COLD SORE (HERPES LABIALIS)

Patient Information

Is the patient immunocompromised due to medications or a condition?

YES → REFER

NO →

Review of symptoms

Is any of the following true?

• Fever, swollen glands, other systemic symptoms
• Lesion duration > 14 days
• Lesion on or around nose, or ocular involvement
• More than 6 episodes per year
• Lesion does not completely heal between episodes
• Lesion excessively red, swollen, or contains pus
• Unable to confirm patient diagnosis

YES → REFER

NO → Symptoms ± history is typical of a cold sore

Lesion present?

1) For symptomatic relief:
   - Non-pharmacologic methods
   - Docosanol (Abreva®)
   - Local anesthetics and/or protectants
   - Zinc and heparin (Lipactin®)

   AND

2) Consider prescribing oral antiviral for next episode

Prodromal symptoms?

Prescribe oral antiviral (>12 years old):
   - Acyclovir 400mg five times daily for 5 days
   - Valacyclovir 2g BID x two doses
   - Famciclovir 750mg BID x two doses, OR 1500mg for one dose
   - Acyclovir 5% / Hydrocortisone 1% applied 5 times per day for 5 days

2 - 12 years old:
   - Acyclovir 15mg/kg (max 200mg) 5 times per day for 5 days

Prophylaxis for anticipated exposure to a trigger?

Prescribe acyclovir 400mg BID starting 12 hours prior to and for duration of exposure

• Counsel on prevention
• Consider providing a supply of antivirals to promptly treat future episodes

Follow-up in 7 days

RESPONSE

NO RESPONSE → REFER