APPENDIX VI: Summary of Treatment Recommendations

1. Epithelial Keratitis

a. Dendritic

(Therapeutic dose of topical or oral antiviral agent)

Acyclovir (Zovirax®): 400 mg 3–5 times daily for 7–10 days **or** Valacyclovir (Valtrex®): 500 mg twice daily for 7–10 days **or** Famciclovir (Famvir®): 250 mg twice daily for 7–10 days **or**

Trifluridine ophthalmic solution 1% (Viroptic): instillation of 1 drop into affected eye(s) 9 times daily for 7 days; may decrease dose to 5 times daily after 7 days if ulcer is healed. Treatment should not extend beyond 21 days because of potential ocular toxicity.

or

Ganciclovir ophthalmic gel 0.15% (Zirgan®): instillation of 1 drop into affected eye(s) 5 times daily while awake until healing of corneal ulcer, followed by 1 drop 3 times a day for 7 days.

b. Geographic

(Therapeutic dose of topical or oral antiviral agent)

Acyclovir (Zovirax®): 800 mg 5 times daily for 14–21 days **or** Valacyclovir (Valtrex®): 1 g 3 times daily for 14–21 days **or** Famciclovir (Famvir®): 500 mg twice daily for 14–21 days **or**

Trifluridine ophthalmic solution 1% (Viroptic®): instillation of 1 drop into affected eye(s) 9 times daily for 7 days; may decrease dose to 5 times daily after 7 days if ulcer is healed. Treatment should not extend beyond 21 days because of potential ocular toxicity.

or

Ganciclovir ophthalmic gel 0.15% (Zirgan®): instillation of 1 drop into affected eye(s) 5 times daily while awake until healing of corneal ulcer, followed by 1 drop 3 times daily for 7 days.

2. Stromal Keratitis

a. Without epithelial ulceration

(Therapeutic dose of topical corticosteroid PLUS prophylactic dose of oral antiviral agent)

Prednisolone 1%: 6–8 times daily tapered over greater than 10 weeks **plus**

Acyclovir (Zovirax®): 400 mg twice daily **or** Valacyclovir (Valtrex®): 500 mg once daily **or** Famciclovir (Famvir®): 250 mg twice daily

As disease comes under control, prednisolone can be tapered slowly to the lowest possible dose and frequency as determined by the patient's clinical condition. The lower the dose and frequency of topical corticosteroid, the longer the interval between subsequent dose reduction. Oral antiviral agents in **prophylactic** doses (above) should be maintained during corticosteroid treatment.

b. With epithelial ulceration

(Limited dose of topical corticosteroid PLUS therapeutic dose of oral antiviral agent)

Prednisolone 1%: twice daily **plus**

Acyclovir (Zovirax®): 800 mg 3–5 times daily for 7–10 days **or** Valacyclovir (Valtrex®): 1 g 3 times daily for 7–10 days **or** Famciclovir (Famvir®): 500 mg twice daily for 7–10 days

The oral antiviral agent is reduced to prophylactic dose and maintained as long as topical corticosteroids are in use. As disease comes under control prednisolone can be tapered slowly. Note: there is no clinical trial data to support a specific recommendation for length of treatment.

3. Endothelial Keratitis

(Therapeutic dose of topical corticosteroid PLUS therapeutic dose of oral antiviral)

Prednisolone 1%: 6–8 times daily **plus**

Acyclovir (Zovirax®): 400 mg 3–5 times daily **or** Valacyclovir (Valtrex®): 500 mg twice daily **or** Famciclovir (Famvir®): 250 mg twice daily

The oral antiviral agent is reduced to prophylactic dose after 7–10 days and maintained as long as topical corticosteroids are in use. As disease comes under control, the topical corticosteroid can be tapered slowly. Note: there is no clinical trial data to support a specific recommendation for length of treatment.

Topical corticosteroid options

- 1. Fluorometholone 0.1% ophthalmic suspension
- 2. Rimexolone 1% ophthalmic suspension
- 3. Prednisolone Sodium Phosphate 1% ophthalmic solution
- 4. Prednisolone Acetate 1% ophthalmic suspension
- 5. Difluprednate 0.05% ophthalmic emulsion

Special circumstances

Low doses of acyclovir, valacyclovir, and famciclovir are safe for long-term prophylaxis against HSV keratitis in HIV-infected patients. Atopic patients with HSV keratitis may require prolonged treatment with oral antiviral agents.

Prophylaxis of recurrent HSV keratitis

Potential indications:

- 1. Multiple recurrences of any type of HSV keratitis, especially HSV stromal keratitis.
- 2. Recurrent inflammation with scar/vascularization approaching visual axis.
- 3. More than one episode of HSV keratitis with ulceration: strong stimulus for corneal vascularization and lipid deposition.
- 4. Post-keratoplasty performed for HSV-related scarring/astigmatism.
- 5. Postoperatively in patients with a history of HSV ocular disease undergoing any type of ocular surgery or laser procedure.
- 6. In patients with a history of ocular HSV during immunosuppressive treatment.

Prophylaxis options:

- 1. Acyclovir (Zovirax®): 400 mg twice daily for one year or
- 2. Valacyclovir (Valtrex®): 500 mg once daily or
- 3. Famciclovir (Famvir®): 250 mg twice daily

The optimal duration of prophylaxis is not fully established, but at least one year is recommended.

RENAL DOSING

The following tables are intended as general guidelines for renal dosing of oral antivirals. However, renal dosing is best determined in conjunction with a nephrologist.

Renal Dosing: HSV Epithelial Keratitis (Dendritic)

| Oral Antiviral | Creatinine | Dose | Frequency |
|----------------|------------------|--------|-------------------------|
| | Clearance | | |
| | (ml/min) | | |
| Acyclovir | Normal Dosage | 400 mg | 3–5 times daily |
| | > 25 | 400 mg | 3–5 times daily |
| | 10–25 | 400 mg | Every 8 hours |
| | 0–10 | 400 mg | Every 12 hours |
| Famciclovir | Normal Dosage | 250 mg | 2–3 times daily |
| | ≥ 40 – 59 | 250 mg | Every 12 hours |
| | 20–39 | 125 mg | Every 12 hours |
| | < 20 | 125 mg | Every 24 hours |
| | HD | 125 mg | Following each dialysis |
| Valacyclovir | Normal Dosage | 500 mg | Twice daily |
| | 30–49 | 500 mg | Every 12 hours |
| | 10–29 | 500 mg | Every 24 hours |
| | < 10 | 500 mg | Every 24 hours |

Renal Dosing: HSV Epithelial Keratitis (Geographic)

| Oral Antiviral | Creatinine | Dose | Frequency |
|----------------|---------------|--------|-------------------------|
| | Clearance | | |
| | (ml/min) | | |
| Acyclovir | Normal Dosage | 800 mg | 5 times daily |
| | > 25 | 800 mg | 3–5 times daily |
| | 10–25 | 800 mg | Every 8 hours |
| | 0–10 | 800 mg | Every 12 hours |
| Famciclovir | Normal Dosage | 500 mg | Every 8–12 hours |
| | ≥ 40 | 500 mg | Every 12 hours |
| | 20–39 | 500 mg | Every 24 hours |
| | < 20 | 250 mg | Every 24 hours |
| | HD | 250 mg | Following each dialysis |
| | | | |
| | | | |

| Renal Dosing: HSV Epithelial Keratitis (Geographic) cont | | | | |
|--|---------------------------|--------|----------------|--|
| Oral Antiviral | Creatinine Dose Frequency | | | |
| | Clearance | | | |
| | (ml/min) | | | |
| Valacyclovir | Normal Dosage | 1 g | 3 times daily | |
| | 30–49 | 1 g | Every 12 hours | |
| | 10–29 | 1 g | Every 24 hours | |
| | < 10 | 500 mg | Every 24 hours | |

Renal Dosing: HSV Stromal Keratitis (without epithelial ulceration)

| Oral Antiviral | Creatinine | Dose | Frequency |
|-----------------------|---------------|--------|-------------------------|
| | Clearance | | |
| | (ml/min) | | |
| Acyclovir | Normal Dosage | 400 mg | 2 times daily |
| | > 10 | 400 mg | Every 12 hours |
| | 0–10 | 200 mg | Every 12 hours |
| Famciclovir | Normal Dosage | 125 mg | 2 times daily |
| | ≥ 40 | 125 mg | Every 12 hours |
| | 20–39 | 125 mg | Every 12 hours |
| | < 20 | 125 mg | Every 24 hours |
| | HD | 125 mg | Following each dialysis |
| Valacyclovir | Normal Dosage | 500 mg | Once daily |
| | 30–49 | 500 mg | Every 24 hours |
| | 10–29 | 500 mg | Every 48 hours |
| | < 10 | 500 mg | Every 48 hours |

Renal Dosing: HSV Stromal Keratitis (with epithelial ulceration)

| Oral Antiviral | Creatinine | Dose | Frequency |
|----------------|-------------------|--------|-------------------------|
| | Clearance | | |
| | (ml/min) | | |
| Acyclovir | Normal Dosage | 800 mg | 3–5 times daily |
| | > 25 | 800 mg | 3–5 times daily |
| | 10–25 | 800 mg | Every 8 hours |
| | 0–10 | 800 mg | Every 12 hours |
| Famciclovir | Normal Dosage | 500 mg | 2 times daily |
| | ≥ 40 | 500 mg | Every 12 hours |
| | 20–39 | 500 mg | Every 24 hours |
| | < 20 | 250 mg | Every 24 hours |
| | HD | 250 mg | Following each dialysis |
| Valacyclovir | Normal Dosage | 1 g | 3 times daily |
| | 30–49 | 1 g | Every 12 hours |
| | 10–29 | 1 g | Every 24 hours |
| | < 10 | 500 mg | Every 24 hours |

Renal Dosing: HSV Endothelial Keratitis

| Oral Antiviral | Creatinine | Dose | Frequency |
|----------------|---------------|--------|-------------------------|
| | Clearance | | |
| | (ml/min) | | |
| Acyclovir | Normal Dosage | 400 mg | 3–5 times daily |
| | > 25 | 400 mg | 3–5 times daily |
| | 10–25 | 400 mg | Every 8 hours |
| | 0–10 | 400 mg | Every 12 hours |
| Famciclovir | Normal Dosage | 250 mg | 2–3 times daily |
| | ≥ 40 | 250 mg | Every 12 hours |
| | 20–39 | 125 mg | Every 12 hours |
| | < 20 | 125 mg | Every 24 hours |
| | HD | 125 mg | Following each dialysis |
| Valacyclovir | Normal Dosage | 500 mg | 2 times daily |
| | 30–49 | 500 mg | Every 12 hours |
| | 10–29 | 500 mg | Every 24 hours |
| | < 10 | 500 mg | Every 24 hours |

Renal Dosing: HSV Keratitis Prophylaxis

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|--|---------------|--------|-------------------------|
| Oral Antiviral | Creatinine | Dose | Frequency |
| | Clearance | | |
| | (ml/min) | | |
| Acyclovir | Normal Dosage | 400 mg | 2 times daily |
| | > 10 | 400 mg | Every 12 hours |
| | 0–10 | 200 mg | Every 12 hours |
| Famciclovir | Normal Dosage | 250 mg | 2 times daily |
| | ≥ 40 | 250 mg | Every 12 hours |
| | 20–39 | 125 mg | Every 12 hours |
| | < 20 | 125 mg | Every 24 hours |
| | HD | 125 mg | Following each dialysis |
| Valacyclovir | Normal Dosage | 500 mg | Once daily |
| | 30–49 | 500 mg | Every 24 hours |
| | 10–29 | 500 mg | Every 48 hours |
| | < 10 | 500 mg | Every 48 hours |