



This patient group direction (PGD) must only be used by registered health professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used.

Patient Group Direction (PGD)

For the supply of

Aciclovir 400mg

By registered health care professionals for

suppression therapy of Herpes Simplex Virus (Genital Herpes)

Throughout the Manx Care and those contracted by the Manx Care where appropriate within practice

PGD NUMBER 155

1. Change history

Version number	Change details	Date
1	Original PGD ratified	October 2021

2. Medicines practice guideline 2: *Patient group directions*

Refer to the relevant sections of NICE medicines practice guideline 2: *Patient group directions* as stated in the blank template notes. For further information about PGD signatories, see the NHS and Manx Care [PGD website FAQs](#)

3. PGD development

Refer to the [NICE PGD competency framework for people developing PGDs](#)

Job Title & organisation	Name	Signature	Date
Author of the PGD			
Member of the PGD working group			

4. PGD authorisation

Refer to the [NICE PGD competency framework for people authorising PGDs](#)

Job Title	Name	Signature	Date
Medical Director			
Chief Pharmacist/ Pharmaceutical Adviser			
Senior Paramedic			
Director of Nursing			
GP Adviser			
Senior Microbiologist (if PGD contains antimicrobials)			

5. PGD adoption by the provider

Refer to the [NICE PGD competency framework for people authorising PGDs](#)

Job title and organisation	Signature	Date	Applicable or not applicable to area

6. Training and competency of registered healthcare professionals, employed or contracted by the Manx Care, GP practice or Hospice

Refer to the [NICE PGD competency framework for health professionals using PGDs](#)

	Requirements of registered Healthcare professionals working under the PGD
Qualifications and professional registration	<ul style="list-style-type: none"> Registered healthcare professionals, working within or contracted by the Manx Care, GP practice or Hospice who are permitted staff groups outlined within the current PGD policy Pharmacist must be currently registered with GPhC Pharmacists must be practising in Manx Care authorised premises i.e. contracted pharmacy premises Hold a recognised qualification in sexual health skills at degree or diploma level or equivalent post-registration qualification/training/competency in STI's. (An introduction to Sexual Health is not sufficient) Has been assessed as competent to provide care and treatment of genital infections. Competent in the use of the Fraser guidelines Has undergone regular training and updating in safeguarding children and adults
Initial training	<ul style="list-style-type: none"> Knowledge of current guidelines and the administration of the drug specified in this PGD/BNF and of the inclusion and exclusion criteria Training which enables the practitioner to make a clinical assessment to establish the need for the medication covered by this PGD Local training in the use of PGDs
Competency assessment	Staff will be assessed on their knowledge of drugs and clinical assessment as part the competency framework for registered health professionals using PGDs
Ongoing training and competency	The registered health care professionals should make sure they are aware of any changes to the recommendations for this medication; it is the responsibility of the registered health care professionals to keep up to date with continuing professional development. PGD updates will be held every two years

7. Clinical Conditions

Clinical condition or situation to which this PGD applies	Suppression therapy of Herpes Simplex Virus (Shingles)
Inclusion criteria	<ul style="list-style-type: none"> • Individuals 13 years and over assessed as competent using the Fraser guidelines and presenting within 72 hours of developing symptoms and a rash indicative of Herpes Zoster (Shingles) • An individual diagnosed with HSV by history and visual recognition of painful genital blisters and/or ulcers • An individual with a positive PCR or culture test for the presence of HSV • An individual who has had more than 4 recurrences within 12 months • An individual who is concerned about infecting a partner (in sero-discordant couples)
Exclusion criteria	<ul style="list-style-type: none"> • Individuals 13 to 16 years of age and not assessed as competent using Fraser Guidelines • Individuals <13 years of age, follow local safeguarding policy • Symptoms and rash of more than 72 hours duration • Involvement of the face/eyes - any suggestion of ophthalmic zoster should have immediate referral to a doctor • Pregnancy/Breast feeding • Renal impairment • Patient is immunosuppressed • Any known hypersensitivity to any component of the medicine • Patient refuses treatment under this Patient Group Direction • An individual who is hypersensitive to Aciclovir, any related antiviral medicines (e.g. Famciclovir, Valaciclovir) or any other constituent of the medicine • Possibility of Aciclovir resistant infection or failure to respond to treatment • An individual who is systemically unwell or has a generalized rash • An individual with severe localised secondary infection
Cautions (including any relevant action to be taken)	<ul style="list-style-type: none"> • Elderly (risk of neurological reactions) <p>Discuss with appropriate experienced clinician:</p> <ul style="list-style-type: none"> • For individuals <13 years of age, follow local safeguarding policy • Suppressive antiviral therapy with antivirals reduces the rate of acquisition of symptomatic genital herpes in sero-discordant couples

Arrangements for referral for medical advice	Patient should be referred to a more experienced clinical practitioner for further assessment
Action to be taken if patient excluded	Patient should be referred to a more experienced clinical practitioner for further assessment
Action to be taken if patient declines treatment	<ul style="list-style-type: none"> • A verbal explanation should be given to the patient on: the need for the medication and any possible effects or potential risks which may occur as a result of refusing treatment • This information must be documented in the patients' health records • Any patient who declines care must have demonstrated capacity to do so • Where appropriate care should be escalated

8. Details of the medicine

Name, form and strength of medicine	Aciclovir 400mg
Legal category	Prescription Only Medicine (POM)
Indicate any <u>off-label use</u> (if relevant)	None
Route/method of administration	Oral
Dose and frequency	400mg twice daily
Quantity to be supplied	1 original pack (repeatable to complete episode of care)
Maximum or minimum treatment period	Maximum treatment one episode of care
Storage	Room temperature
Adverse effects	<ul style="list-style-type: none"> • headache • feeling dizzy • feeling or being sick • diarrhoea • stomach pains • rash • skin reaction after exposure to light (photosensitivity) • itching • feeling tired • unexplained fever (high temperature) and feeling faint, especially when standing up
Records to be kept	The administration of any medication given under a PGD must be recorded within the patient's medical records

9. Patient information

<p>Verbal/Written information to be given to patient or carer</p>	<ul style="list-style-type: none"> • Verbal information must be given to patients and or carers for all medication being administered under a PGD • Where medication is being supplied under a PGD, written patient information leaflet must also be supplied • A patient information leaflet is available on request • Provide verbal and written information on Herpes Simplex Virus • 400mg tablets to be taken regularly throughout the day • Individuals who experience difficulty in swallowing the tablets may disperse them in a minimum of 50ml water which should be stirred before drinking • Abstinence from sexual contact is recommended during lesion recurrences or prodromes • Transmission may occur as a result of asymptomatic viral shedding • Male condoms, when used consistently and correctly, may reduce the risk of genital herpes transmission, although their use cannot completely prevent this • Disclosure is advised in all sexual relationships • Discussions around disclosure and transmission should be documented
<p>Follow-up advice to be given to patient or carer</p>	<ul style="list-style-type: none"> • If symptoms do not improve or worsen or you become unwell, seek medical advice immediately • To be reviewed in clinic when further treatment is required • Provide verbal and written information on Aciclovir • At every attendance for supply of medication a discussion should take place about considering stopping treatment. This should be documented in the case notes

10. Appendix A

References
<ol style="list-style-type: none"> 1. British National Formulary (BNF) available online: https://bnf.nice.org.uk 2. Nursing and Midwifery “The code” available online: https://www.nmc.org.uk 3. Current Health Care Professions Council standards of practice 4. General Pharmaceutical Council standards 5. The General Optical Council 6. Electronic medicines compendium available online: https://www.medicines.org.uk 7. NHS guidance from NHS choices: https://www.nhs.uk/conditions/shingles/#antiviral-medication

11. Appendix B

Health professionals agreed to practice

- Each registered healthcare professional will hold their own Competency framework which will be signed and agreed by their mentor.
- A mentor is defined within the Manx Care policy as any ward/area managers, sisters, senior nurses, GPs, pharmacists or senior paramedics who has completed the PGD training themselves.

12. Appendix C

Records

The practitioner must ensure the following is documented in the clinical record:

- Individuals name, address and date of birth
- Attendance date and reason for attendance
- Past and current medical history, including drug history
- Any known allergy
- Any advice given about the medication including side effects, how to take it and what to do if any concerns
- Any referral arrangements
- Any supply outside the product licence
- The consent of the individual
- If the individual is < 16 years of age document competency using Fraser guidelines
- If individual < 13 year of age record action taken
- Record the name of the medication, dose regime, quantity supplied.
- Record any follow up arrangements