## **Herpes Simplex Keratitis Treatment Guidelines**

ADULTO		
ADULTS		
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 1 g TDS for 7-10 days*†  PLUS  Prednefrin Forte eye drops 4-6 times a day tapered over >10 weeks	
Keratouveitis	Valaciclovir 1 g 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  Aciclovir 400mg BD  OR  Valaciclovir 500mg ONCE a day	

<sup>\*</sup> 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

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Adult Renal Dosing for oral antivirals				
CrCl (mL/min)	Dose	Frequency		
Normal dosage Valaciclovir 500mg ONCE a day				
<30	500mg	Every 48 hours		
Normal dosage Valaciclovir 500mg BD				
<30	500mg	Every 24 hours		
Normal dosage Valaciclovir 1g TDS				
30-49	1g	Every 12 hours		
10-29	1g	Every 24 hours		
<10	500mg	Every 24 hours		
Normal dosage Aciclovir 400mg BD				
0-10	200mg	Every 12 hours		

## **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.

## **PAEDIATRIC**

- Aciclovir is the drug of choice
- Valaciclovir must only be used in children >12 years old

Paediatric local treatment		
3 months to 18 years	Epithelial HSK:	
	Topical aciclovir 5 times a day for 14 days <sup>1,2</sup> or for at least 3 days	
	after healing, whichever is shorter	
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## 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

Birth (at term) to 3 months	Seek advice from a Paediatric Infection Diseases Physician	
3 months to 12 years	Oral Aciclovir 10 mg/kg (max 400 mg) 5 times a day for 5-7 days <sup>1</sup> 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 <sup>1</sup> )	
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 days²if 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 days¹)	

Dosages taken from Australian Medical Handbook Children's Dosing Companion

Lanyard produced by the Save Sight Institute, Sydney Eye Hospital and SESLHD Sponsored by a grant from the Sydney Eye Hospital Foundation

<sup>&</sup>lt;sup>2</sup> Dosages taken from British National Formulary for children