

MANAGEMENT OF ASYMPTOMATIC NEONATES EXPOSED TO ACTIVE GENITAL LESIONS



Asymptomatic neonate following vaginal or cesarean delivery to parent with visible genital lesions that are characteristic of HSV

Obstetric provider obtains swab of lesion for HSV PCR and culture

Parental history of genital HSV prior to pregnancy?

NO

YES

Send parental type specific serology for HSV-1 and HSV-2 ab

At 24 hours of age obtain from the neonate:

- HSV surface cultures and/or PCRs
- HSV blood PCR
- CSF cell count, chemistries, and HSV PCR
- Serum ALT

Start IV acyclovir at 60mg/kg/day divided TID

Determine Maternal HSV Infection Classification (based on serology results)

Recurrent Infection

First Episode Primary or First Episode Non-Primary

Neonatal virology studies **negative** (PCRs negative; viral cultures **negative** at 48-72 hours)

Neonatal PCRs or viral cultures **positive**

Stop acyclovir. Educate family about signs & symptoms of neonatal HSV disease. Follow closely.

Neonate remains asymptomatic, CSF indices not indicative of infection, CSF and blood PCR negative, normal serum ALT

NO

YES

Treatment of Infection and Proven Disease: treat with IV acyclovir 60mg/kg/day divided TID for 14 days (SEM disease) or 21 days (CNS or disseminated disease)

Repeat CSF HSV PCR near end of 21 day course of treatment

NEGATIVE

POSITIVE

d/c IV acyclovir after 21 day treatment course

Continue IV acyclovir for 7 more days

At 24 hours of age obtain from the neonate:

- HSV surface cultures and/or PCRs
- HSV blood PCR

If neonate remains asymptomatic, do not start acyclovir.

Neonatal surface cultures **negative**, AND blood and surface PCRs **negative**

Educate family about signs & symptoms of neonatal HSV disease. Follow closely.

Neonatal surface cultures **positive**, OR blood and surface PCRs **positive**

Obtain CSF for cell count, chemistries, and HSV PCR. Send serum ALT. Start IV acyclovir at 60mg/kg/day divided TID.

Preemptive Therapy of Infection but No Proven Disease: treat with IV acyclovir at 60mg/kg/day divided TID for 10 days



Infographic by Martha Brucato, MD, PhD @marthabrucato

Adapted from the Algorithm for the evaluation of asymptomatic neonates following vaginal or cesarean delivery to women with active genital herpes lesions from: American Academy of Pediatrics. Herpes Simplex. IN: KIMBERLIN DW, BRADY MT, JACKSON MA, LONG SS, EDS. RED BOOK: 2018 REPORT OF THE COMMITTEE ON INFECTIOUS DISEASES. AMERICAN ACADEMY OF PEDIATRICS; 2018; 437-449