

**Table 2****HSV/VZV Treatment Recommendations for Adults**

| Indications  | Alternative Antivirals   | Renal Dose Adjustment   | Monitoring Parameters  |
|--|--|---|--|
| <p><b>HSV Encephalitis</b><sup>4-6</sup><br/>(Acyclovir 10mg/kg IV Q 8h x 14-21 d)</p> <p><b>Varicella Zoster</b><br/>(severe cases: acyclovir 10mg/kg IV Q8h x 10-14 d, encephalitis; other indications, 7-10 d)<sup>4-7</sup></p>  | <ul style="list-style-type: none"> <li>• Ganciclovir 5mg/kg IV Q12h (no clinical trials); 2nd line</li> <li>• Foscarnet 80-120mg/kg/d IV in 23 divided doses (for acyclovir-resistant HSV, immunocompromised patients); 3rd line</li> <li>• Ganciclovir 5 mg/kg IV Q12h one case report<sup>7</sup>); 2nd line</li> <li>• Foscarnet 90 mg/kg IV Q12h (for acyclovir resistant VZV, immunocompromised patients); 3rd line</li> </ul>  | <p><u>Ganciclovir</u></p> <p>CrCL (mL/min)    Dose (mg/kg)</p> <p>50-69    2.5 IV Q12h</p> <p>25-49    2.5 IV Q24h</p> <p>10-24    1.25 IV Q24h</p> <p>&lt; 10 or HD    1.25 tiw (post-dialysis)</p> <p><u>Foscarnet</u></p> <p>CrCL (mL/min/kg) Dose (mg/kg)</p> <p>&gt;1.4            40 IV Q8h</p> <p>&gt;1-1.4         30 IV Q8h</p> <p>&gt;0.8-1         35 IV Q12h</p> <p>&gt;0.6-0.8       25 IV Q12h</p> <p>0.5-0.6        40 IV Q24h</p> <p>0.4-0.5        35 IV Q24h</p> <p>&lt; 0.4            Avoid use</p> | <p><u>Ganciclovir</u></p> <ul style="list-style-type: none"> <li>• Thrombocytopenia, anemia, neutropenia</li> <li>• May lower seizure threshold of Imipenem</li> <li>• Do not use if ANC &lt; 500/mm<sup>3</sup> or if platelet &lt; 25,000/mm<sup>3</sup></li> </ul> <p><u>Foscarnet</u></p> <ul style="list-style-type: none"> <li>• Calcium</li> <li>• Phosphorus</li> <li>• Magnesium</li> <li>• Potassium</li> <li>• SCr/BUN</li> </ul> |
| <p><b>HSV Zoster</b><sup>6</sup><br/>(extensive cutaneous lesion or visceral involvement) in immunocompromised: acyclovir 10 mg/kg IV Q8h until improvement; can switch to oral tx to complete 10-14d</p> <p><b>Severe HSV infection</b><br/>(disseminated, pneumonitis, CNS, liver) in immunocompromised<sup>8</sup>: acyclovir 10mg/kg IV Q8h x 14-21 days. For mucocutaneous infection, genital infection, or for immunocompetent, use 5 mg/kg IV Q 8h.<sup>8</sup></p> | <ul style="list-style-type: none"> <li>• Ganciclovir 5 mg/kg IV Q12h until improvement; can switch to oral therapy (see dose below; no clinical trials); 2nd line</li> <li>• Foscarnet 90 mg/kg IV Q12h until improvement; can switch to oral therapy (acyclovir 800 mg PO 5 x's/d) to complete 10-14d Tx. For acyclovir-resistant HSV Zoster, immunocompromised patients. 3rd line</li> <li>• Ganciclovir 5 mg/kg IV Q12h x 14-21 days (no clinical trials); 2nd line</li> <li>• Foscarnet 40 mg/kg IV Q8h x 14-21days (acyclovir-resistant HSV, immunocompromised patients); 3rd line</li> </ul> |   |  |