TROUBLE-SHOOTING CUSHING'S DOGS ON VETORYL:
THE TOP TEN QUESTIONS

Mark E. Peterson, DVM, ACVIM
The Animal Medical Center, New York, NY
Animal Endocrine Clinic, NYC & Bedford Hills, NY

1. My client forgot to give VetorylR this morning. What should she do?

If it is more than 6 hours after the dose was missed, simply wait until the next morning and get back on the regular schedule. If it has been less than 6 hours, go ahead and give the missed dose immediately and continue as usual tomorrow.

2. My client accidentally gave a double dose of VetorylR. What should she do?

A single small overdose is unlikely to cause major problems, but the dog may show signs of hypocortisolemia, namely lethargy, anorexia and GI upset. Administration of oral prednisone (0.1 mg/kg daily) for 2 days should prevent any clinical signs. VetorylR can then be re-started at the usual dose.

3. My client accidentally gave a dose of VetorylR to the other dog in the household. What should she do?

Based on laboratory toxicity studies, a single dose of up to 6.7 mg/kg should be safely tolerated by a health dog.

4. Can I give VetorylR to a dog with liver or kidney disease?

The manufacturers do not recommend using this product in dogs with liver or kidney disease (this does NOT include dogs with glucocorticoid hepatopathy).

In addition, it should not be used in dogs receiving potassium-sparing diuretics (e.g., spironolactone) and should be used cautiously in dogs receiving angiotensin converting enzyme inhibitors (e.g., Enalapril).

5. I want to switch a patient from mitotane to VetorylR. How should I do this?

The product insert recommends a 1-month break from mitotane before starting VetorylR and an ACTH-stimulated cortisol > 9.0 ug/dl. However, many dogs show clinical signs of Cushing's syndrome shortly after discontinuing mitotane, and an ACTH stimulation test may be performed sooner if this occurs.

Vetoryl (Trilostane); Dr. Mark E. Peterson
6. I have a patient with PDH and neurologic signs. Will Vetoryl\textsuperscript{R} control problems arising from an enlarging pituitary mass?

No. Vetoryl works at the level of the adrenal gland to limit cortisol production. It does not limit ACTH release by the pituitary tumor and not will not prevent or mitigate neurologic problems in dogs with macroadenomas. Adjunctive radiation therapy may be an appropriate choice for this patient.

7. I have a patient with an adrenal tumor. If I give Vetoryl\textsuperscript{R} prior to surgery, will the mass get smaller?

No. Vetoryl\textsuperscript{R} has not cytotoxic effects on adrenal tumors. It will not shrink the mass or prevent metastatic spread. However, Vetoryl\textsuperscript{R} does effectively control the clinical signs of HAC in these patients, and is licensed for use in dogs with adrenal tumors. Surgery is the optimal approach in these cases, but Vetoryl should be considered if the mass is inoperable or if other factors make surgery a poor choice.

8. Can I break open the Vetoryl\textsuperscript{R} capsule and mix it with food?

No. Capsules should not be opened or emptied. Intact capsules should be given with food.

9. I recently rechecked a dog on Vetoryl\textsuperscript{R}. The post-ACTH stimulated cortisol concentration was lower than the pre-value. What does this mean?

There are several explanations for discordant results, i.e., those in which the baseline cortisol is greater than the post-ACTH value. These include laboratory error, mislabeling of samples in the clinic, interference by exogenous steroids, and use of an ineffective ACTH product.

If the patient is clinically well and both results are between 2 - 7.5 µg/dl, it is appropriate to continue Vetoryl\textsuperscript{R} at the present dose and recheck as usual. If both values are below 2 µg/dl or above 7.5 µg/dl, or if the dog is not clinically normal, the test should be repeated as a dose adjustment may be necessary.

10. Can I use Vetoryl\textsuperscript{R} in a cat with HAC?

Vetoryl\textsuperscript{R} is not licensed for use in cats. As feline HAC is an uncommon and complicated disorder, consultation with a specialist (e.g., Dip ACVIM) is warranted.