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Information on Facial Shingles

sources:

http://www.naturalnews.com/031598_shingles_outbreaks.html#ixzz48UIAJ97v

The medical term for shingles is "herpes zoster". After having chickenpox, the virus becomes dormant in nerve tissue - but can be reactivated years later as shingles. Shingles are most common in adults between 60 and 80 years old and those with weakened immune systems.

Shingles spreads through the skin as a rash or blister similar to chicken-pox. It is associated with grueling pain, itchiness, burning sensation and sometimes even numbness. Once the blisters burst open they can often be healed within a week or two, leaving behind light scars which will soon disappear.

While shingles may not be a deadly disease, it can be dangerous for people with weakened immune systems, such as those suffering from HIV, those getting mainstream cancer treatments and those who have organ transplants.

When shingles rash appears on the cheek or near the eyes, it is important to get prompt medical attention, as shingles in the eyes can cause temporary or permanent loss of vision.

<https://en.wikipedia.org/wiki/Shingles>

Face

Shingles may have additional symptoms, depending on the dermatome involved. The trigeminal nerve is the most commonly involved nerve.[17]

The ophthalmic division of the trigeminal nerve is most commonly involved branch.[18] When the virus is reactivated in this nerve branch it is termed zoster ophthalmicus. The skin of the forehead, upper eyelid and orbit of the eye may be involved. Zoster ophthalmicus occurs in approximately 10% to 25% of cases. In some people, symptoms may include conjunctivitis, keratitis, uveitis, and optic nerve palsies that can sometimes cause chronic ocular inflammation, loss of vision, and debilitating pain.[19]

Shingles oticus, also known as Ramsay Hunt syndrome type II, involves the ear. It is thought to result from the virus spreading from the facial nerve to the vestibulocochlear nerve. Symptoms include hearing loss and vertigo (rotational dizziness).[20]

Shingles may occur in the mouth if the maxillary or mandibular division of the trigeminal nerve is affected,[21] in which the rash may appear on the mucous membrane of the upper jaw (usually the palate, sometimes the gums of the upper teeth) or the lower jaw (tongue or gums of the lower teeth) respectively.[22] Oral involvement may occur alone or in combination with a rash on the skin over the cutaneous distribution of the same trigeminal branch.[21] As with shingles of the skin, the lesions tend to only involve one side, distinguishing it from other oral blistering conditions.[22] In the mouth, shingles appears initially as 1–4 mm opaque blisters (vesicles),[21] which break down quickly to leave ulcers that heal within 10–14 days.[22] The prodromal pain (before the rash) may be confused with toothache. [21] Sometimes this leads to unnecessary dental treatment.[22] Post herpetic neuralgia uncommonly is associated with shingles in the mouth.[22] Unusual complications may occur with intra-oral shingles that are not seen elsewhere. Due the close relationship of blood vessels to nerves, the virus can easily spread to involve the blood vessels and compromise the blood supply, sometimes causing ischemic necrosis. [21] Therefore, oral involvement rarely causes complications such as osteonecrosis, tooth loss, periodontitis (gum disease), pulp calcification, pulp necrosis, periapical lesions and tooth developmental anomalies.[17]

Disseminated shingles

In those with poor immune function, *disseminated shingles* may occur (wide rash).[3] It is defined as more than twenty skin lesions appearing outside either the primarily affected dermatome or dermatomes directly adjacent to it. Besides the skin, other organs, such as the liver or brain, may also be affected (causing hepatitis or encephalitis[23][24] respectively), making the condition potentially lethal.[25]:380

Prognosis

This condition may involve complications that affect several levels of the nervous system and cause many cranial neuropathies, polyneuritis, myelitis, or aseptic meningitis. Other serious effects that may occur in some cases include partial facial paralysis (usually temporary), ear damage, or encephalitis. [20]