Amber with Guidance (Amber-G) *= To be recommended or initiated by a specialist* with follow up prescribing and monitoring by primary care clinicians.*
**Specialist is defined by the APC as a clinician who has undertaken an appropriate formal qualification or recognised training programme within the described area of practice.*

NHS South West Yorkshire Partnership NHS Foundation Trust | NHS Barnsley Hospital NHS Foundation Trust | NHS Barnsley Clinical Commissioning Group

Ganciclovir 0.15% Eye Gel

The details of side-effects, cautions, contraindications and interactions are not a complete list and the current BNF (https://www.medicinescomplete.com/#/) and the SPC (https://www.medicines.org.uk/emc/) remain authoritative.

Background Information	Ganciclovir 0.15% eye gel is licensed for acute herpetic keratitis in adults.
BNF therapeutic class	Eye; eye infections; viral eye infection; ophthalmic herpes simplex; antivirals; nucleoside analogues
Indication	Treatment of acute herpetic keratitis (dendritic and geographic ulcers) in adults.[1]
Dosage and administration	Instil one drop of gel in the inferior conjunctival sac of the eye to be treated, 5 times a day until complete corneal re-epithelialisation. Then 3 instillations a day for 7 days after healing. The treatment does not usually exceed 21 days.[1]
Cautions and Contraindication	Contraindications: Hypersensitivity to ganciclovir or aciclovir or to any of the excipients listed in section 6.1 of the SPC.[1] Cautions:[1] Ganciclovir eye gel is not indicated in the treatment of cytomegalovirus (CMV) retina infections. Efficacy in other viral types of keratoconjunctivitis has not been demonstrated. No specific clinical studies were performed in immunodepressed subjects. Ganciclovir eye gel contains 0.375 mg benzalkonium chloride in each tube of 5 g. Benzalkonium chloride may also cause eye irritation, especially in dry eyes or disorders of the cornea. Benzalkonium chloride may be absorbed by soft contact lenses and may change the colour of the contact lenses. Contact lenses should be removed prior to application and the patient should wait at least 15 min before reinsertion. Effects on ability to drive and use machines: Patients should refrain from driving a vehicle or operating machines on the occurrence of any visual disturbance or other visual symptomatology.[1]
Pregnancy and breast feeding	Fertility, pregnancy and lactation: [1] There is insufficient experience regarding administration during pregnancy or lactation for evaluating the safety of ganciclovir eye gel during these periods. Teratogenicity and effect on fertility have been observed in animal studies with orally or intravenous administered ganciclovir. Furthermore ganciclovir had shown potential genotoxicity with low safety margin. Consequently, administration during pregnancy or lactation is therefore not recommended, except in the absence of an alternative treatment. For women of childbearing age, contraceptives measures should be used. Due to the genotoxic effect in animal studies, men using ganciclovir eye gel are

	advised to use local contraceptive measure (as condom) during treatment and for up to three months thereafter.
Adverse Drug Reactions	Eye disorders: [1] - Very common: Transient burning or stinging sensations, eye irritation, blurred vision. - Common: Superficial punctate keratitis, conjunctival hyperaemia
Monitoring	No specific monitoring requirements.
Interactions	If more than one topical ophthalmic drug is being used, the drugs should be administered at least fifteen minutes apart. Ganciclovir eye gel should be instilled last. Although the quantities of ganciclovir passing into the general circulation after ophthalmic use are small, the risk of drug interactions cannot be ruled out. Please see the SPC for further information on interactions. [1]

Contact names and details

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References

1. VIRGAN (ganciclovir) 0.15% w/w eye gel SPC. Available at: https://www.medicines.org.uk/emc/product/4674/smpc Accessed <16.3.22>

https://www.england.nhs.uk/wp-content/uploads/2018/03/responsibility-prescribing-between-primary-secondary-care-v2.pdf

Development Process

This guideline has been subject to consultation by specialists in ophthalmology in Barnsley and was ratified by the Area Prescribing Committee on 13th April 2022.