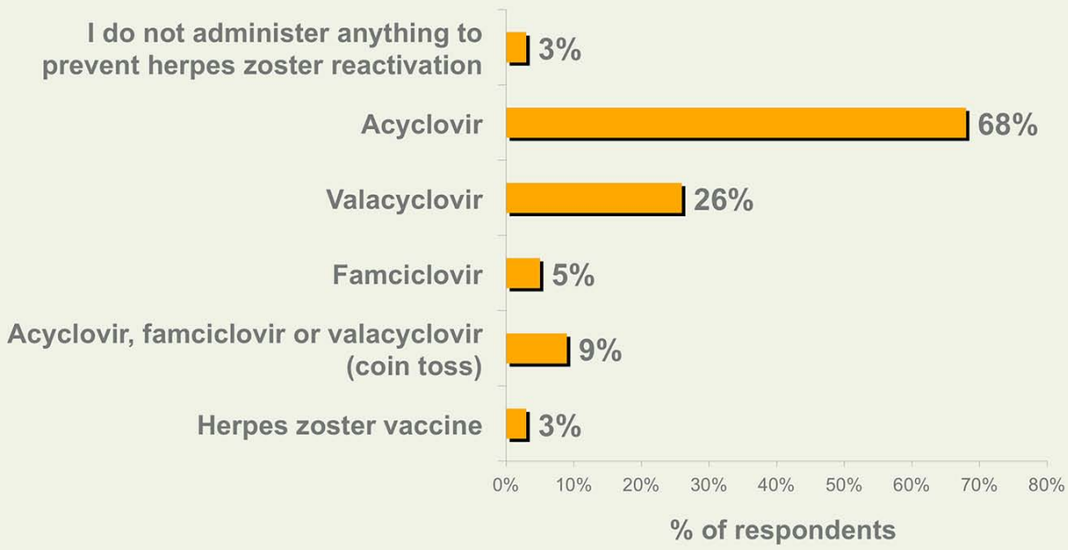
Prevention of herpes zoster reactivation in patients receiving proteasome inhibitors

Which, if any, of the following agents do you use to prevent herpes zoster reactivation in patients who receive bortezomib? (Select all that apply)



EDITOR'S COMMENTS

One of the issues with proteasome inhibitor therapy that is particularly relevant in the longer-term maintenance setting is the potential for herpes zoster reactivation, and we asked about the specific choice of antiviral agent and found that acyclovir rather than valacyclovir was the most common selection by oncologists and the faculty. Dr Vij believes that although these agents are equally effective, valacyclovir has the convenience of once-daily administration, whereas full-dose acyclovir is administered 3 times a day. However, he notes that oncologists are often limited by insurance carriers' preferences for acyclovir, which is generic and less expensive.

SELECT REFERENCES WITH LINKS

Minarik J et al. **Low-dose acyclovir prophylaxis for bortezomib-induced herpes zoster in multiple myeloma patients.** *Br J Haematol* 2012;159(1):111-3. Abstract

Fukushima T et al. **Daily 500 mg valacyclovir is effective for prevention of Varicella zoster virus reactivation in patients with multiple myeloma treated with bortezomib.** *Anticancer Res* 2012;32(12):5437-40. Abstract