

Limited evidence for benefits of interventions in preventing cold sores

How effective are interventions for the prevention of herpes simplex labialis (HSL) in people of all ages?
Long-term use (>one month) of antiviral drugs taken by mouth resulted in a small decrease in cold sores e.g. from 1.80 to 0.85 episodes per participant over 4 months. The preventive effect of long-term use of aciclovir cream applied to the lips was uncertain. Short-term use of either antiviral drugs or creams did not prevent cold sores. Neither short-term nor long-term use of these antiviral drugs or creams appeared to cause side effects. The preventive effects of sunscreen were uncertain. There was very little evidence about the preventive effects of thymopentin, low-energy laser, and hypnotherapy. There were no preventative effects of lysine, LongoVital® supplementation, gamma globulin, herpes virus vaccine, yellow fever vaccine, levamisole or interferon. Application of sunscreen prevented cold sores induced by experimental ultraviolet light, but did not prevent cold sores induced by sunlight.
The quality of the evidence was low to moderate for most outcomes, but was very low for some. Fifty-six percent of studies were industry-funded.
HSL, or cold sores, is a common disease of the lips caused by the herpes simplex virus, which is found throughout the world. It presents as a painful vesicular eruption, forming unsightly crusts, which cause cosmetic disfigurement and psychosocial distress. There is no cure available, and it recurs periodically.
Chi C-C et al. Interventions for prevention of herpes simplex labialis (cold sores on the lips). Cochrane Reviews, 2015, Issue 11. Art. No.: CD010095.DOI: 10.1002/14651858. CD010095.pub2. This review contains 32 studies involving 2,640 participants, covering 19 treatments.

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