

ACICLOVIR

SYNONYMS Acyclovir

BRAND NAME ACICLOVIR DBL, VIATRIS

DRUG CLASS Antiviral

AVAILABILITY Viatris vial contains 250 mg or 500 mg of aciclovir as aciclovir sodium dihydrate.

DBL concentrate vial contains 250 mg/10 mL or 500 mg/20 mL of aciclovir. Also contains sodium hydroxide. The solution is clear and colourless to almost colourless.¹

Each 1 g of aciclovir contains 4.2 mmol of sodium.²

pH Infusion solution: 10–11¹

PREPARATION Viatris: reconstitute the 250 mg vial with 10 mL of water for injections or sodium

chloride 0.9%, or the 500 mg vial with 20 mL of water for injections or sodium

chloride 0.9% to make a concentration of 25 mg/mL.1

DBL and Viatris: dilute the dose to a maximum concentration of 5 mg/mL with a compatible fluid, i.e. dilute 250 mg (10 mL) to at least 50 mL, or 500 mg (20 mL) to at

least 100 mL. Shake to mix thoroughly.1

STABILITY Vial: store below 25 °C. Do not refrigerate.¹

Viatris reconstituted solution and infusion solution: use immediately.¹

DBL infusion solution: stable for 24 hours below 25 °C. When diluted with glucose 5%,

concentrations of 4.5–10 mg/mL are stable for 24 hours below 25 °C and

concentrations of 2.5 mg/mL are stable for 6 hours below 25 °C. Do not dilute to less

than 2.5 mg/mL with glucose 5%.1

Do not refrigerate aciclovir solutions. Crystals may form and they do not redissolve at

room temperature.1

ADMINISTRATION

IM injection Contraindicated, highly alkaline.1

SUBCUT injection Contraindicated, highly alkaline.¹

IV injection Contraindicated, may cause renal tubular damage.¹
IV infusion See PREPARATION. Infuse over at least 1 hour.¹

The 25 mg/mL solution can be infused undiluted over at least 1 hour. Use an

infusion pump.1

IV use for infants and children

Dilute the dose to 5 mg/mL and infuse over 1 hour. The maximum concentration is

7 mg/mL. More concentrated solutions may cause phlebitis.3

The 25 mg/mL solution can be infused undiluted into a central venous access device

over at least 1 hour. Use a syringe pump.^{1,4}

COMPATIBILITY

Fluids Sodium chloride 0.9%^{1,2}, glucose in sodium chloride solutions¹, Hartmann's¹,

glucose 5% (see STABILITY)^{1,2}, Plasma-Lyte 148 via Y-site⁵

Y-site At 5 mg/mL of aciclovir²: amikacin, ampicillin, cefazolin, cefotaxime, cefoxitin,

ceftazidime, ceftriaxone, cefuroxime, clindamycin, dexamethasone, erythromycin, fentanyl, heparin sodium, hydromorphone, imipenem–cilastatin, methylprednisolone sodium succinate, metronidazole, sodium bicarbonate, tobramycin, trimethoprim-

 $sulfame tho xazole, \ van comycin$

At **7 mg/mL** of aciclovir²: anidulafungin, ceftaroline, filgrastim, linezolid, remifentanil,

zidovudine

At **10 mg/mL** of aciclovir²: defibrotide, fluconazole

INCOMPATIBILITY

Fluids No information

Drugs Adrenaline (epinephrine) hydrochloride⁶, amifostine², amiodarone⁶, aztreonam², caffeine citrate², cefepime⁶, ciprofloxacin⁶, daptomycin⁶, dobutamine², dopamine², eptifibatide⁶, esmolol⁶, foscarnet², haloperidol⁶, hydralazine⁶, ketamine⁶, ketorolac⁶, labetalol⁶, lidocaine⁶, methadone⁶, midazolam⁶, mycophenolate mofetil⁶, nicardipine⁶,

ondansetron², palonosetron⁶, paracetamol², pentamidine⁶, pethidine¹,

phenylephrine⁶, piperacillin-tazobactam², potassium phosphate⁶, promethazine⁶, sodium nitroprusside⁶, sodium phosphate⁶, tacrolimus², tramadol², vecuronium⁶,

verapamil6

SPECIAL NOTES Extravasation can cause severe local inflammation and tissue necrosis. Monitor the

injection site closely. Stop the injection if there is redness or pain. Ensure the patient is adequately hydrated to minimise renal toxicity.¹

Anaphylactic reactions have been reported.1

REFERENCES

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