



A CONVERSATION WORTH HAVING.
A VACCINE WORTH RECOMMENDING.

Having a **SHINGRIX** conversation with your patients can help prevent shingles and its potential long-lasting burden.*^{1,2}



*SHINGRIX is indicated for prevention of herpes zoster (HZ) and post-herpetic neuralgia (PHN), in adults 50 years of age or older and adults 18 years of age or older at increased risk of HZ¹

Almost all adults ≥ 50 years old are at risk of **shingles**^{4~}

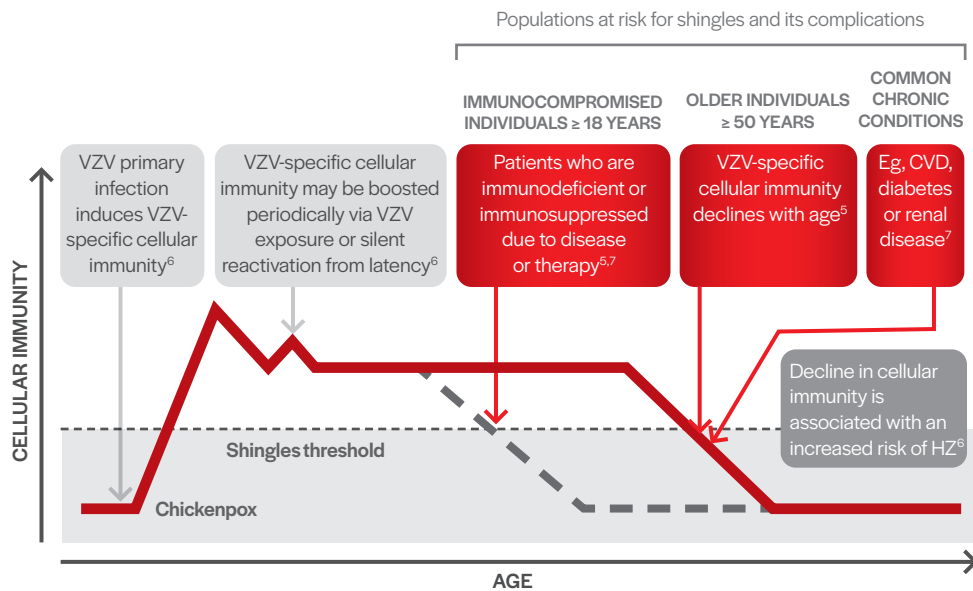
~99.7%

of adults ≥ 50 years old are infected with the varicella zoster virus⁴

In **1 out of 3 people**, the latent virus reactivates in their lifetime and causes shingles⁵

Populations at risk for **shingles [HZ]**⁶

T-cell response to VZV infection⁶

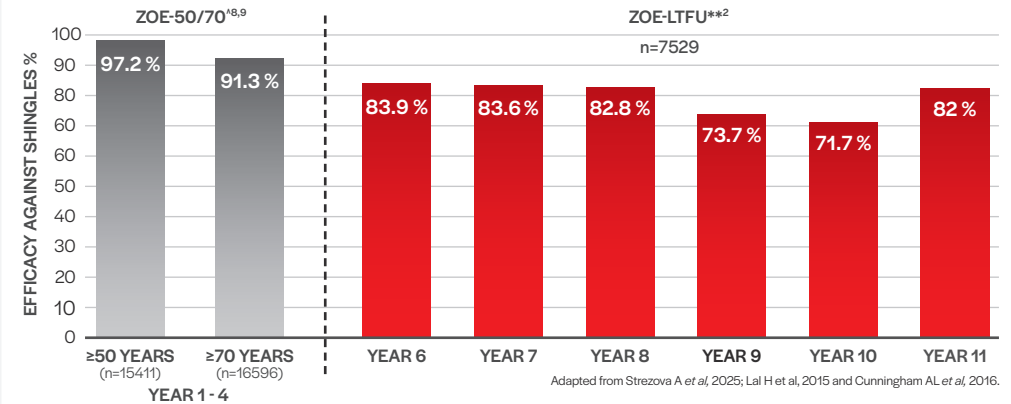


Adapted from Harpaz R et al, 2008; Johnson RW 2009, and Marra F et al, 2020.

- Effective response to reactivated VZV is by zoster-specific CMI⁶
- CMI declines with age (immune senescence), even in healthy individuals⁶
- CMI can also be compromised by disease or therapy, placing individuals at higher risk of shingles and its complications⁶

SHINGRIX – a non-live, adjuvanted vaccine that provides lasting protection against shingles^{1,2}

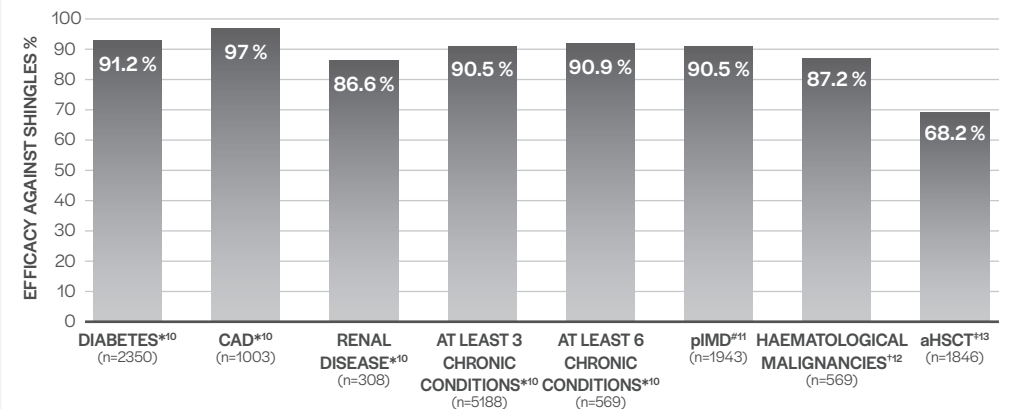
97.2% vaccine efficacy in adults ≥ 50 years with sustained efficacy over 11-year follow-up^{2,8,9}



Adapted from Strezova A et al, 2025; Lal H et al, 2015 and Cunningham AL et al, 2016.

- During the long-term follow-up, vaccine efficacy was maintained against PHN (87.5%) and other HZ-related complications (91.7%)²

Vaccine efficacy was maintained in adults with common chronic conditions, regardless of number of conditions present, as well as in immunocompromised individuals



Adapted from Oostvogels L et al, 2019; Dagnew AF et al, 2021; Dagnew AF et al, 2019 and Bastidas A et al, 2019.

aHSC: autologous haematopoietic stem cell transplant; CAD: coronary artery disease; CKD: chronic kidney disease; CMI: cell-mediated immunity; CVD: cardiovascular disease; HZ: herpes zoster; LTFU: long-term follow-up; pIMD: potential immune-mediated disease; VZV: varicella zoster virus.

*based on data generated in the United States. *analysis of vaccine efficacy in participants aged ≥ 50 years old (ZOE-50; median follow-up 3.2 years) and ≥ 70 years old (pooled ZOE-50/70; median follow-up 3.7 years).¹⁰ **ZOE-LTFU is phase 3b the long-term follow-up of the ZOE-50/70 modified vaccinated cohort (n=7273) starting about 5 years post vaccination and continuing for 6 years.²

¹¹post-hoc analyses of the pooled ZOE50/70 participants ≥ 50 years old with selected medical conditions. ¹²post-hoc analysis of pooled ZOE50/70 participants aged ≥ 50 years old with pre-existing potential immune-mediated diseases (pIMD) most frequently including psoriasis, spondyloarthritis and rheumatoid arthritis. ¹³phase 3 randomised, observer-blinded, placebo-controlled study of patients ≥ 18 years old with haematological malignancies who had a life expectancy ≥ 12 months and were receiving or had just finished immunosuppressive cancer treatments. ¹⁴phase 3 randomised, observer-blinded, placebo-controlled study of patients ≥ 18 years old who had undergone aHSC in the previous 50-70 days.¹⁵

SHINGRIX recommended dosing schedule¹



Vaccination schedule for adults ≥ 50 years and ≥ 18 years old at increased risk of shingles¹

Two doses, 0,5 mL each – administer the first dose followed by the second dose 2 months later.¹

SHINGRIX is for intramuscular injection only.¹



For patients who are or might become immunodeficient or immunosuppressed due to disease or therapy:

- The second dose can be given 1-2 months after the first dose.¹



Help protect at-risk patients from shingles and its complications^{1,2}
A CONVERSATION THAT'S WORTH HAVING.

FOR HEALTHCARE PROFESSIONALS ONLY.

References: 1. Shingrix approved professional information, July 2025. 2. Strezova A, Diez Domingo J, Cunningham AL, et al. Zoster-049 Study Group. Final analysis of the ZOE-LTFU trial to 11 years post-vaccination: efficacy of the adjuvanted recombinant zoster vaccine against herpes zoster and related complications. *EClinicalMedicine*. 2025;83:103241. 3. Tomlinson C. Why most people in South Africa can't get the shingles vaccine. [cited 2026 Feb 24]; Available from: <https://www.spotlightnsp.co.za/2025/05/27/why-most-people-in-south-africa-cant-get-the-shingles-vaccine/>. 4. 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:S111-S118. 5. Harpaz R, Ortega-Sanchez IR, Seward JF. Prevention of herpes zoster: recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR Recomm Rep*. 2008;57(RR-5):1-30. 6. Johnson RW. Herpes Zoster and Postherpetic Neuralgia: a review of the effects of vaccination. *Aging Clin Exp Res* 2009;21:236-243. 7. Marra F, Parhar K, Huang B, et al. Risk factors for herpes zoster infection: a meta-analysis. *Open Forum Infect Dis*. 2020;7(1). DOI: 10.1093/ofid/ofaa005. 8. Lal H, Cunningham AL, Godeaux O, et al. ZOE-50 Study Group. Efficacy of an adjuvanted herpes zoster subunit vaccine in older adults. *N Engl J Med*. 2015;372(22):2087-96. 9. Cunningham AL, Lal H, Kovac M, et al. Efficacy of the Herpes Zoster Subunit Vaccine in Adults 70 Years of Age or Older. *N Engl J Med* 2016;375(11):1019-1032. 10. Oostvogels L, Heineman TC, Johnson RW, et al. Medical conditions at enrollment do not impact efficacy and safety of the adjuvanted recombinant zoster vaccine: a pooled post-hoc analysis of two parallel randomized trials. *Human Vaccin Immunother* 2019;15(12):2865-2872. 11. Dagneu AF, Rausch D, Herve C, et al. Efficacy and serious adverse events profile of the adjuvanted recombinant zoster vaccine in adults with pre-existing potential immune-mediated diseases: a pooled post hoc analysis on two parallel randomized trials. *Rheumatology* 2021;60:1226-1233. 12. Dagneu AF, Ilhan O, Lee W-S, et al. Immunogenicity and safety of the adjuvanted recombinant zoster vaccine in adults with haematological malignancies: a phase 3, randomised, clinical trial and post-hoc efficacy analysis. *Lancet Infect Dis* 2019;19(3):988-1000. 13. Batsidas A, de la Serna J, El Idrissi M, et al. Effect of Recombinant Zoster Vaccine on Incidence of Herpes Zoster After Autologous Stem Cell Transplantation A Randomized Clinical Trial. *JAMA* 2019;322(2):123-133.

SHINGRIX ABBREVIATED SAFETY INFORMATION: **Contraindication:** Hypersensitivity to the active substances or to any of the excipients listed in section 6.1. **SPECIAL WARNING & PRECAUTIONS FOR USE:** Postpone vaccination in case of acute severe febrile illness. Do not inject intravascularly, subcutaneously or intradermally. As with all injectable vaccines, appropriate medical treatment and supervision should always be readily available in case of an anaphylactic event following vaccination. **ADVERSE EVENTS:** Very common – headache, gastrointestinal symptoms, myalgia, injection site reactions, fatigue, chills, fever.

[54] SHINGRIX powder for suspension for injection, Herpes zoster vaccine (recombinant, adjuvanted). Each 0,5 mL of the reconstituted vaccine contains: 50 mcg Varicella Zoster Virus (VZV) glycoprotein E antigen. Adjuvanted with ASO1a containing: 50 mcg plant extract *Quillaja saponaria* Molina, fraction 21 (QS-21), 50 mcg 3-O-desacyl-4'-monophosphoryl lipid A (MPL) from *Salmonella Minnesota*. Reg No.: 57/30.2/0735. For full prescribing information refer to the professional information approved by the medicines regulatory authority. **All adverse reactions are to be reported to GlaxoSmithKline by E-mail: aereporting.za@gsk.com or Tel: +27 (0) 10 300 1000.** Additionally, health care providers are to report any suspected adverse drug reactions to SAHPRA via the Med Safety APP (Medsafety X SAHPRA) and eReporting platform (who-umc.org) found on the SAHPRA website. Trademarks are owned by or licensed to the GSK group of companies. ©2026 GSK group of companies or its licensor. Holder of Certificate of Registration: GlaxoSmithKline South Africa (Pty) Limited, Reg. No.: 1948/030135/07. No 1 Bridgeway Road, Bridgeways Precinct, Century City, Cape Town 7441. Marketed by Adcock Ingram Limited. Co. Reg. No. 1949/034385/06. Private Bag X69, Bryanston, 2021. Customer Care: 0860 ADCOCK/232625. www.adcock.com. 05.2026/1000005545. PM-ZA-SGX-LBND-260005 June 2026.



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