

Table 1. Antibiotic Treatment for Scrub Typhus (except pregnant women), strength of recommendation and quality of evidence

Regimen	Grade *	Adults	Children > 8 year-old	Children < 8 year-old
Standard	A II	Doxycycline: 100 mg every 12 h for 7 days ^{a, b} Or Tetracycline: 500 mg every 6h for 7 days	Doxycycline for 7 days: . 5 mg/ kg /day up to 100 lb . adult dosage if more than 100 lb	Chloramphenicol ^a for 7 days: 50 mg/kg/day divided dose every 6 h
Alternative 1	A II	Chloramphenicol ^b 500 mg every 6 h for 7 days		
Alternative 2	A I	Rifampin ^{c, e} : 900 mg (or 15mg/kg) for 7 days		
Alternative 3	B III	Azithromycin ^{d, e} : 500 day 1 and 250 mg daily for 2-4 more days		

^a Short-term regimen (100 mg every 12 h for 3 days or 200 mg single dose) have been reported to be effective in mild cases but more studies are required

^b Intravenous drug may be used in case of vomiting or severe disease. However, chloramphenicol is usually the drug of choice in severe cases as intravenous doxycycline is not available in many endemic areas.

^c Supported by *in vitro* data and one study in the treatment of mild cases in northern Thailand. See comments in the text.

^d Supported by *in vitro* data and few reports in the treatment of pregnant women.

^e Not approved by FDA for this indication

* Strength of recommendation and quality of evidence as reported in reference 12.

- A : Good evidence to support a recommendation for use
- B : Moderate evidence to support a recommendation for use
- I : Evidence from ≥ 1 properly randomized controlled trial
- II : Evidence from ≥ 1 well designed clinical trial without randomization from cohort or case-controlled analytic studies
- III : Evidence from opinions of respected authorities, based on clinical experience, descriptive studies, or report of expert committees