# Herpes Simplex Keratitis Treatment Guidelines

## Adult

<table>
<thead>
<tr>
<th>Condition</th>
<th>Treatment</th>
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| Epithelial      | **Local treatment:**  
Topical Aciclovir 5 times a day for 1-2 weeks  
- Systemic treatment:  
  - Immunocompromised patients  
  - Non-compliance, inability to use or tolerate, or ocular toxicity from topical Aciclovir  
  Valaciclovir 500mg BD for 7 days |
| Stromal         | **Without epithelial ulcer:**  
Valaciclovir 500mg ONCE a day during topical steroid use  
PLUS Prednefrin Forte eye drops 4-6 times a day tapered over >10 weeks  
**With epithelial ulcer:**  
Valaciclovir 1g TDS for 7-10 days*  
PLUS Prednefrin Forte eye drops BD tapered slowly as disease comes under control |
| Endothelial     | dosage at discretion of ophthalmologist  
* Valaciclovir 500mg ONCE a day to 1g TDS for 7-10 days*†  
PLUS Prednefrin Forte eye drops 4-6 times a day tapered over >10 weeks |
| Keratouveitis   | Valaciclovir 1g TDS for 7-10 days*  
PLUS Prednefrin Forte eye drops 4-6 times a day tapered over >10 weeks  
Refer patient to cornea/uveitis clinic, respectively depending on degree of cornea or uveal involvement |
| Prophylaxis     | **Indications:**  
- Multiple recurrences of any type of HSK, especially stromal HSK  
- Patients with a history of ocular HSV:  
  - following any ocular surgery, including penetrating keratoplasty  
  - during immunosuppressive treatment  
* Valaciclovir 400mg BD  
OR  
Valaciclovir 500mg ONCE a day  
* Reduce Valaciclovir to prophylactic dose after 7-10 days and maintain for as long as frequent topical steroids are in use  
† There is a lack of clinical evidence to guide dosage in this situation |

## Use in Pregnancy

- Aciclovir – Preferred due to more clinical experience. Category B3.  
- Valaciclovir – Limited data do not suggest an increased risk of congenital malformations. May be used from 36 weeks of pregnancy. Category B3.

## Pediatric

### Pediatric local treatment

- **3 months to 18 years**  
  - Epithelial HSK:  
    - Topical aciclovir 5 times a day for 14 days1,2 or for at least 3 days after healing, whichever is shorter

### Pediatric systemic treatment

- **Indications:**  
  - Stromal HSK  
  - Skin involvement  
  - Coexistent systemic disease  
  - Non-compliance, inability to use or tolerate, or ocular toxicity from topical Aciclovir  
  - Immunocompromised patients – seek advice from a Paediatric Infection Diseases Physician

<table>
<thead>
<tr>
<th>Birth (at term) to 3 months</th>
<th>Seek advice from a Paediatric Infection Diseases Physician</th>
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</table>
| 3 months to 12 years        | Oral Aciclovir 10 mg/kg (max 400 mg) 5 times a day for 5-7 days1 or until there are no new lesions  
PLUS  
Prednefrin Forte eye drops BD-QID a day. (For severe inflammation, consider hourly dosing for 1-2 days 3) |
| 12 years to 18 years        | Oral Aciclovir 10 mg/kg (max 400 mg) 5 times a day for 5-7 days1 or until there are no new lesions  
OR  
Valaciclovir 500 mg BD for 5 days2 if first episode  
(longer if new lesions appear during treatment or healing is incomplete)  
Valaciclovir 500 mg BD for 3-5 days2 if recurrent episode  
PLUS  
Prednefrin Forte eye drops BD-QID a day. (For severe inflammation, consider hourly dosing for 1-2 days 3) |

1 Dosages taken from Australian Medical Handbook Children’s Dosing Companion  
2 Dosages taken from British National Formulary for children

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