

How to have the SHINGRIX conversation

BE CONFIDENT SO YOUR PATIENTS 50 YEARS AND OLDER CAN FEEL CONFIDENT SAYING YES.

Your recommendation is the strongest predictor of patients getting vaccinated.¹

1

DESCRIBE SHINGLES

PAINFUL AND DISRUPTIVE

Shingles is a blistering rash that can be **excruciatingly painful**, usually lasting 7 to 10 days, and can disrupt everyday activities such as work, family time, and sleep.²⁻⁴

2

PERSONALIZE RISK

AGE AND ADDITIONAL RISK FACTORS

Shingles risk **sharply increases starting at 50 years old**.⁵
Certain chronic conditions and **psychological stress** have been associated with an increased risk of shingles.⁶

3

RECOMMEND SHINGRIX

PROVEN OUTSTANDING EFFICACY

SHINGRIX, administered as a 2-dose series, was **proven more than 90% effective** in preventing shingles in adults 50 years and older.^{7*}

The most common side effects are pain, redness, and swelling at the injection site, muscle pain, tiredness, headache, shivering, fever, and upset stomach.⁷

*Data from the phase 3 ZOE-50 (≥50 years old) trial (median follow-up period 3.1 years) and pooled data in individuals ≥70 years old from the phase 3 ZOE-50 and ZOE-70 trials (median follow-up period 4 years) in subjects who received 2 doses of SHINGRIX (n=7344 and 8250, respectively) or placebo (n=7415 and 8346, respectively). These populations represented the modified Total Vaccinated Cohort, defined as patients who received 2 doses (0 and 2 months) of either SHINGRIX or placebo and did not develop a confirmed case of herpes zoster within 1 month after the second dose.^{7B}

Indication

SHINGRIX is a vaccine indicated for prevention of herpes zoster (shingles) in adults aged 50 years and older. SHINGRIX is not indicated for prevention of primary varicella infection (chickenpox).

Important Safety Information

- SHINGRIX is contraindicated in anyone with a history of a severe allergic reaction (eg, anaphylaxis) to any component of the vaccine or after a previous dose of SHINGRIX

Please see additional Important Safety Information for SHINGRIX throughout and full Prescribing Information, also available at SHINGRIXHCP.com.



SHINGRIX
(ZOSTER VACCINE
RECOMBINANT, ADJUVANTED)

Shingles can strike at any moment^{2,9}

RECOMMEND SHINGRIX TODAY TO HELP PREVENT SHINGLES IN THE FUTURE



99.5% of people ≥ 50 years old are infected with the varicella zoster virus (VZV).^{5,10}



Starting at **50 YEARS OLD**, shingles risk sharply increases. Increasing age can lead to a natural decline in VZV-specific immunity.^{2,5}



In **1 IN 3 PEOPLE**, the dormant virus reactivates in their lifetime, causing shingles to erupt.⁵



ADDITIONAL RISK FACTORS for shingles in patients ≥ 50 years: diabetes, chronic kidney disease, cardiovascular conditions, and psychological stress.^{6*}

*Risk factors for shingles were assessed as part of a meta-analysis. Cardiovascular conditions included heart disease, heart failure, hypertension, hyperlipidemia, stroke, atrial fibrillation/flutter, and other cardiovascular disease. The methodology used to define psychological stress varied greatly across studies and included patient questionnaires and major life events (either self-reported or captured on medical record, eg, death of a spouse or diagnosis of major medical event).⁶



ADMINISTER OR SCHEDULE TODAY.
Recommend SHINGRIX.

Scan the QR code or visit ScheduleSHINGRIX.com.

Important Safety Information (cont'd)

- Review immunization history for possible vaccine sensitivity and previous vaccination-related adverse reactions. Appropriate medical treatment and supervision must be available to manage possible anaphylactic reactions following administration of SHINGRIX
- In postmarketing observational studies, an increased risk of Guillain-Barré syndrome has been observed during the 42 days following vaccination with SHINGRIX
- Syncope (fainting) can be associated with the administration of injectable vaccines, including SHINGRIX. Procedures should be in place to avoid falling injury and to restore cerebral perfusion following syncope
- Solicited local adverse reactions reported in individuals aged 50 years and older were pain (78%), redness (38%), and swelling (26%)
- Solicited general adverse reactions reported in individuals aged 50 years and older were myalgia (45%), fatigue (45%), headache (38%), shivering (27%), fever (21%), and gastrointestinal symptoms (17%)

Please see additional Important Safety Information for SHINGRIX throughout and full Prescribing Information, also available at SHINGRIXHCP.com.



SHINGRIX
**(ZOSTER VACCINE
RECOMBINANT, ADJUVANTED)**

SHINGRIX is \$0 for most patients ≥50 years old^{11,12,*}

- 98% of commercial patients pay **\$0 FOR SHINGRIX**^{11,†}
- Medicare Part D patients can get **SHINGRIX FOR \$0** through their pharmacy¹²

*Coverage and cost may vary and are subject to change without notice. Reimbursement decisions are made by individual insurance plans.

†Source: Based on IQVIA data of paid 2024 SHINGRIX claims.



Actor portrayals.

A SHINGLES RASH CAN ERUPT ANY TIME OF YEAR.^{2,9} HELP YOUR PATIENTS COMPLETE THE 2-DOSE SERIES.⁷

Encourage your patients to book their second appointment during their first vaccination at your office or a pharmacy by visiting ScheduleSHINGRIX.com.

Important Safety Information (cont'd)

- The data are insufficient to establish if there is vaccine-associated risk with SHINGRIX in pregnant women
- It is not known whether SHINGRIX is excreted in human milk. Data are not available to assess the effects of SHINGRIX on the breastfed infant or on milk production/excretion
- Vaccination with SHINGRIX may not result in protection of all vaccine recipients

Please see additional Important Safety Information for SHINGRIX throughout and full [Prescribing Information](https://SHINGRIXHCP.com), also available at SHINGRIXHCP.com.

References: **1.** Adult immunization standards. Centers for Disease Control and Prevention. Reviewed August 9, 2024. Accessed August 18, 2025. <https://www.cdc.gov/vaccines-adults/hcp/imz-standards/> **2.** Harpaz R, Ortega-Sanchez IR, Seward JF; Advisory Committee on Immunization Practices (ACIP) Centers for Disease Control and Prevention (CDC). Prevention of herpes zoster: recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR Recomm Rep*. 2008;57(RR-5):1-30. **3.** Curran D, Matthews S, Boutry C, Lecrenier N, Cunningham AL, Schmader K. Natural history of herpes zoster in the placebo groups of three randomized phase III clinical trials. *Infect Dis Ther*. 2022;11(6):2265-2277. **4.** Shingles symptoms and complications. Centers for Disease Control and Prevention. Reviewed April 19, 2024. Accessed March 26, 2025. <https://www.cdc.gov/shingles/signs-symptoms/index.html> **5.** Clinical overview of shingles (herpes zoster). Centers for Disease Control and Prevention. Reviewed June 27, 2024. Accessed September 23, 2025. <https://www.cdc.gov/shingles/hcp/clinical-overview/index.html> **6.** Marra F, Parhar K, Huang B, Vadlamudi N. Risk factors for herpes zoster infection: a meta-analysis. *Open Forum Infect Dis*. 2020;7(1):1-8. **7.** Prescribing Information for SHINGRIX. **8.** Data on file. Study 113077 (NCT01165229). GSK Study Register. Study entry at: <https://www.gsk-studyregister.com/en/trial-details/?id=113077> **9.** Berlinberg EJ, Kim E, Deiner MS, Patterson C, Porco TC, Acharya NR. Seasonality of herpes zoster and herpes zoster ophthalmicus. *J Clin Virol*. 2020;126:104306. **10.** Kilgore PE, Kruszon-Moran D, Seward JF, et al. Varicella in Americans from NHANES III: implications for control through routine immunization. *J Med Virol*. 2003;70(suppl 1):S111-S118. **11.** Data on file, GSK. **12.** Wreschnig LA. Selected Health Provisions of the Inflation Reduction Act. Congressional Research Service. 2022;1-3. Accessed May 6, 2025. <https://www.congress.gov/crs-product/IF12203>

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