


Characteristics Of Herpes Zoster Disease

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Article Info	ABSTRACT
<p>Keywords: Characteristics, Shingles</p>	<p>Herpes zoster, or shingles, is a contagious disease caused by the reactivation of the varicella-zoster virus in the body. This virus can become active again when the immune system weakens. Its characteristic symptoms include clustered vesicular rash unilaterally along specific dermatomes, accompanied by radicular pain. Varicella, or chickenpox, is the primary infection that occurs upon initial exposure to the varicella-zoster virus. When the virus reactivates, it causes recurrent infection known as herpes zoster. The risk of developing HZ is influenced by several factors, including age, gender, history of infection, immune status, and comorbidities. This literature aims to explore the characteristics of herpes zoster. The method used is a narrative review of literature. The results obtained in this literature are that there are 15 articles obtained with limitations from 2020 - 2024 and an analysis has been carried out with the limitations of each article regarding the characteristics of herpes zoster disease, 15 articles mention the most dominant characteristics of herpes zoster diseases in this literature review are age (45 -70 years), gender (male), lesion location (thoracic), comorbidities (diabetes mellitus and hypertension), complications (Post Herpetic neuralgia).</p>
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INTRODUCTION

Herpes zoster or also called "shingles" is an infectious disease caused by the reactivation of the varicella zoster virus. Reactivation occurs when the body's immune system decreases. The characteristics of this disease are marked by the presence of unilateral vesicular rashes that are grouped with radicular pain around the dermatome. Varicella is a primary infection that occurs for the first time in individuals who come into contact with the varicella zoster virus. Varicella zoster undergoes reactivation, causing recurrent infections known as Herpes zoster .^{1,2}

The prevalence of herpes zoster based on data quoted from WHO, shows that the incidence of herpes zoster in developing countries is higher than in developed countries. Approximately one million cases of herpes zoster occur in the United States each year, with an incidence of 3.2 cases per 1,000 person-years. Cases of herpes zoster in hospitals in the United States mostly consist of patients aged >50 years.³

Herpes zoster can appear throughout the year because it is not affected by the season and is spread evenly throughout the world, there is no difference in morbidity between men and women, morbidity increases with age⁴. Data from the Indonesian Ministry of Health for the period 2011-2013, the prevalence of herpes zoster in 13 teaching hospitals in Indonesia throughout 2011 to 2013 reached 2,232 cases.¹ The incidence of herpes zoster disease increases with age and is rarely found in children. The peak of herpes zoster cases occurs at the age of 45-64 years as much as 37.95% and women tend to have a higher incidence.⁵

The most commonly affected dermatomes are the trunk (55%), head (20%), lumbar (15%), and sacrum (5%).⁶ Factors associated with reactivation of varicella-zoster virus include age, immunosuppression, and intrauterine exposure to varicella-zoster virus. The risk of contracting herpes zoster is estimated to be around 15-30%, but the risk is higher in adults and the elderly, immunocompromised patients, and patients with comorbidities, so the disease can be more severe and more severe complications can occur.⁶

Dewa Ayu's research (2017 on the characteristics of herpes zoster patients at the Dermatology and Venereology Polyclinic of Sanglah General Hospital, Denpasar, the prevalence of herpes zoster was 229 cases. Characteristics based on gender consisted of 48% male and 52% female. Herpes zoster patients classified as under 20 years of age were found to be 14%, aged 20 to 39 years 16%, aged 40 to 59 years 43% and aged over 59 years 27%. Based on the location of the dermatome, there were 2% generalized herpes zoster patients, 11% ophthalmic, 5% facial, 6% cervical, 20% thoracic, and 4% lumbosacral.⁷

Based on the background above, it is necessary to find a solution to the problem, because of the complications that may arise from herpes zoster. Therefore, researchers are interested in conducting further research to determine the characteristics of Herpes zoster disease.

METHOD

This research is a Literature Review research with a Narrative Review design . This method is used to identify, study, evaluate, and interpret all available research. By using this method, can be reviewed and systematic journal identification, which in each process follows the steps or established protocols. This study also uses the PICO method in look for literature.

Type data on research This in the form of data secondary, that is database from various reference, such as research journals, journal reviews, annual reports, books and related data with characteristics of morbus hansen's disease published on year 20 20 -202 4 . Search literature done through database electronic that is Google Scholar, Clinical Key, PubMed, Researchgate, results survey national like RIKESDAS, PSG And WHO, searching for withuse say key: Herpes Zoster . Content analysis carried out using a synthesis table by comparing research methods, subjects and objects of research, as well as the variables studied include the characteristics of herpes zoster disease.

RESULTS

NO	Authors	Publisher	Objective study	Subject	Method	Results	Implications
1.	Rania Ayu Permata, the daughter of Kornia, I Gusti Ayu Agung Dwi Karmila (20 20)	Udayana Medical Journal	The purpose of this study was to determine the prevalence and profile of HZ at Sanglah General Hospital, Denpasar from April 2015 to March 2016 according to the variables of gender, age, occupation, lesion location, comorbidities, complications, antiviral treatment given, and start time of antiviral treatment given.	The sample of this study was all patients diagnosed with herpes zoster in medical records at Sanglah General Hospital, Denpasar for the period April 2015 to March 2016, totaling 28 patients.	This study is retrospective .	Male 60.7% and female 39.3%, the most common age is 45-64 years (50%), the most common occupation is private workers and housewives (21.4% each), the most common lesion location is thoracic (32.1%), the most common comorbidities are DM and hypertension (10.7% each), the most common complication is Post herpetic neuralgia (PHN) (14.3%), the most common antiviral given is acyclovir (82.1%), and more sufferers are given antiviral treatment more than 72 hours after the onset of symptoms (57.1%).	The maximum clinical-histopathological spectral correlation was found in the lepromatous spectrum. The percentage of correlation was much smaller in all other groups.
2.	Chaitanya Namdeo, Kailash Bhatia,	Journal of Laboratory Physicians	This study was conducted to study the clinical	A total of 170 patients who were clinically	This was a hospital-based	The male to female ratio was 2.1: The majority of cases were seen in the	older age groups have a higher risk of complications.

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	Deepa Saini, Pravesh Yadav, Sumit Chauhan (2020)		characteristics, complications, and risk factors in herpes zoster patients.	diagnosed with herpes zoster came to.	prospective observational study involving 170 patients clinically diagnosed with herpes zoster .	age group of 51 - 60 years (22.9%), followed by the age groups of 31 - 40 years and 61 - 70 years (18.8% each). Left side involvement was more common. Pain in the affected dermatome was the most common prodromal symptom. Fever and myalgia were the most commonly reported constitutional symptoms. Only 80 patients had a history of previous varicella. Thoracic dermatomes were the most commonly involved followed by cranial, cervical, lumbar and sacral dermatomes. Forty eight patients had risk factors associated with herpes zoster infection. Secondary complications due to herpes zoster infection	

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3.	Luciana Antonioli, Camila Rodrigues, Rafael Borges, Luciano Z. Goldani (2020)	The Brazilian Journal of Infectious Diseases	The aim of this study was to describe the epidemiological and clinical aspects of herpes zoster (HZ) in hospitalized patients.	There were 801 records of herpes zoster according to the proposed criteria in a tertiary care hospital in Brazil.	This was a cross-sectional study that was found through hospital-based records during the period March 2000 to January 2017 in a 700-bed tertiary care hospital located in southern Brazil.	Most patients with HZ had a cutaneous form of the disease involving a single dermatome (n = 589, 73.5%). Additional clinical characteristics included postherpetic neuralgia (22.1%), ophthalmic HZ (7.6%), and meningoencephalitis (2.7%). Most patients had immunocompromised conditions (64.9%), including HIV, immunosuppressive therapy, and malignant neoplasms. During this period, there were 105 (13.1%) deaths, most of which were unrelated to HZ. Five deaths were related to HZ meningoencephalitis.	occurred in 40 patients . Awareness of the incidence and comorbid factors associated with HZ in Latin American countries such as Brazil contributed to the adoption and implementation of strategies for immunization in this area.
4 .	Syafira Alim, Sri Vitayani, Farah	Fakumi Medical Journal: Medical	To determine the characteristics of	The sample used in this study was all	The study used a cross-	The results showed that in herpes zoster patients,	The frequent dermatomal distribution

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	Ekawati Mulyadi, Aryanti Bamahry, Rezky Putri Indarwati (20 22)	Student Journal	herpes zoster patients at Ibnu Sina Hospital in 2016-2017 based on age, gender, nutritional status, location, and comorbidities.	patients who suffering from herpes zoster at lbnu Sina Hospital Makassar in 2016-2017 which was obtained by total sampling using medical record data from patients diagnosed by a Herpes Zoster doctor.	sectional design using secondary data, namely medical records of herpes zoster patients and collected using the total sampling technique.	the most age group was between 45 and 64 years, with the number of cases reaching 9 (36.0%). Female gender was dominant with 14 cases (56.0%), while underweight nutritional status included 13 cases (52.0%). Dermatome distribution most is in the section thoracic with 11 cases (44.0%), while the most common comorbidities common is malignancy with 10 cases (40.0%).	of involvement, particularly in the thoracic region, highlights the importance of a site-specific clinical approach. Furthermore, the increased incidence of herpes zoster in patients with comorbidities such as malignancies underscores the need for a comprehensive and collaborative management strategy between medical specialists. Overall, this study provides a basis for improving the clinical management and prevention of herpes zoster in the hospital setting, with the hope of reducing the burden of disease and improving the quality of life of patients.

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5.	Desire'e Van Oorschot, Ashleigh McGirr, Philibert Goulet, Patricia Koochaki, Ramya Pratiwadi, Selam Shah, Desmond Curran (2022)	Infectious Diseases and Therapy	To better understand the burden, patient pathways, and clinical management of HZ in these countries and identify gaps in the literature	Patients were eligible for the study if they were at least 50 years of age and had been diagnosed with HZ by a healthcare practitioner within the previous 7–60 days for HZ patients and 90–365 days in Canada . Eligible patients were invited to participate in a concept elicitation interview by telephone.	Observational studies use qualitative designs.	A total of 32 patients participated in the study, with a mean age of 61 years. Most of them (72%) were female. The most commonly reported symptoms included rash (n = 32), pain (n = 31), fatigue (n = 26), and itching (n = 20). The most frequently reported affected quality of life domains included emotional functioning (n = 31), daily activities (n = 31), sleep (n = 29), physical functioning (n = 25).	Herpes Zoster negatively impacts many dimensions of patients' health-related quality of life, especially during the acute phase of the disease.
6.	Sharon L. Cadogan, Jennifer S. Mindell, Judith Breuer, Andrew Hayward and Charlotte	BMC Infectious Diseases	The aim of this study was to explore potential risk factors for herpes zoster using survey data from a nationally	The sample consisted of 8022 adults (aged 16 years and over) who participated in the HSE 2015. Data collection	Data were taken from the 2015 Health Survey for England, an annual cross-sectional	The median age of the overall study population was 51 years (IQR: 36–66). Among those who reported previous herpes zoster, the median age was 63 years (IQR: 49–	Digestive disorders have the potential to be a risk factor for medical conditions that lead to the occurrence of Herpes Zoster .

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	Warren-Gash1 (2022)		representative sample of the general community-dwelling population in England.	was conducted in participants' homes via face-to-face Computer Assisted Personal Interviews and self-administered methods and is described in full elsewhere .	representative survey of households in England.	74), compared with 49 years (IQR: 35–64) in participants who had never had herpes zoster. Among those who reported previous herpes zoster, the median age at onset of herpes zoster was 42 years (IQR: 25–57). A history of herpes zoster was more commonly reported by women, older individuals, individuals of white ethnic background , and those with certain medical conditions, including diabetes, respiratory and gastrointestinal disorders , and immunocompromised patients.	
7.	Carlos Cifuentes-González, William Rojas-Carabali, Maria	International Journal of Infectious Diseases	This study aimed to estimate the prevalence of Herpes Zoster Ophthalmicus	In the analysis period, 77,893 patients were diagnosed with HZ, of which 2,378	This cross-sectional study used the Integrated Social	In the analysis period 2015-2019, the SISPRO database recorded between 25,370,381 and 37,081,636 annual	This is the first study to determine the epidemiological characteristics of HZO based on the National

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	Alejandra Fonseca-Mora, German Mejia-Salgado, Juliana Reyes-Guanes, Alejandra de-la-Torre (2022)		(HZO) and describe the sociodemographic distribution of the disease by age, sex and region in Colombia using National Health Registry data from January 1, 2015 to December 31, 2019.	patients had HZO, representing 3.05% of all cases .	Protection Information System database of the Colombian Ministry of Health, which is the unique official database in the country. We used the International Classification of Diseases specific code for HZO (B02.3) from 2015 to 2019 to estimate the prevalence and demographic status of the disease in Colombia.	consultations, with women accounting for 41.90% to 43.28% and men 56.67% to 58.01% of the total registered patients. Patients aged \geq 50 years (6,106,529 to 9,846,367) represented 24.07% to 27.27% of all records. In that period, there were 77,893 patients diagnosed with herpes zoster (HZ), of which 2,378 had herpes zoster ophthalmicus (HZO), representing 3.05% of all cases. The estimated mean prevalence of HZO was 0.99 per 100,000 inhabitants, with an increasing trend, in contrast to that observed in HZ in general. Females accounted for 54.44% of HZO cases, with a male-female ratio of 1:1.19. The most frequently	Health Database in the Columbia region. It found that the age distribution was correlated with a higher disease burden .

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						diagnosed age group was between 55 and 59 years (9.25%), followed by the >80 years group (8.70%), and the 65 to 69 years group (8.41%). Analysis of the annual distribution of the disease showed that the prevalence of the disease increased with age in the linear graph, as well as a higher prevalence in females in all age groups in the bar graph, except in the 35-39 and 45-49 age groups.	
8.	Rajesh Sinha, Pinki Kumari, UK Pallavi, Subhasree Sarkar (20 23)	Cureus	To investigate the clinical and epidemiological patterns of herpes zoster and various post-herpetic complications.	A total of 72 patients with herpes zoster and post-herpetic complications who attended the dermatology outpatient department (OPD) of a tertiary care	A cross-sectional population-based study was conducted through a retrospective database review .	A total of 72 patients were included in this study, consisting of 32 (44.4%) patients suffering from herpes zoster and 40 (55.5%) patients suffering from post-herpetic complaints. The minimum age was 14	A broader understanding of the clinical and epidemiological factors of herpes zoster and post-herpes zoster complications is essential, as the disease imposes a significant burden on tertiary care

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				hospital in Bihar during the period May 2022 to June 2023 after obtaining approval from the ethics committee .		years, the maximum age was 83 years, and the mean age in our study was 52 ± 17 years. The most commonly affected age group was 41-60 years. A total of 52 males and 22 females were included in this study, resulting in a male to female ratio of 2.3:1. The thoracic dermatome was the most commonly involved dermatome, observed in 43 (59.7%) patients, and the left side was more frequently affected, seen in 41 (56.9%) patients. Among the total 72 patients, 26 (36.1%) had comorbidities, with hypertension (18%) being the most common, followed by diabetes mellitus (12.5%). Regarding the post-herpetic complaints	settings across all age groups. Cases involving multi-dermatomal, severe, or unusual presentations, as well as widespread lesions, should prompt extensive workup to rule out immunocompromise. Common complications include post-herpes neuralgia, unsightly scarring, and pigmentary changes. Untreated or under-treated cases are more susceptible to long-term adverse effects. Timely management of ophthalmologic complications is essential to prevent poor visual outcomes. Therefore, early diagnosis and initiation of appropriate antiviral therapy and pain management are key

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						found in our study, the most common was post-herpetic neuralgia, seen in 31 (77.5%) patients, followed by post-herpetic pigmentation (macules), observed in 22 (55%) patients, and scarring (papules, plaques, hypertrophic scars, and keloids), observed in 17 (42.5%) patients.	aspects in the management of herpes zoster and post-herpes neuralgia.
9.	Xin-Bei Valerie Chan, Ngiap Chuan Tan, Mark Chung Wai Ng, Ding Xuan Ng, Yi Ling Eileen Koh, Wai Keong Aau, and Chirk Jenn Ng (20 23)	Frontiers in Public Health	This study describes the prevalence and utilization of health services in managing Herpes Zoster in developed societies .	Data of multi-ethnic Asian patients with the diagnosis code “herpes zoster” from 2018 to 2020 were extracted from their electronic medical records. Socio-demographic, clinical, visits, medical leave, prescriptions and referrals analyzed. A total of 2,987 of	A retrospective database review was conducted in 8 general primary care clinics in urban Singapore.	The mean age was 59.9 (SD + 15.5) years; 49.2% were male; 78.5% were Chinese, 12.2% were Malay, and 4.1% were Indian. The prevalence was 221, 224, 203 per 100,000 people in 2018, 2019, and 2020. The age group 70 to 79 years had the highest prevalence (829/100,000) over 3 years. Oral acyclovir (median daily dose 4,000 mg; median duration 7	The findings of this study suggest the need for HZ vaccination in older age groups. Visitation and referral rates were low. Topical acyclovir use was not found, and further research should evaluate the underlying reasons, benefits, and harms of this practice.

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				737,868 people were diagnosed with HZ during the 3 years		days) and topical acyclovir were prescribed by 71.6 and 47.6%, respectively. Prescribed analgesics were gabapentin (41.0%), acetaminophen combinations (30.1%), oral NSAIDs (23.7%), opioids (6.0%), and tricyclic antidepressants (1.9%). Most individuals consulted only once (84.3%); 32.7% required medical leave and 5.6% were absent for more than 7 days. HZ-related referral to hospital was required in 8.9% (4.9% emergency, 2.8% ophthalmology) .	
10.	Kezia Arung Palobo, Sawitri, Pirlina Umiastuti (2023)	Syntax Literate: Indonesian Scientific Journal	This study aims to analyze risk factors in HZ patients, especially in the dermatology and genital URJ of Dr. Soetomo Hospital,	Samples were taken using consecutive sampling technique with inclusion criteria, namely patients in early adolescence (18-25	This study uses a retrospective analytical method with a case-control	It was found that as many as 62 (23.5%) HZ patients were aged 56-65 years, with women as the more dominant gender at 146 (55.3%), postherpetic neuralgia	Risk factors in the form of advanced age and comorbid disease factors that a person has are among the biggest risk factors for HZ .

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			Surabaya.	years), early adulthood (26-35 years), late adulthood (36-45 years), early elderly (46-55 years), late elderly (56-65 years), and elderly (>65 years) who have DMK (Medical Health Document) data on age, gender, and comorbidities or accompanying diseases.	study on HZ patients recorded and documented in the Medical Records of URJ Dermatology and Venereology patients at Dr. Soetomo Hospital, Surabaya for the period 2015-2017.	complications (42%) and patients who had comorbid diseases such as type 2 Diabetes Mellitus 15 (2.9%) also had a higher incidence.	
1	Eduarda Pena, Maria João Gonçalves, Constança Azeredo, Susana Oliveira, Sara Araújo, et all (2023)	Open Forum Infectious Disease	This study aims to describe the clinical characteristics of Herpes Zoster patients.	The study involved 152 patients at a hospital in Portugal with a diagnosis of herpes zoster infection between January 1, 2012 and December 31, 2022.	This retrospective study reviewed the charts of all patients older than 18 years .	The study included 152 patients with a mean age of 70 years; 58% were female. In terms of clinical manifestations: 47% had localized herpes zoster (thoracic dermatomes in 40%) and only 11% had generalized herpes zoster. Other manifestations included meningitis/encephalitis	Thoracic involvement is most common with localized infection. Postherpetic neuralgia and bacterial infections are common complications. It is important to implement preventive strategies such as herpes zoster vaccination to prevent herpes zoster and post-

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						(7%), keratitis (n=4) and Ramsay-Hunt syndrome (n=3). Approximately half of the patients (51%) had an identified cause of immunodepression at the time of admission: 25% had malignancies on chemotherapy and 6% had rheumatism that died on immunosuppressive therapy, only 7 patients were HIV positive. Most patients (78%) were treated with acyclovir (mean duration 9 days). Postherpetic neuralgia and secondary bacterial infections were common (35% and 20%, respectively). All-cause in-hospital mortality was 6%.	herpes zoster neuralgia in older adults, especially those who are immunocompromised.
1 2	Zupeng Xiao, Hanyi Wu, Xin Chen, Xiaoli Chen, Rentao Yu, Aijun Chen	Clinical, Cosmetic and Investigational Dermatology	To understand the demographic information and ocular symptoms of hospitalized	A total of 189 patients were included in this study.	This study was a retrospective study. All patients	A total of 189 patients with HZO were included in the analysis. The mean age at presentation was 61 years (mean	This study provides demographics, clinical manifestations and some risk factors of HZO patients. HZO can cause

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	(2023)		patients with HZO, and to find potential factors associated with the time to resolution of skin rash and duration of ocular symptoms at discharge, this study was designed .		diagnosed with HZO who were hospitalized in the Department of Dermatology of a hospital in Chongqing, China from January 1, 2015 to December 30, 2021 were included in this study.	59.9±14.5 years), ranging from 14 to 93 years. A total of 85 subjects (45.0%) were over 60 years old, while 19 cases (10.1%) were under 40 years old. The male to female ratio was 1.59. There were 47 current smokers (24.9%), 23 former smokers (12.1%), and 119 never smokers (63.0%). Fifty-four cases (28.6%) had hypertension or coronary heart disease, 34 cases (18.0%) had diabetes, 16 cases (8.5%) had hepatitis, 11 cases (5.8%) had cancer, 11 cases (5.8%) had kidney disease, and 4 cases (2.1%) had autoimmune disease.	severe sequelae. which may require more aggressive treatment for patients with severe facial rashes .
13.	Elif Saadet, Sabir Hasanbeyzade (2023)	General Category of Products	This study aims to investigate the demographic and clinical	This study involved a total of 440 patients diagnosed with HZ at	In this cross-sectional study, data of patients	Of the 440 patients, 252 (57.3%) were female and 188 (42.7%) were male. The mean age was	Especially elderly and immunosuppressed patients with HZ need to be treated with care and

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			characteristics of patients diagnosed with herpes zoster.	Medicana International Ankara Hospital.	followed up with a diagnosis of herpes zoster in the dermatology department 2013 and 2020 were retrospectively examined.	48.9±18 (4-94) years. The most common localizations were the thoracic region with a rate of 35.5% and the lumbar region with a rate of 21.4%. Disseminated zoster and ophthalmicus were more frequent in elderly patients (p<0.001). The most common comorbidities were hypertension (HT) + coronary artery disease (CAD) (12.6%), cancer (10.3%), and diabetes + HT (5.9%). Severe pain was observed in 19.7% of patients and was more frequent in women (p=0.016). Moderate and severe pain levels were high in patients with HT+CAD and cancer (p<0.001). Post-herpetic neuralgia was observed in 15.3% of patients over 50 years of age.	followed up for pain management and PHN progression.

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14.	Ashwin Budihal, Madhuri M Gudikote, Naveen Kumar P, Vidya KR (2024)	National Journal of Physiology, Pharmacy and Pharmacology	The aim of this study was to better understand the clinical profile and epidemiological patterns of HZ and various postherpetic complications.	Seventy-five patients with HZ and postherpetic complications who presented to the dermatology outpatient department were included in this study.	<i>cross-sectional</i> study was conducted in a tertiary hospital in Karnataka for 24 months from August 2013-August 2015.	The present <i>cross-sectional</i> study was conducted in a tertiary care hospital, and a total of 75 patients were considered for the study. The youngest patient was a 12-year-old male and the oldest patient was a 90-year-old male. The mean age of the patients was 52.45 ± 12.5 years. There was a female gender preponderance. Skin examination revealed erythema (84%) and vesicles (84%). Pain intensity was classified based on VAS. Approximately 54.6% of patients had moderate pain.	Acute vesicles with erythema and radicular pain in a unilateral dermatomal distribution are the most typical presentation of HZ infection, and are most commonly seen in the thoracic region .
15.	Raunak Parikh, O'Mareen Spence, Nikolaos Giannelos, Iain	Dermatology and Therapy	To consolidate the literature on repetitive HZ loads, this study aims to serve as a non-	Included studies were categorized based on data collection (retrospective or	This study conducted a PubMed search (January 1,	A study from Korea showed a 45% higher risk of recurrence in individuals aged 51–70 years compared with	Because HZ is preventable by vaccination, national vaccination recommendations for HZ

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	Kaan (2024).		systematic literature review, and discuss what is known about the incidence, risk factors, and clinical features of recurrent HZ.	prospective); data source (medical records, insurance claims, or physician survey); case definition (based on clinical presentation, antiviral prescription, or confirmed laboratory testing); country; inclusion criteria (general population or restricted by specific medical conditions or immune status); duration of follow-up; and statistical/analytic approach used.	2003–February 2, 2023) to assess the available literature on the incidence, risk factors, and clinical features of HZ recurrence.	those aged 21–50 years. In Spain, the risk of recurrence increased with age, ranging from 1.14 for those aged 40–49 years to 2.14 for those aged ≥80 years. However, a study from California found that the cumulative risk of recurrence decreased with age, from 11.1% for those aged 50–59 years to 9.0% for those aged ≥80 years. HZ recurrence was more common in women than in men. Eleven studies reported the percentage of immunocompromised individuals with observed HZ recurrence during follow-up, with estimates ranging from 0–18.2%. In the two studies that documented dermatomal distribution, dermatomes supplied by the thoracic,	should include the need and timing of vaccination in both immunocompetent and immunocompromised individuals with a history of HZ.

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						trigeminal, and/or cervical nerves were most frequently involved in recurrent HZ episodes. Other factors that may influence recurrence in an individual include prolonged pain after the initial HZ episode and the presence of herpes zoster ophthalmicus.	

Fifteen articles were analyzed using a synthesis table to see the variables that investigated by each study regarding the characteristics of herpes zoster disease . Of the 15 articles discussing the characteristics of herpes zoster disease , 11 article Which discuss about Characteristics of herpes zoster disease based on age, most often found in older adults (51-60 years) (journal 1, 2, 4, 7, 8, 9, 10, 12, 13, 14, 15), eight article use studies retrospective, (journals 1, 7, 8, 9, 10, 12, 13, 14) , two articles used design descriptive (journal 2 and 4) and one article used a systemic review design (journal 15).

The results of the analysis regarding the characteristics of herpes zoster disease, 9 articles mention the characteristics of herpes zoster disease based on gender, most commonly found in women (journals 4, 5, 6, 7, 10, 11, 13, 14, 15), six articles using design studi retrospective (journal 6, 7, 10, 11, 13, 14), two article use studies descriptive (journals 4 and 5) , one article with a systematic review study (journal 15).

Furthermore, the results of the analysis regarding the characteristics of herpes zoster disease based on the location of the lesion, were mostly in the thoracic region of seven articles (journals 1, 2, 4, 8, 11, 13, and 15). Several articles also discuss the incidence of herpes zoster due to immunocompromised conditions (journals 3, 6, 11, 12, 15). With complications of *postherpetic neuralgia* (journals 1, 2, 3, 8, 9, 10, 11).

Discussion

Herpes zoster (HZ) usually manifests as a painful unilateral dermatomal rash, also known as shingles . The risk of HZ is associated with decreased immune system function, especially varicella-zoster virus-specific T-cell responses, associated with aging and/or in individuals with impaired immune systems or immunosuppression due to disease or therapy.^{8,9}

Prevalence of multi-ethnic Asians with a diagnosis of "herpes zoster" from 2018 to 2020 through socio-demographic data obtained A total of 2,987 out of 737,868 people were diagnosed with HZ over 3 years. With an aging population, the average incidence of HZ is 3-10/1,000 people per year in Asia Pacific countries increasing by about 5% per year.¹⁰

The results of this study indicate that from the study of Chaitanya Namdeo, et all (2022) it was found that the most cases of HZ were seen in the age group 51 - 60 years (22.9%), followed by the age group 31 - 40 years and 61 - 70 years (each 18.8%) . In addition, in global reports, infections are most common in patients over the age of 55 years, with a peak over 60 years. Research from Carlos Cifuentes-González, et all (2022) also found that regarding age distribution, patients aged ≥ 50 years (6,106,529 to 9,846,367) represented 24.07% to 27.27% of records on HZ prevalence.^{11,12}

Herpes Zoster is more dominant in female patients than male patients. From the results of research by Syafira Alim, et all (2022), the distribution of the gender of herpes zoster patients is mostly female at 56.0%. Kezia Arung, et all (2023) also explained that women are the more dominant gender at 146 (55.3%) in HZ cases at Dr. Soetomo Hospital, Surabaya.^{13,14}

The most common lesion location obtained from Rania Ayu et al.'s (2020) study on HZ was the thoracic (32.1%), followed by the ophthalmic.¹⁵ Another study by Eduarda Pena, et all (2023), found in terms of clinical manifestations: 47% suffered from local herpes zoster (thoracic dermatome in 40%) and only 11% experienced generalized zoster.¹⁶

And it was also found that dominant complications in several studies showed that *postherpetic neuralgia* was often found in HZ cases. In the study of Rajesh Sinha (2023), it was found that the most common post-herpetic complaint was post-herpetic neuralgia (PHN), seen in 31 (77.5%) patients. Then the study of Luciana, et al (2020) also showed that from 801 herpes zoster records, the clinical characteristics of HZ complications were dominant in post-herpetic neuralgia (22.1%).^{17,18} PHN is one of the chronic sequelae of herpes zoster that can be intermittent or constant pain. PHN occurs in the same dermatome as the HZ rash, and originates from peripheral and central neuronal damage that may be a side effect of the immune/inflammatory response that accompanies VZV reactivation and migration.¹⁹ Based on the analysis of the 15 journals above, several characteristics of ZH were obtained, including:

a. Age

The most common age range for experiencing HZ is the sixth decade. (51-60 years) by 22%, followed by the fourth decade (31-40 years) by 18.9% and the seventh decade (61-70 years) by 15.5%.²⁰ This study identified advanced age as an independent risk factor for delayed recovery of skin lesions due to HZ. In addition, the older a person is, the higher the risk of contracting from Herpes Zoster incidence. Specific cell-mediated immunity to Varicella Zoster may decline with age, leading to an increased incidence and severity of HZ.²¹

The study also showed that adults aged 50 years and older had a higher risk of stroke or myocardial infarction for 3 to 12 months after an episode of shingles. This study finding is supported by the presence of varicella zoster virus in the intracerebral and coronary arteries of these patients in *postmortem studies*.²²

b. Gender

Most studies reporting HZ recurrence rates by sex have shown higher rates in women. This variation may be explained by different approaches to HZ surveillance in different countries; differences in health-seeking behavior between women and men; and cultural factors, such as medication use and patient patience, which lead to underreporting of symptoms and inappropriate use of antivirals in more women.²³

c. Comorbidity

Herpes zoster infection is more common and more severe in immunocompromised populations. The incidence is significantly higher in this population compared with immunocompetent individuals over the age of 60 years. Due to the high level of immunosuppression in HZ patients, skin involvement in one dermatome is the most frequent clinical manifestation. Identified causes of immunosuppression in HZ patients include VZV reactivation from undiagnosed neoplasms, HIV infection, or other immunosuppressive conditions.^{24,25}

d. Location of Lesion

The most common lesion location is thoracic. Literature states that the most common location of herpes zoster is thoracic followed by herpes zoster ophthalmicus. In 10%-25% of herpes zoster ophthalmicus that do not receive proper therapy, permanent damage can occur including inflammation ocular, pain weakness and loss of vision. In a study of dermatomes, it was concluded that the most common location is at the level of the intercostal or thoracic nerves because these thoracic dermatomes are traversed by sensitive sensory nerve fibers.¹⁵

e. Complications

The most common complication of PHN from several literatures. This is in accordance with the literature stating that PHN is the most common complication and increases with age. Chronic PHN pain can persist for months or even years after the acute phase of the disease.

14,15

CONCLUSION

Based on the results of the identification and review of several literature reviews, then can made conclusion that Age characteristics and immunocompromised state are the most dominant factors in this literature review , followed by gender . Although there are several other characteristics such as clinical symptoms and location predilection of herpes zoster. The suggestion expected by the researcher is for further research to analyze whether the characteristics found in This study is to be a risk factor for herpes zoster disease . And for clinicians to be aware of the occurrence of herpes zoster disease which has identical characteristics to the characteristics of the subjects of this study, so that management planning can be arranged better.

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