

Severe Course of Herpes Zoster due to Hepatitis C

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Description

The patient, 65 years old, sought medical help for a rash on his torso and severe pain. According to the patient, before the onset of the above symptoms, fever and malaise were noted for 2 days. On clinical examination, a pronounced vesicular rash with a tendency to fusion of vesicles is noted on the skin of the back on the right. The rashes are located on a pronounced erythematous background of the skin. The rashes have a chaotic location with a tendency to spread.

During laboratory and instrumental studies, no significant changes in the main physiological parameters were found. When examining the patient for the presence of HIV and viral hepatitis, the presence of hepatitis C was revealed. The patient was not aware of the presence of this disease.

Together with an infection, the patient was prescribed the following treatment: intravenous infusion of Acyclovir 5 mg/kg every 8 hours for 5 days. After the first infusion, a decision was made to change the drug due to the patient experiencing side effects such as nausea and isolated episodes of vomiting. It was decided to replace intravenous infusions of Acyclovir with oral Valaciclovir 1000 mg 3 times a day for 7 days. The patient was also prescribed a lotion based on synthetic tannin to relieve itching and prevent weeping. For pain elimination, the patient was recommended to take Gabapentin 1200 mg daily for 1 month.

After 1 week of treatment, the patient experienced almost complete resolution of the rash (Figure 1). On the skin of the affected area, isolated post-inflammatory scars and patches of erythema are noted. There was also a marked decrease in pain in the affected area. The patient was recommended for follow-up with an infectionist for hepatitis C and additional testing of the liver condition.

Severe and/or atypical course of herpes zoster should always be taken into account by clinicians and serve as a reason to examine patients for the presence of chronic infectious diseases such as HIV and viral hepatitis.



Figure 1: Severe course of herpes zoster due to hepatitis C before (a) and after (b) treatment.

Ethical agreement: The patient written informed consent was obtained from the individuals for the publication of any potentially identifiable images or data included in this article.