

Pre-Vetoryl Cortisol: an improved monitoring protocol

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History and clinical examination

The most important factor to consider when re-evaluating a dog receiving Vetoryl is to carefully consult with the owner regarding the dog's clinical response at home. This critical part of the assessment is often overlooked in a busy clinic but is vital to ensure good compliance, safety and optimal response to therapy.

Owners reporting at any time that their dog is unwell should be seen at their veterinary practice so that iatrogenic hypoadrenocorticism can be investigated (through cortisol results and the results of haematology, biochemistry and electrolyte analysis).

Pre-Vetoryl Cortisol

Suitable dogs

- Once- or twice-daily Vetoryl dosing
- Adrenal- or pituitary-dependent hyperadrenocorticism (HAC)
- Clinically well dogs (with or without signs of HAC)
- Calm dogs

Unsuitable dogs

- Aggressive dogs
- Stressed dogs (e.g. persistently barking)
- Unwell dogs

Appointment

- Book an appointment just before the next Vetoryl dose is due
- If the dog is normally given Vetoryl at an inconvenient time (e.g. 6 am) then ask owner to give at a convenient time from at least the day before (e.g. 9 am)*
- Make sure owner has not given Vetoryl and that nothing stressful has happened that morning (e.g. vomiting, injury)
- Ensure the owner has completed the Quality of Life Questionnaire
- Take history** and examine the dog, checking for signs of HAC

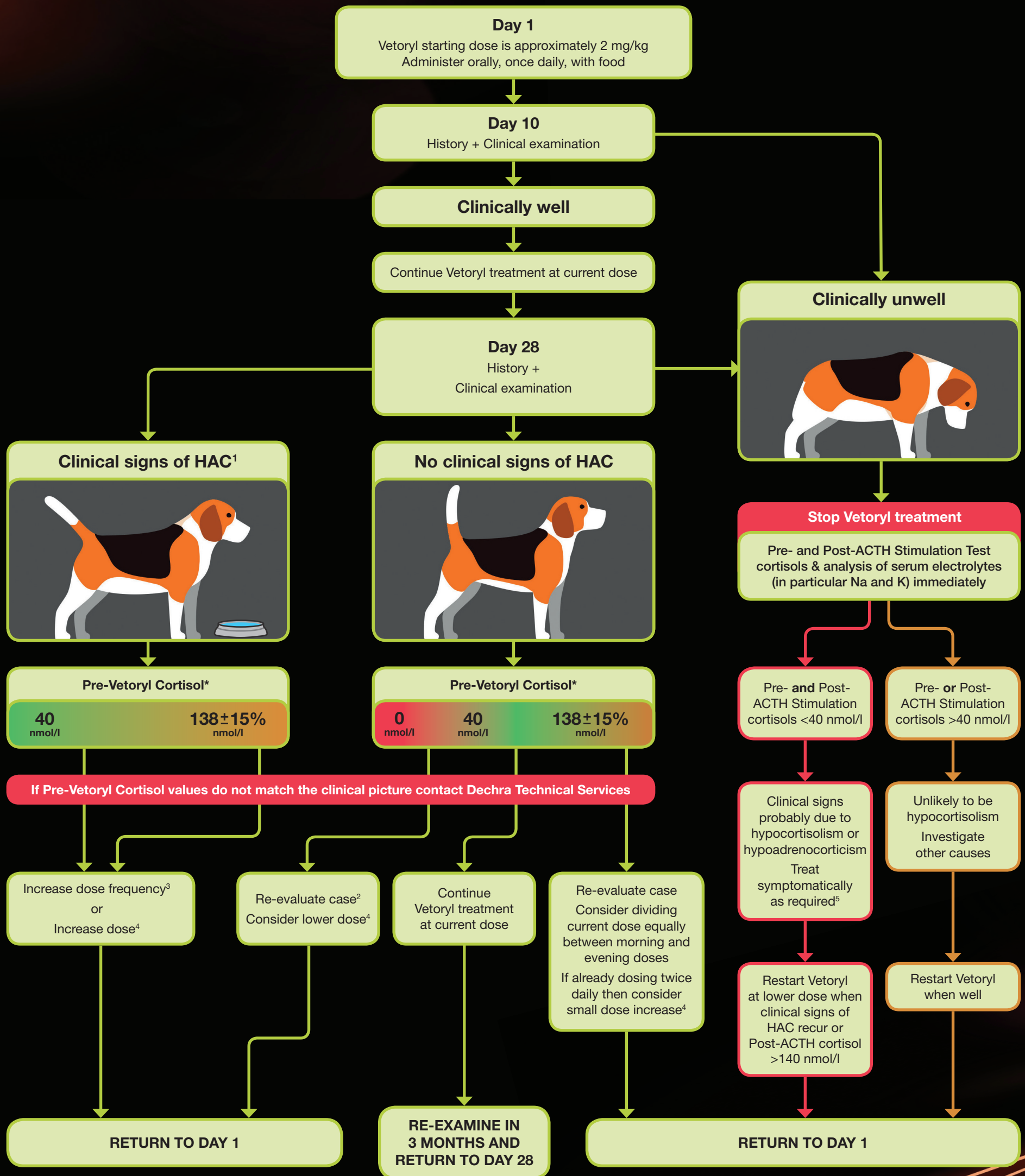
Sample

- Take sample immediately after examination and before administration of Vetoryl
- 1 to 2 ml of blood in heparin or serum tube
- Can be separated and stored for up to 1 week
- Send to an external laboratory participating in an external quality assurance scheme (e.g. ESVE- or SCE- programmes) and preferably that uses a Siemens IMMULITE® – or a method that has been validated against this machine

*If a patient is receiving Vetoryl twice daily, and is being monitored prior to the evening dose, then this is the dose that should not have been administered before sampling. The morning dose can be given as per the patient's regular routine

**Online logbook for owners is available

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¹ Polyuria/polydipsia, polyphagia, panting & lethargy should resolve or improve in 1 month. Alopecia & pot belly appearance may take 3-6 months to resolve

² Reassess history and consider Pre-Vetoryl ACTH Stimulation Test. Contact Dechra Technical Services for further information

³ If symptoms are not adequately controlled for an entire 24 hour inter-dose period, consider increasing the total daily dose by up to 50% and dividing it equally between morning and evening doses

⁴ Use combinations of capsule sizes to increase or decrease the once or twice daily dose

⁵ Dexamethasone to treat hypocortisolaemia, IV 0.9% NaCl to resolve dehydration & hyperkalaemia; alternatively hydrocortisone CRI and IV 0.9% NaCl

*These figures are based on the use of Siemens IMMULITE 1000/2000 analysers; other analysers may have different thresholds and veterinary surgeons should consult their laboratory if in doubt