## NEONATAL West of Scotland Drug Monographs ORAL/OTHER ROUTES

### **Aciclovir**

**FORM** Oral Suspension 200mg in 5ml

**INDICATION** 1. Suppression of neonatal Herpes Simplex virus

2. Post exposure prophylaxis of Varicella Zoster

#### **DOSE RANGE**

**Indication 1: Suppression of neonatal Herpes Simplex** 

AGE	DOSE	FREQUENCY	ROUTE
Birth to 6 months	300mg/m²/dose*	3 times daily	Oral

<sup>\*</sup>Use the modified body surface area (BSA) table to calculate doses. This table will give an approximation of the dose required. If a more accurate calculation of BSA is required please contact pharmacy.

Modified BSA table for Aciclovir oral dosing

Body weight (kg)	Body Surface area (m <sup>2</sup> )	Aciclovir dose (mg)
1	0.10	30
1.5	0.13	39
2	0.16	48
2.5	0.19	57
3	0.21	63
3.5	0.24	72
4	0.26	78
4.5	0.28	84
5	0.30	90
5.5	0.32	96
6	0.34	102
6.5	0.36	108
7	0.38	114
7.5	0.40	120
8	0.42	126

Round dose to nearest measurable dose for ease of administration

#### **DOSE RANGE**

Indication 2: Post exposure prophylaxis of Varicella and Herpes Zoster

AGE	DOSE	FREQUENCY	ROUTE
>4weeks to 6 months	10mg/kg	Every 6 hours	Oral
(See VZIG monograph for <4weeks of age or where aciclovir contraindicated))		Commence on day 7 after exposure for 7 days*	

<sup>\*</sup>if patient presents later than D7, course can be commenced up to D14 after exposure

### **FURTHER INFORMATION**

- The use of the oral route in neonates is based on anecdotal evidence and the pharmacokinetics are uncertain.
- Diarrhoea has also been a particular problem.

Veonatal

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LICENSED STATUS Unlicensed Use

STORAGE Stored at room temperature

APPLICABLE POLICIES West of Scotland Neonatal Guidelines

Post exposure prophylaxis for chickenpox and shingles - GOV.UK

(www.gov.uk)

Consult local policy if applicable

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Dose may vary depending on indication, age, renal function, hepatic function, and concomitant medications.

This monograph should be used in conjunction with the terms of reference document prepared by the West of Scotland pharmacist network. Information is correct at the time of publication and as per local practice agreement.

For further advice contact your clinical pharmacist or pharmacy department.

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