



Shingles vaccine (Shingrix)

Information for people with inflammatory bowel disease

PE-IBD-18

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Shingrix protects against shingles, a painful blistering rash that appears when the chickenpox virus, which stays in the body for life, wakes up again. It is not a live vaccine, so it is safe with all IBD medicines.

Why it is recommended

Shingles is more common in people with IBD, and more common again on steroids, azathioprine, biologics and above all JAK inhibitors such as tofacitinib and upadacitinib. It can leave nerve pain that lasts for months, and near the eye it can damage sight. Shingrix prevents more than nine in ten cases in healthy adults aged 50 and over, and still gives good protection when the immune system is weakened. We recommend it for adults with IBD who take, or are about to start, a medicine that weakens the immune system – especially a JAK inhibitor – and for everyone aged 50 and over.

How it is given

Shingrix is two injections into the muscle of the upper arm. The usual gap is two months, and it can be up to six months; if you take, or are about to start, an immune-suppressing medicine, the second dose can be given one to two months after the first. If the second dose is late, have it as soon as you can – there is no need to start again. Ideally the first dose is given at least two weeks before a JAK inhibitor or another strong immune-suppressing medicine is started, but we will not delay a treatment you need: the vaccine can be given at any time during treatment, and you do not stop your IBD medicine to have it. It can be given on the same day as other non-live vaccines, such as influenza, pneumococcal and COVID-19, in the other arm.

How long it protects you

Protection builds up over the weeks after the second dose. In studies it remained strong for at least ten years, and at present no booster dose is advised. No vaccine is perfect, so still report any painful blistering rash.

Side effects

Side effect	What it means and what to do
Pain, redness or swelling in the arm	Very common. It settles within two to three days. A cool cloth and paracetamol help.
Tiredness, muscle aches, headache, shivering, fever, nausea or stomach upset	Very common, and can keep you off work for a day or two. It settles within two to three days. It is not an infection, and the vaccine cannot give you shingles.
Allergic reaction – rash, hives, or swelling of the face, lips or throat	Rare. Difficulty breathing or swelling of the throat needs the Emergency Department.
Guillain-Barré syndrome – weakness or tingling that starts in the feet or legs and spreads	Very rare: a few extra cases per million doses in older adults, in the six weeks after the first dose. Seek urgent help.

Important points

- It is not a live vaccine and cannot cause shingles or chickenpox. It is safe with steroids, azathioprine, methotrexate, biologics and JAK inhibitors.
- Do not have Shingrix if you had a serious allergic reaction to a previous dose or to any of its ingredients – tell the nurse before the injection.
- Do not confuse it with the older live shingles vaccine, Zostavax, which must not be given on these medicines – see sheet [PE-IBD-04](#). If you had Zostavax in the past you can still have Shingrix, at least eight weeks later.
- If you have had shingles, have Shingrix once the rash has healed and you have recovered. Shingles can come back, so having had it is not a reason to skip the vaccine.

- If you have never had chickenpox, tell your doctor. Shingrix does not protect against chickenpox, and we will advise you separately. Until then, if you are in contact with someone with chickenpox or shingles, contact your doctor within 24 hours.
- If you are unwell with a fever, or in a severe flare, the vaccine is postponed until you are better. A minor cold is not a reason to wait.
- The vaccine is available in Oman. Ask your doctor where to have it, keep the dates of both doses, and tell your doctor when you have had them so they can be recorded in your notes.

Pregnancy and breastfeeding

There is little information on Shingrix in pregnancy, so it is usually delayed until after the baby is born. If you are planning a pregnancy, it is best to complete both doses beforehand. If you had it before finding out you were pregnant, tell your doctor – it is not a live vaccine and no harm is known. Shingrix can be given while you are breastfeeding.

Tell your doctor straight away if

- You have difficulty breathing, swelling of the face, lips or throat, or a widespread rash after the injection – go to the Emergency Department.
- You develop weakness, tingling or numbness that starts in the feet or legs and spreads, in the weeks after the vaccine.
- You have a fever lasting more than two days, or feel unwell for longer than three days – on immune-suppressing medicine this may be an infection, not the vaccine.
- The injection site becomes hot, hard, spreading red or painful after a few days.
- You develop a painful blistering rash in a band on one side of the body, even after vaccination.

Tell your doctor so they know and can bring your appointment forward. But if you feel seriously unwell, go to the Emergency Department first – do not wait for a reply.

Contact your doctor using the numbers your clinic has given you. If you are seriously unwell, or it is outside working hours, go to the Emergency Department rather than waiting for a reply. Brand names and preparations may differ – check the label on your own medicine. General safety advice is in sheet [PE-IBD-04](#). Version 1.0 · review date October 2028.

This leaflet is general information and does not replace advice from your own doctor.

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