CMV hyperimmune globulin + aciclovir prevents CMV infection in heart transplant recipients

None of 23 patients administered cytomegalovirus (CMV) hyperimmune globulin and oral aciclovir following heart transplantation developed symptomatic CMV infection or reactivated CMV during therapy. However, when therapy was stopped, 5 seropositive patients with seropositive donors had reactivated CMV infection. Two of these patients developed symptomatic disease, which was subsequently resolved within 3 weeks with an increased dosage of CMV hyperimmune globulin and IV aciclovir.

Patients received CMV hyperimmune globulin ('Cytotect') 1 ml/kg on days 1, 8, 15 and 22 and 6 weeks after transplantation, in combination with oral aciclovir ('Zovirax') 1600 mg/day for 6 weeks. 17 patients and 18 donors were seropositive for CMV.

Eisenmann D, Knipp H, Laube H, Stegmann T. Prevention of cytomegalovirus disease in heart transplant recipients by prophylaxis with cytomegalovirus hyperimmune globulin plus oral acyclovir.

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