.seqirus.com.au/PI)**

Product information is available on request.  
References are available on request.  
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