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**Efficacy of Famciclovir on Herpes Zoster Rash Resolution and Post-Herpetic Neuralgia.**

S.Tyring, R. Barbarash, J. Nahlik, A. Cunningham, J. Marley, M. Heng, T. Jones, T. Rea and the Collaborative Famciclovir Herpes Zoster Clinical Study Group.

Famciclovir (FCV) is the well-absorbed oral form of the potent and selective anti-herpes virus agent, penciclovir. A prospective, randomized, double-blind study was conducted to compare FCV dosed at 500 mg and 750 mg tid for 7 days with placebo in the treatment of uncomplicated herpes zoster. 419 immunocompetent patients, aged $\geq$18 years whose zoster rash had been present for $\leq$ 72 hours were enrolled. Patients were assessed for lesion condition and pain pre-therapy, daily during week 1, daily until full crusting during week 2 and then weekly until all crusts had been lost. Both FCV doses were equally effective and significantly reduced the duration of VZV recovery from zoster lesions and the time to healing of zoster lesions compared with the placebo-treated group. In addition, a statistically significant decrease in the duration of acute phase pain was detected for famciclovir-treated patients presenting with severe rash when compared with placebo. The effect of famciclovir on PHN (defined as pain at or after healing) was evaluated by assessing pain at 5 monthly visits after healing. The duration of PHN was significantly reduced from 128 days to 62 and 55 days following treatment with FCV 500 mg and 750 mg, respectively. There were no significant differences in the safety profiles between famciclovir and placebo. In conclusion, this study demonstrates that famciclovir dosed tid is an effective and well tolerated treatment for patients with acute herpes zoster infection, significantly decreasing the time to cutaneous lesion resolution and the duration of PHN. This is the first prospective study clearly demonstrating a significant effect on PHN when an antiviral agent is administered to patients with acute herpes zoster infection.

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Comparison of topical capsaicin and parenteral acyclovir in the treatment of primary genital herpes: effect of treatment on the subsequent development of recurrent disease. L.R. Stanberry, N. Bourne, F.J. Bravo. Division of Infectious Diseases, Children's Hospital Research Foundation, Cincinnati, Ohio, 45229, U.S.A.

Capsaicin, an ionophore that selectively acts on afferent B-type sensory neurons, has no antiviral activity in vitro. However, we have previously shown that systemic treatment of guinea pigs with capsaicin before HSV inoculation reduced the severity of primary genital herpes. We now report a comparison of topical capsaicin and parenteral acyclovir (ACV) therapy begun 24 hrs after intravaginal HSV-2 inoculation of Hartley guinea pigs. Animals received either i.p. ACV (60mg/kg/d) or intravaginal capsaicin (0.2 ml 1%) twice daily for 7 days or served as untreated controls. Animals were evaluated daily for 9 wks to determine the course of primary and recurrent genital herpes. Severity of primary infection was assessed by calculating the area under the lesion score-day curve. The frequency of recurrent disease between days 15-63 was determined by enumerating the number of days recurrent herpetic lesions were observed. Primary infection was severe for the untreated controls ($9.1\pm1.0$, mean$\pm$s.e.) but was significantly less severe for the ACV and capsaicin treated groups ($5.3\pm0.9$ and $3.5\pm0.8$, respectively) ($p<0.05$). Untreated controls experienced frequent recurrences ($15.4\pm2.6$) as did the ACV treated animals ($16.5\pm2.4$). Capsaicin treatment, however, significantly reduced the frequency of recurrent disease ($7.6\pm1.3$) ($p<0.05$). Preliminary data from another experiment suggests that capsaicin treatment of the primary infection reduced latent infection in sensory ganglia. The mechanism by which capsaicin interferes with the establishment of latent infection remains to be elucidated.