

Are your patients at increased risk?

PATIENTS ≥ 50 YEARS OLD ARE AT INCREASED RISK FOR SHINGLES¹

- **99.5% of people ≥ 50 years old already have the virus** that causes shingles^{1,2}
- In **1 in 3 people**, the dormant virus reactivates in their lifetime, causing shingles to erupt¹
- Shingles risk sharply increases **starting at age 50**. Increasing age can lead to a natural decline in VZV-specific immunity^{1,3}

Patient portrayal.

ADDITIONAL RISK FACTORS TO LOOK OUT FOR

In addition to age, certain comorbidities and psychological stress have been associated with increased risk of shingles^{4*}

DIABETES



increased risk in patients with DIABETES vs without

32 studies, pooled effect estimate:
RR: 1.24 (95% CI: 1.14-1.35)

CARDIOVASCULAR CONDITIONS



increased risk in patients with CARDIOVASCULAR CONDITIONS[†] vs without

16 studies, pooled effect estimate:
RR: 1.34 (95% CI: 1.17-1.54)

CKD



increased risk in patients with CKD vs without

18 studies, pooled effect estimate:
RR: 1.29 (95% CI: 1.10-1.51)

PSYCHOLOGICAL STRESS



increased risk in patients with PSYCHOLOGICAL STRESS[§] vs without

8 studies, pooled effect estimate:
RR: 1.47 (95% CI: 1.03-2.10)

*Data from a meta-analysis assessing risk factors for HZ. The analysis included a total study population of 198,751,846 individuals, with 3,768,691 HZ cases across 88 studies (68 cohort and 20 case-control studies) from 1966 to 2019. The populations in these studies ranged from people aged 3 months to 104 years old.[†] Eighteen risk factors were identified in the meta-analysis, note not all are presented here. Limitations included the following: most studies were observational and had a higher likelihood of bias; the majority of studies used administrative data, which is subject to miscoding, errors, and can vary between practitioners; finally, heterogeneity was high across studies. This list is not exhaustive and may not present all conditions associated with an increased risk of HZ.[‡]

[†]Cardiovascular conditions included in each individual study in the meta-analysis varied by study and included heart disease, heart failure, hypertension, hyperlipidemia, stroke, atrial fibrillation/flutter, and other cardiovascular disease.[§]

[§]SHINGRIX is a vaccine indicated for prevention of HZ (shingles) in adults aged 50 years and older.[§]

[§]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).[§]

CI=confidence interval; CKD=chronic kidney disease; HZ=herpes zoster; RR=relative risk; VZV=varicella zoster virus.

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
- 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 a postmarketing observational study, an increased risk of Guillain-Barré syndrome was observed during the 42 days following vaccination with SHINGRIX

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



SHINGRIX
(ZOSTER VACCINE
RECOMBINANT, ADJUVANTED)

HOW DO YOU START THE

SHINGRIX conversation?

**YOUR RECOMMENDATION IS THE STRONGEST
PREDICTOR FOR PATIENTS TO GET VACCINATED⁶**



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^{3,7,8}

2

PERSONALIZE RISK AGE AND ADDITIONAL RISK FACTORS

- Starting at age 50, the risk of shingles sharply increases¹
- In addition to age, certain chronic conditions as well as psychological stress have been associated with an increased risk of shingles⁴

3

RECOMMEND SHINGRIX PROVEN OUTSTANDING EFFICACY

- SHINGRIX, administered as a 2-dose series, was proven more than 90% effective in preventing shingles in people 50 years and older^{5*}
- The most common side effects are pain, redness, and swelling at the injection site, muscle pain, tiredness, headache, shivering, fever, and upset stomach⁵



Visit **SHINGRIXHCP.com**

to learn about shingles risk factors and comorbidities

*Data from the phase 3 ZOE-50 (≥50 years of age) 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.^{5,9}

Important Safety Information (cont'd)

- 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%)
- 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 on other side and full Prescribing Information, also available at SHINGRIXHCP.com.

References: 1. Clinical overview of shingles (herpes zoster). Centers for Disease Control and Prevention. Accessed September 23, 2025. <https://www.cdc.gov/shingles/hcp/clinical-overview/index.html> 2. 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. 3. 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. 4. 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. 5. Prescribing Information for SHINGRIX. 6. Adult immunization standards. Centers for Disease Control and Prevention. Reviewed August 9, 2024. Accessed August 18, 2025. <https://www.cdc.gov/vaccines-adults/hcp/immz-standards/> 7. 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. 8. 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> 9. Data on file. Study 113077 (NCT01165229). GSK Study Register. Study entry at: <https://www.gsk-studyregister.com/en/trial-details/?id=113077>

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