
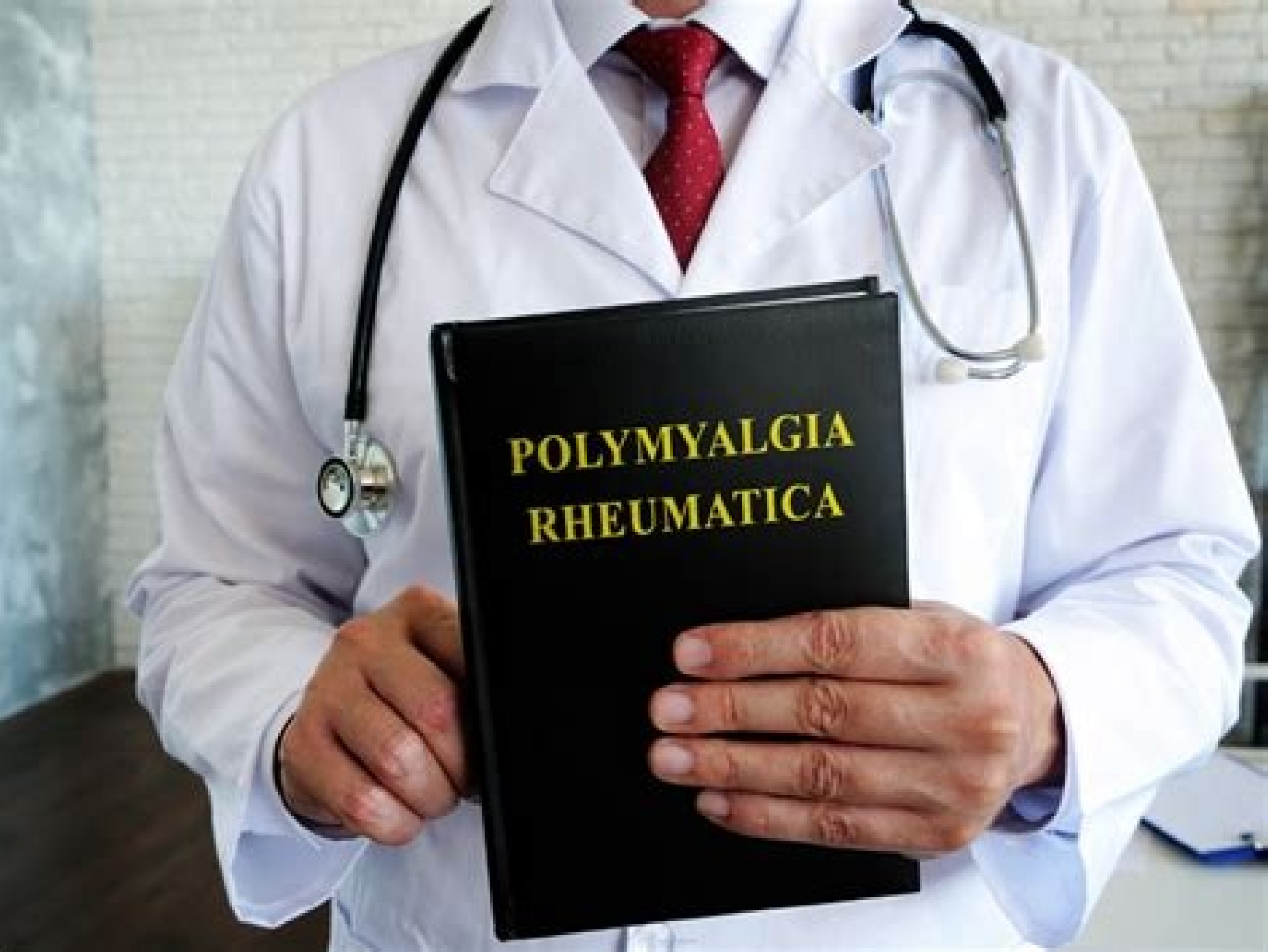
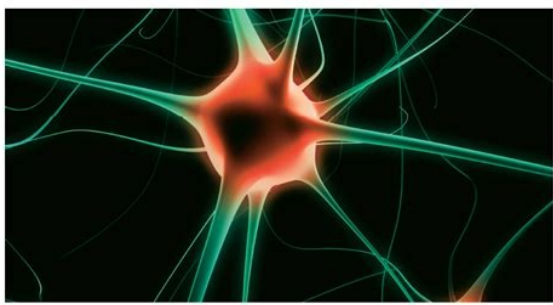


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Postherpetic neuralgia treatment guidelines 2017



Drug (Brand)	FDA Indications	Efficacy	Side Effects and Comments
Antiviral Agents			
Acyclovir (Zovirax)			Interferes with viral replication
Famciclovir (Famvir)	Treat varicella zoster virus, herpes zoster, and genital herpes	NA	Must be taken within the first 72 hours of rash onset
Valacyclovir (Valtrex)			Reduces intensity and duration of pain
Tricyclic Antidepressants			
Amitriptyline (Generic)			Dry mouth, blurred vision, constipation, dizziness, difficulty urinating, arrhythmia, orthostatic hypotension
Desipramine (Norpramin, generic)	Depression. Not FDA approved for pain	40%	Anticholinergic symptoms are more severe in the elderly
Maprotiline (Generic)			May take 3-4 weeks for drugs to become fully effective
Nortriptyline (Pamelor, generic)			
Anticonvulsants			
Gabapentin (Neurontin, Gralise, generic)	PHN		
Pregabalin (Lyrica)	Diabetic peripheral neuropathy, PHN, Fibromyalgia, Neuropathic pain associated with spinal cord injury	20-30%	Skin rash, mood swings, depression, headache, dizziness, sleepiness, swelling, upset stomach, tremors
Topical and Intra-dermal Agents			
Aspirin cream	Available OTC		Skin redness, rash, burning sensation
Capsaicin	Available OTC	20-30%	May take up to 6 weeks for patient to feel full effect of capsaicin, but 1/3 of patients cannot tolerate burning sensation
Lidocaine (Lidoderm)	Lidoderm approved for PHN		
Select Opioids			
Methadone (Dolophine, generic)			
Morphine (Avalize, Embeda, Kadian, MS Contin, Oramorph SR, generic)	Moderate to severe pain	30-40%	Constipation, drowsiness, dry mouth, nausea, upset stomach, cardiovascular complications
Oxycodone (OxyContin, generic)			Medications subject to physical dependency, tolerance, and/or addiction
Tramadol (Ryzolt, Ultram, generic)			
Laser Therapy			
LLLT	Approved for minor muscle and joint pain, muscle spasm, relieving stiffness, and promoting relaxation of muscle tissue	40-95%	No adverse side effects No drug interactions

LLLT, low level laser therapy; OTC, over the counter; PHN, postherpetic neuralgia



Accessible 24/07/2021. Little concentration. (- Neuralgia? Query = Postherpetic% 20Neuralgia) accessible to 24/22/2021. Schutzer-Weissmann J, Farquhar-Smith P, Post-herpetic neuralgia - a revision of current management and future directions. What are the symptoms of postherpetic neuralgia (PHN)? If the tiles are captured within the first three days of its outbreak, your doctor can prescribe the Acyclovir antiviral drug (Zovirax®) or VALICYCLOVIR (VALTREX®) or FAMCICLOVIR (FAMVIR®). The pain can be constant or "how and go. Some people describe pain as burning, hitting or aching. Postherpetic neuralgia (PHN) can be treated? People under 40 rarely get phn. Chapter 216. There is no maximum age. Disease control and prevention centers ESCITALOPRAM (Lexapro®) or amitriptyline. There is no standard treatment for the symptoms of postherpetic pain (PHN). The common symptoms of postherpetic neuralgia include: burning, acute pain, jaggling or sore in the area where the eruption of scandle appeared. Your supplier may need to try more than one drug or prescribe the use of different drugs at the same time. If you never get the chickenpox, you won't have the virus Varicella-zoster in your body And you will not receive tiles or phn. Waiting to see your health care provider after the eruption of Shingles: if you wait more than three days after your eruption has appeared - the window is missing to receive antiviral drugs A e a, - "you have a greater possibility of Phn . When the pain remains, the condition is called PosterPetic Nevalgia. For most of the The pain goes away from one to three months. Painful, pruriginous or feeling of feeling before erupting eruption: if you had these symptoms in a leather area a few days before your rash, you are at increased risk of PHN. Talk to your doctor about the right time to start vaccination with Shingrix. Once you've had chickenpox, the virus stays in your body for life, but it stays dormant or "silent" for years. However, if you develop PHN, your provider has many medications available to manage your symptoms. Herpes zoster causes a painful rash and other symptoms. If the pain is mild, your doctor may recommend: acetaminophen (Tylenol®) or NSAIDs such as ibuprofen (Advil®) or Motrin®). We do not endorse non-Cleveland Clinic products or services. Depending on the severity of the pain, you can start with over-the-counter products. The rash most commonly occurs as bands on one side of the body, usually on the trunk (central core of the body). Pain in the affected skin area can also be caused by a light touch (even the garments will brush on the skin). (Access 11/22/2021. Brain & Life. If you currently have herpes zoster, you need to wait until the herpes zoster rash has gone away. PHN tends to occur in older individuals who may have other health conditions, which can complicate treatment and outcomes. Last reviewed by a doctor at the Cleveland Clinic on October 27, 2021. Postherpetic neuralgia (PHN) is usually diagnosed based on symptoms, a history of herpes zoster, and a physical exam. Take all medications exactly as prescribed. You already took Prvax's vaccine. Herpes zoster is caused by the reactivation of the varicella zoster virus, the same virus that causes chickenpox. Sometimes the virus becomes active again, causing herpes zoster followed by PHN. Advertising on our site helps to . 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