



Herpes Zoster/Postherpetic Neuralgia

Herpes Zoster (commonly referred to as “shingles”) and postherpetic neuralgia result from reactivation of the varicella-zoster virus acquired during the primary varicella infection, or chickenpox. Burning pain typically precedes the classic dermatomal rash by several days and can persist for several months after the rash resolves. With postherpetic neuralgia, a complication of herpes zoster, pain may persist well after resolution of the rash and can be highly debilitating. TENS is an effective means for relieving some of the pain associated with this disease.

Suggested Electrode Placements

- 2-pad placement of electrode pads over area of pain
- 4-pad Parallel placement of electrode pads over area of pain
- 4-pad Criss-cross pattern placement of electrodes over area of pain

Suggested Treatment Parameters

Mode: Continuous

Pulse rate: 100-120 Hz

Pulse width/duration: 50-100 μ s

Amplitude: Low to moderate level stimulation

Treatment Time: Throughout the day as needed

Mode: Burst

Pulse rate: 2 bursts/sec

Pulse width/duration: 100-150 μ s

Amplitude: Low to moderate level stimulation

Treatment Time: Throughout the day as needed

