

ANTIVIRALS – ACYCLOVIR & VALACYCLOVIR

Below are suggested duration of therapy. Actual duration depends on clinical response.

Infection	Acyclovir	Valacyclovir
	Acyclovir available as: 200mg, 400mg and 800mg tabs 40mg/mL suspension <i>*only 800mg tabs are listed in the Ontario Drug Benefit formulary</i>	Valacyclovir available as: 500mg, 1000mg tabs <i>*only 500mg tabs are covered under ODB for the indication of herpes zoster in patients > 50 years. (limited use code is required)</i>
Orolabial herpes (HSV)	<i>Immunocompetent / immunocompromised</i> Acyclovir IV: 5mg/kg IV q8h PO: 400mg 5x/day OR 800mg TIDx 5 days	Valacyclovir 2g BID x 1 day Duration in immunocompromised patients 5-10 days
Genital herpes	Initial episode Acyclovir 200mg 5x/daily x 5 – 10 days *CDC recommends acyclovir 400mg TID for 7-10 days	Primary episode Valacyclovir 1g BID x 10 days
	Recurrent episodes: 800mg po TID x 2 days OR 400mg po TID x 5 days <i>(HIV patients: 400mg dosing regimen for 5 – 10 days)</i>	Recurrent: 500mg BID or 1 gram DAILY x 3 days Duration in immunocompromised patients 5-10 days
Severe HSV (including encephalitis)	Acyclovir: 10mg/kg IV q8h (encephalitis x 21 days) Neonates: 20mg/kg IV q8h Children 3 months to < 12 years of age: 10-15mg/kg IV q8h	

Infection	Acyclovir	Valacyclovir
Chicken pox (Varicella) VZV	<u>Immunocompetent</u> Acyclovir Severe infection: IV: 10mg/kg IV q8h (x 5 days; duration based on clinical response) PO: 800mg 5x/day (x 5 days; duration based on clinical response)	Valacyclovir PO: 1g TID x 5 days
	<u>Immunocompromised</u> Acyclovir Severe: IV: 10mg/kg IV q8h (x 7 days; Consider extended course if lesions are slow to heal)	Valacyclovir PO: 1g TID x 7 days Consider extended course if lesions are slow to heal
Shingles (Herpes zoster)	<u>Immunocompetent</u> Acyclovir IV: 10mg/kg IV q8h x 7-10 days PO: 800mg 5x/day x 7-10 days	Valacyclovir PO: 1g TID x 7 days
	<u>Immunocompromised</u> Acyclovir Severe: 10mg/kg IV q8h Therapy should continue until lesions have completely healed Non-severe: 800mg 5x/day x 7 days	<u>Immunocompromised</u> Severe: Start with IV acyclovir, step down to oral valacyclovir when lesions have begun to regress

All adult acyclovir IV dosing should be calculated based on ideal body weight. IV administration should be used for severe infections or complications, infections during pregnancy, neonatal infections, immunocompromised patients (HIV), and patients with hypersensitivities to oral ingredients.