What should I know about Herpes Zoster? From Shaklee.com
The very same virus that causes chickenpox is the virus that causes herpes zoster, or shingles. This virus is known as varicella zoster virus (VZV). Chickenpox, while uncomfortable and very contagious, is usually a benign illness of childhood that is characterized by a rash with small blisters. When the VZV is reactivated, commonly after the sixth decade of life, herpes zoster presents itself as a rash that is accompanied by severe pain.(1)

Primary infection with this menacing virus is most likely to take place by way of the respiratory tract. After the virus begins to develop, it results in the usual blisters. But what causes this virus to be reactivated and display itself later in life as herpes zoster remains unknown. It simply remains latent until some stimulus reactivates it. Most who are diagnosed with herpes zoster have no history of recent exposure to individuals with VZV infection. Herpes zoster, more commonly known as shingles, can occur at any age, but seems to occur with the greatest frequency in the sixth to eighth decade of life. It has also been suggested that approximately 2 percent of patients who suffer from herpes zoster will suffer a second episode of the infection. The prevalence of herpes zoster in HIV-infected individuals appears higher than in other age-matched immunocompetent persons.(2, 3)

The onset of this disease is accompanied by pain that is often severe and may continue throughout the progression of the disease. Blistering that crusts over in one to two weeks follows the initial signs of itching, burning, and tingling.(4) The total duration of the disease is generally between 7-10 days; however, it may take as long as two to four weeks for the skin to return to normal.

Approximately 45 percent of patients over 50 who develop shingles will experience pain persisting for more than six weeks after the rash clears up. This is known as postherpetic neuralgia, and is intense, burning, and unrelenting. It is almost never seen in children who develop zoster, and is a rarity among adults less than 50 years old. Sometimes nerves in the facial area are affected and the individual can lose the sense of taste on part of their tongue. This syndrome is known as Ramsay-Hunt syndrome. People who are immunocompromised are at risk for zoster. In fact, individuals with Hodgkin's disease and non-Hodgkin's lymphoma are at greatest risk for the development of shingles. Another population at much greater risk of developing shingles are individuals who have received a bone marrow transplant.(1)

Statistics
National Institute of Neurological Disorders and Stroke (NINDS), 1999.
• About 10 percent of normal adults can be expected to get shingles during their lifetime, usually after age 50.
• The incidence increases with age so that shingles is 10 times more likely to occur in adults over 60 than in children under 10.
• Most people who get shingles develop immunity to the virus and will not get the disease again.
• Youngsters whose mothers had chickenpox late in pregnancy - 5 to 21 days before giving birth - are also vulnerable to shingles.

• The incidence of herpes zoster in the United States is estimated to be 600,000 to one million cases per year.

Signs and Symptoms
A red rash on the skin that follows the path of a nerve and generally occurs on one side of the body are the first signs of shingles. Spots may be present that look like chicken pox; starting as red, raised bumps clustered in one area around a nerve or in a line. They then turn into blisters and within about 7 days will form a crust or scab. These affected areas of the skin occur most commonly on the back, chest or abdomen, but may occur on the face and neck. The rash is generally quite painful and is sometimes described as burning, intense pain. Occasionally the person may experience pain or a tingling sensation that occurs 2-3 days before the rash breaks out. The pain can last long beyond when the rash clears up; this is called post-herpetic neuralgia. Post-herpetic neuralgia occurs most often in patients over 50 years old.

The following list does not insure the presence of this health condition. Please see the text and your healthcare professional for more information.

General
A red rash on the skin that follows the path of a nerve
A painful, burning rash on one side of the body Spots look like chicken pox, starting as red, raised bumps clustered in one area around a nerve or in a line. They then turn into blisters, and within about 7 days, form a crust or scab Occurs most commonly on the back, chest, or abdomen, but may occur on the face or neck


4 Tyler KL. Aseptic Menigitis, Viral Encephalitis, and Prion Diseases. In Fauci AS, Braunwald E,
COMMON AILMENTS SHINGLES
By Martha Wilmore 2009
NOTE:
1. To reduce toxin exposure, eliminate ALL AVOIDABLE TOXINS by choosing Shaklee toxin-free cleaners and personal care products.
2. To support more optimal fibre and raw essential oils, it is recommended to eat 3 tablespoons of fresh ground flaxseed daily
3. With every ailment listed below, use the three items listed FIRST for support to one of the Starter Programs
4. ALL programs should begin with ONE of the following three STARTER PROGRAM OPTIONS:
   □ A. Bare Essentials
      1. 3 tablespoons of Soy Protein or 2 scoops of Shaklee 180 Shakes
      2. 2 Vita Lea
      3. 1 Optiflora Pearl PLUS 1/8th to 1 teaspoon Optiflora Powder
   □ B. Basic Program for Prevention
      1. 3 tablespoons of Soy Protein or 2 scoops of Cinch Shakes
      2. 1 Vitalizer Strip (with or without iron) PLUS 1/8th to 1 teaspoon Optiflora Powder
   □ C. Better Program for Prevention and Symptoms
      1. 3 tablespoons of Soy Protein or 2 scoops of Shaklee 180 Shakes
      2. 1 Vitalizer Strip (with or without iron) PLUS 1/8th to 1 teaspoon Optiflora Powder
      3. 1 teaspoon of Vivix
      4. 2 NutriFeron

SHINGLES:
1. VITAMIN C: immune support; speeds up healing
2. B COMPLEX: provides nutrients needed for healing the nerve damage
3. NUTRIFERON: to support the immune system
4. ZINC: needed for healing of connective tissue
5. VIVIX: for immune support
6. VITAMIN E + SELENIUM: immune support; speeds up healing
7. BETA CAROTENE/CAROTOMAX: immune support; heals epithelial tissue
8. CoEnzymeQ10: increases healing energy
9. OPTIFLORA: strengthens immune system; reduce toxin load
10. GARLIC: for the immune system
11. DTX: reduce toxin load
Testimonies

NutriFeron & Shingles:
“This past week I had to go to the doctor with a rash on my back. I did not think much of it, but it started itching and hurting. It was the start of shingles. Right away the doctor told me that he would prescribe some steroids for it. I informed him that in no way was I going to take them. He said there was no other way to get rid of shingles and that I would be back in to see him in a couple of days if I did not take them. I went home and started reading my nutrition books on shingles.

My friend gave me a bottle of Shaklee NutriFeron, so I doubled the dose, and also doubled the daily maintenance recommendation for several Shaklee supplements including: B Complex, Vitamin E, Advanced Carotomax, Vita Lea, and Soy Protein. By Saturday the rash was gone and the itching and hurting was also gone.” Betty

TESTIMONY - SHINGLES.
I recovered very quickly from shingles. I had shingles on my face and eyes. Naturally I took my supplements but what “cured” it overnight was Shaklee Flavomax. I took 4 the first night of the Shaklee convention in Orlando – it was awesome what happened by morning.

My doctor said I had the most unusual case he had every seen so I shared what I had done. I also sponsored a pharmacist because of the quick results. Again, I am so very thank fully for Shaklee – it has carried me through some major problems.
Jean G 2005