

  
**FELIMAZOLE™**  
(methimazole)



## Managing Feline Hyperthyroidism

TECHNICAL BROCHURE



# WHAT IS FELINE HYPERTHYROIDISM?

Feline hyperthyroidism is one of the most commonly diagnosed feline endocrine disorders. It is mainly seen in middle-aged and older cats (over 10 years of age), but has been seen in cats as young as 4 years of age. About 1% of cats develop hyperthyroidism, and all breeds are susceptible. The exact cause of the condition is unknown.

Clinical signs of hyperthyroidism in cats are due to the thyroid gland producing an excessive amount of the thyroid hormones thyroxine (T<sub>4</sub>) and triiodothyronine (T<sub>3</sub>).

Thyroid hormones are involved in a wide range of metabolic processes, such as the regulation of heat production and oxygen consumption.<sup>1</sup> As a result, an excess of thyroid hormones affects the function of virtually every organ system. The signs of hyperthyroidism vary depending on duration of the disease, the presence of concurrent disease, and the ability of the body to cope with the effects of thyrotoxicosis.<sup>2,3</sup>

## Forms of Pathological Abnormalities

Benign adenomatous hyperplasia (adenoma) of one or both thyroid lobes is the most common pathological abnormality in feline hyperthyroidism.<sup>2,3,4</sup> In 70% of cases, both thyroid lobes are involved.<sup>1,5,6</sup> Thyroid carcinoma is a rare cause of hyperthyroidism in cats (incidence ~ 1%-2% of feline hyperthyroidism cases).<sup>2,7</sup>



For Technical Support, please contact Dechra Veterinary Products at 866-933-2472 or email [support@dechra.com](mailto:support@dechra.com).  
For additional information about FELIMAZOLE Coated Tablets, visit [www.dechra-us.com](http://www.dechra-us.com).

## Diagnosing Hyperthyroidism

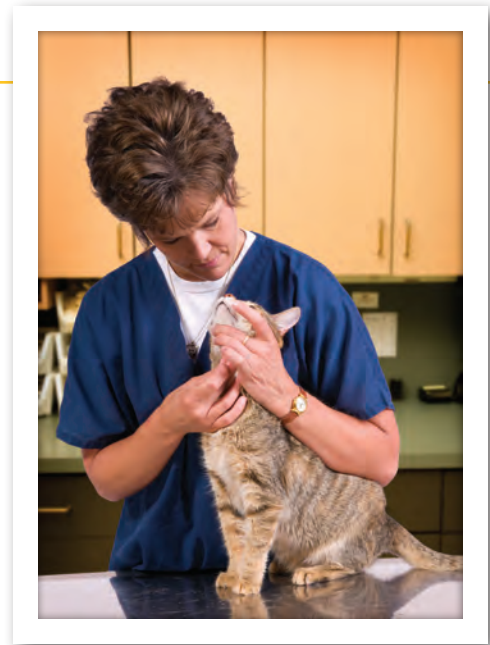
Cats with hyperthyroidism have excessive levels of thyroid hormones, causing a range of clinical signs including:

- Weight loss despite polyphagia
- Palpable goiter
- Polydipsia
- Polyuria
- Tachycardia (>240 bpm)
- Increased activity
- Vomiting
- Diarrhea

Other clinical signs include anxious facial expression, heat intolerance, skin changes, and cardiac and respiratory abnormalities. Approximately 5%-10% of cases may present with “masked” or apathetic hyperthyroidism, characterized by weakness, depression, weight loss, and a decreased or intermittent appetite.<sup>6,8,9</sup> It is likely these cats have a concurrent condition such as kidney failure, cardiac disease, or neoplasia.<sup>2,3</sup>

Hyperthyroidism can induce secondary hypertrophic or, less commonly, dilated cardiomyopathy. Radiographic, ECG, and echocardiographic abnormalities consistent with these conditions may therefore be detected.<sup>2,3</sup>

Diagnosing hyperthyroidism is generally uncomplicated. In a patient with applicable clinical signs, the measurement of total T<sub>4</sub> (TT<sub>4</sub>) is regarded as the best diagnostic test and in most cases is sufficient to confirm a diagnosis. In addition to a thorough physical exam, other diagnostic tests include routine hematology and biochemistry. These tests are also helpful in identifying concurrent disorders that may affect the prognosis.



## Laboratory Findings

**Hematological changes** are generally mild and most notably include a “stress leukogram” characterized by leukocytosis and mature neutrophilia.<sup>2,3</sup>

**Biochemistry** may reveal a mild to marked:

- Elevation in liver enzymes<sup>2,3</sup> – ALT (alanine aminotransferase), AST (aspartate aminotransferase), LDH (lactate dehydrogenase), and ALKP (alkaline phosphatase). ALKP and TT<sub>4</sub> concentrations have been shown to be positively correlated in hyperthyroid cats<sup>10</sup>
- Azotemia – may be due to concurrent kidney dysfunction or possibly increased protein catabolism and reduced cardiac output
- Hyperphosphatemia
- Mild hyperglycemia
- Hypokalemia – should be considered in any cat with profound muscle weakness<sup>11</sup>

**Urinalysis** – Although it has been suggested that reduced urine specific gravity (<1.030) can predict which cats will develop kidney failure, a recent paper concluded that urine specific gravity is not a reliable predictor.<sup>12</sup>

**Endocrine changes** – TT<sub>4</sub> is increased above laboratory reference range. Typical values are greater than 4.6 mcg/dL (greater than 60 nmol/L). Check with your laboratory for specific reference ranges.

## Treatment Options

The objective of treatment is to return excessive circulating thyroid hormone concentrations to within the reference range. This goal can be achieved medically, surgically, or with radioactive iodine therapy.

## Medical Management of Hyperthyroidism

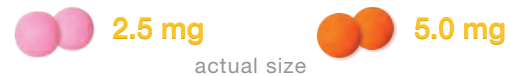
Medical management is recommended as a “first step” for most cases of feline hyperthyroidism. Methimazole is the anti-thyroid drug of choice, and has been used successfully for treating cats in the US for more than 20 years.<sup>2,13</sup>

FELIMAZOLE™ (methimazole) Coated Tablets are the only FDA-approved treatment for veterinary use for managing the destructive effects of this chronic, progressive disease. FELIMAZOLE Coated Tablets are available in 2.5 mg and 5.0 mg strengths, providing dosing flexibility and ease of administration. Daily administration of FELIMAZOLE Coated Tablets manages the disease successfully and resolves the clinical signs.

Medical management of hyperthyroidism also significantly reduces the risks associated with surgery<sup>2,3,14</sup> and radioiodine therapy. It can also provide an opportunity to reassess the cat once euthyroidism is restored and before making a decision on long-term management.

## What Are FELIMAZOLE Coated Tablets, and How Do They Work?

FELIMAZOLE Coated Tablets contain the active ingredient methimazole, a thioureylene anti-thyroid drug that inhibits the synthesis of the thyroid hormones.



After oral administration, methimazole localizes in the thyroid gland. Although this concentration in the thyroid gland is much longer than its serum half-life of approximately 4-6 hours, thyroid hormone concentrations will rise again within 24-72 hours if methimazole treatment is stopped.<sup>13,15</sup>

Methimazole reduces high serum thyroid hormone concentrations by blocking the synthesis of T<sub>4</sub> and T<sub>3</sub> within the thyroid gland.<sup>1</sup> It achieves this by serving as a substrate for the enzyme *thyroid peroxidase*, thereby preventing the oxidation of iodide, the iodination of tyrosine residues on the thyroglobulin, and their subsequent coupling to form iodothyronines (Figure 1).

Thyroid peroxidase and site of action of Felimazole™

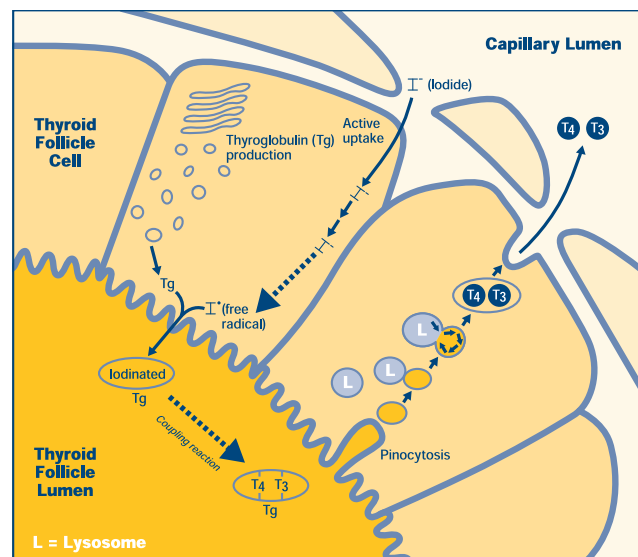


Figure 1



## Starting Dose

The recommended starting dose for FELIMAZOLE Coated Tablets is 2.5 mg administered orally every 12 hours.

Following three weeks of treatment, the dose should be titrated based on  $TT_4$  levels and clinical response. Dose adjustments should be made in 2.5 mg increments. The maximum total dosage is 20 mg per day divided, not to exceed 10 mg per dose.

PET OWNERS SHOULD BE ADVISED TO MONITOR THEIR CATS CLOSELY FOR ANY SIGNS OF ILLNESS ONCE TREATMENT HAS STARTED. IF A CAT BECOMES ILL WHILE ON FELIMAZOLE COATED TABLETS, THE OWNER SHOULD STOP TREATMENT AND CONTACT HIS OR HER VETERINARIAN IMMEDIATELY.

Hematology, biochemistry, and urinalysis should be evaluated prior to initiating treatment and monitored after 3 weeks and 6 weeks of treatment. Thereafter, bloodwork should be monitored every 3 months and the dose should be adjusted as necessary.

This information is more thoroughly explained in the product insert included in each carton of FELIMAZOLE Coated Tablets and on the back page of this booklet.

## Monitoring Efficacy of the Treatment of Hyperthyroidism

The efficacy of treatment is monitored by the measurement of  $TT_4$  concentration. In some cats, medical therapy actually lowers  $TT_4$  concentrations to below the reference range. However, clinically apparent hypothyroidism rarely develops because  $T_3$  concentrations remain normal.<sup>13,16</sup>

Monitoring routine hematology and biochemistry is very important. In addition to an improvement in clinical signs, successful treatment of hyperthyroidism may be associated with a return of liver enzyme concentrations to within the reference range.<sup>16</sup>

A key point to remember: Feline hyperthyroidism is associated with an increased glomerular filtration rate (GFR). Successful management will result in a decreased GFR. In patients with underlying or “masked” kidney disease, this decrease in GFR may be enough to result in azotemia and clinical signs of kidney failure with an increased serum urea and creatinine.<sup>17,18,19,20,21</sup> This can occur regardless of whether medical, surgical, or radioiodine treatment is used.

**Before starting treatment, cases should be screened for the presence of primary liver disease, kidney failure, autoimmune disease, and hematological disorders, as FELIMAZOLE Coated Tablets are contraindicated in these situations.**



## Benefits of Prescribing FDA Veterinary Approved Therapeutics

As the only FDA approved product for veterinary use for the treatment of feline hyperthyroidism, FELIMAZOLE Coated Tablets offer:

- Proven safety, efficacy, and quality
- 24-hour support from the Dechra Veterinary Products Technical Team
- Assured purity and potency
- Client education and technical materials
- Elimination of risks associated with prescribing human and compounded products
- Proven stability

## Drug Interactions

Anticoagulants may be potentiated by the anti-vitamin K activity of FELIMAZOLE Coated Tablets. FELIMAZOLE Coated Tablets may induce bleeding diathesis without evidence of thrombocytopenia. Concurrent use of phenobarbital may reduce the effectiveness of FELIMAZOLE Coated Tablets. A reduction in dose of certain drugs ( $\beta$ -adrenergic blocking agents, digitalis glycosides, and theophylline) may be appropriate when the patient becomes euthyroid.

Methimazole is known to reduce the hepatic oxidation of benzimidazole anthelmintics (e.g., fenbendazole) leading to the increased plasma concentration of these anthelmintics.

## Human Safety

Wash hands with soap and water after administration to avoid exposure to drug. Do not break or crush tablets. Wear protective gloves to prevent direct contact with litter, feces, urine, or vomit of treated cats and broken or moistened tablets. Wash hands after contact with the litter of treated cats. For more information, refer to “Human Warnings” section of product insert.

Read the FELIMAZOLE Coated Tablets product insert, which is located on the last page of this brochure.

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## References

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# FELIMAZOLE™

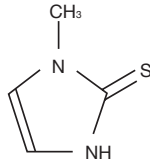
(methimazole)

For oral use in cats only.

**CAUTION:** Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian.

**DESCRIPTION:** Methimazole is a thioureylene antithyroid drug, which inhibits the synthesis of thyroid hormones. Methimazole (1-methylimidazole-2-thio) is a white, crystalline substance that is freely soluble in water. The chemical formula is C<sub>4</sub>H<sub>6</sub>N<sub>2</sub>S. Molecular weight is 114.16.

#### Methimazole Chemical Structure



#### INDICATION:

FELIMAZOLE (methimazole) Coated Tablets are indicated for the treatment of hyperthyroidism in cats.

#### DOSAGE AND ADMINISTRATION:

The starting dose of FELIMAZOLE Coated Tablets is 2.5 mg administered every 12 hours. Following 3 weeks of treatment, the dose should be titrated to effect based on individual serum total T<sub>4</sub> (TT<sub>4</sub>) levels and clinical response. Dose adjustments should be made in 2.5 mg increments. The maximum total dosage is 20 mg per day divided, not to exceed 10 mg as a single administration.

Hematology, biochemistry, and TT<sub>4</sub> should be evaluated prior to initiating treatment and monitored after 3 weeks and 6 weeks of treatment. Thereafter, bloodwork should be monitored every 3 months and the dose adjusted as necessary. Cats receiving doses greater than 10 mg per day should be monitored more frequently.

#### CONTRAINDICATIONS:

Do not use in cats with hypersensitivity to methimazole, carbimazole or the excipient, polyethylene glycol.

Do not use in cats with primary liver disease or renal failure.

Do not use in cats with autoimmune disease. See ADVERSE REACTIONS.

Do not use in cats with hematological disorders (such as anemia, neutropenia, lymphopenia, or thrombocytopenia) or coagulopathies. See ADVERSE REACTIONS.

Do not use in pregnant or lactating queens. Laboratory studies in rats and mice have shown evidence of teratogenic and embryotoxic effects of methimazole.

#### WARNINGS:

Methimazole has anti-vitamin K activity and may induce bleeding diathesis without evidence of thrombocytopenia. See ADVERSE REACTIONS.

#### HUMAN WARNINGS:

Not for use in humans. Keep out of reach of children. For use in cats only.

Wash hands with soap and water after administration to avoid exposure to drug. Do not break or crush tablets. Wear protective gloves to prevent direct contact with litter, feces, urine, or vomit of treated cats, and broken or moistened tablets. Wash hands after contact with the litter of treated cats.

Methimazole is a human teratogen and crosses the placenta concentrating in the fetal thyroid gland. There is also a high rate of transfer into breast milk. Pregnant women or women who may become pregnant, and nursing mothers should wear gloves when handling tablets, litter or bodily fluids of treated cats.

Methimazole may cause vomiting, gastric distress, headache, fever, arthralgia, pruritus, and pancytopenia. In the event of accidental ingestion/overdose, seek medical advice immediately and show the product label to the physician.

#### PRECAUTIONS:

Use of FELIMAZOLE Coated Tablets in cats with renal dysfunction should be carefully evaluated. Reversal of hyperthyroidism may be associated with decreased glomerular filtration rate and a decline in renal function, unmasking the presence of underlying renal disease.

Due to potentially serious adverse reactions such as hepatopathy, immune-mediated anemia, thrombocytopenia, and agranulocytosis, cats on methimazole therapy should be monitored closely for any sign of illness including fever, lymphadenopathy, or signs of anemia. If a cat becomes ill while on FELIMAZOLE Coated Tablets, the drug should be stopped and appropriate hematological and biochemical testing should be done.

Anticoagulants may be potentiated by the anti-vitamin K activity of FELIMAZOLE Coated Tablets. Concurrent use of phenobarbital may reduce the clinical effectiveness of FELIMAZOLE Coated Tablets. A reduction in dose of certain drugs (β-adrenergic blocking agents, digitalis glycosides, and theophylline) may be needed when the patient becomes euthyroid.

Methimazole is known to reduce the hepatic oxidation of benzimidazole anthelmintics (e.g. fenbendazole), leading to increased plasma concentration of these anthelmintics when administered concurrently.

FELIMAZOLE Coated Tablets caused delayed maturation of the testes in young male cats in the 12-week safety study. See ANIMAL SAFETY. The safety of FELIMAZOLE Coated Tablets has not been evaluated in male cats intended for breeding.

#### ADVERSE REACTIONS:

In a US field study with 113 cats, the most common adverse reactions included change in food consumption (increase or decrease), lethargy, vomiting, diarrhea/loose stool, skin lesions, and abnormal vocalization. Three cats were withdrawn early from the study, one due to unmasking of latent renal disease and two due to the development of skin lesions. Over the course of the study, there was a decreasing trend in the mean counts of red blood cells, lymphocytes, neutrophils, and monocytes; however, means remained within or near normal ranges for the testing laboratory.

In the extended-use phase of the US field study with 101 cats, the most common adverse reactions reported in the study above (lethargy, anorexia) were also observed. Additional signs occurring more frequently in the long-term study were: depression/withdrawn behavior, weight loss, haircoat abnormalities, increased blood urea nitrogen (BUN), weakness, agitation, and diarrhea. Most of the adverse reactions reported were mild and transient.

Serum chemistry and hematology results in the extended-use study were consistent with the trends noted during the field study. The mean alanine transaminase (ALT) was above the reference range at the first two quarterly visits, but within the normal reference range (10-100 U/L) through the next two quarterly visits.

Mean lymphocyte counts decreased consistently during the study period, to slightly below the reference range (1200-8000 cells/mcL) at the fourth quarterly visit.

Sixteen cats experienced elevated antinuclear antibody (ANA) titers at one or more points during long-term therapy with FELIMAZOLE Coated Tablets, but the significance was not determined.

Eighteen cats died or were euthanized during the extended-use study, four of which may have been related to FELIMAZOLE Coated Tablets due to the unmasking/acceleration of chronic renal failure. See PRECAUTIONS.

In a foreign field study with 26 cats using a starting dose of 5 mg twice daily (twice the recommended starting dose), one cat was withdrawn due to lethargy, vomiting, and facial excoriations. Marked thrombocytopenia was reported in two cats; the platelet count returned to normal in one cat when FELIMAZOLE Coated Tablets were discontinued. Two cats collapsed and died within 12 days of starting FELIMAZOLE Coated Tablets at a dose of 5 mg twice daily. Both cats were reported with lethargy, vomiting, anorexia, and bloody diarrhea; one cat also had pallor.

In a second foreign field study with 78 cats using a starting dose of 2.5 mg twice daily, 4 cats were withdrawn due to suspected adverse reactions to FELIMAZOLE Coated Tablets including anemia, cholangiohepatitis, excoriations, vomiting, lethargy, jaundice, and anorexia. One cat receiving 2.5 mg three times daily collapsed and died after 8 weeks of treatment. Adverse reactions included pallor, anorexia, dehydration, jaundice, bleeding diathesis, and anemia. The most frequently reported adverse reactions included mild, transient, self-limiting vomiting, lethargy, and anorexia.

Foreign Market Experience: The following events were reported voluntarily during post-approval use of FELIMAZOLE Coated Tablets in foreign markets: facial pruritus, self-induced excoriations of the head and neck, generalized lymphadenopathy, thrombocytopenia, hematemesis, epistaxis, and elevation of serum liver enzymes and bilirubin.

If overdosage occurs, stop treatment and give symptomatic and supportive care.

#### CLINICAL PHARMACOLOGY:

Methimazole is an antithyroid drug that acts by blocking the biosynthesis of thyroid hormone *in vivo*. The primary action is to inhibit binding of iodide to the enzyme thyroid peroxidase, thereby preventing the catalyzed iodination of thyroglobulin and T<sub>3</sub> and T<sub>4</sub> synthesis.

FELIMAZOLE Coated Tablets are well absorbed following oral administration. Maximum plasma concentrations are achieved within 1-1½ hours after dosing and methimazole is rapidly eliminated from the blood (T<sub>1/2</sub> is approximately 3 hours). Administration of FELIMAZOLE Coated Tablets in a fasted state enhances absorption.

#### EFFECTIVENESS:

In a US effectiveness field study with 113 cats, the product was considered effective if both the TT<sub>4</sub> concentration was <4.0 mcg/dL, and the Investigator's clinical assessment documented clinical improvement. Of the 105 evaluable cases, 64 (61%) were considered treatment successes. The decrease in TT<sub>4</sub> concentration was significant from the pre-enrollment visit to the Day 42 visit. A TT<sub>4</sub> of <4.0 mcg/dL occurred in 59.1% and 61.9% of cats on Day 21 and Day 42, respectively. Investigators assessed 91.8% and 87.6% of cats as clinically improved on Days 21 and 42, respectively.

In the extended-use phase of the US effectiveness field study with 101 cats, effectiveness was based on a combination of Investigator's clinical assessment, maintenance of TT<sub>4</sub> concentrations at or near the laboratory reference range of 0.8-4.0 mcg/dL, and the presence or absence of adverse reactions. Mean TT<sub>4</sub> concentrations were within or near the laboratory reference range during the first four quarterly visits. At the first quarterly visit, Investigators categorized 80.9% of cats as stable or improved relative to their baseline assessment. By the fourth quarterly visit, 75.8% were deemed to be stable or improved.

The average maintenance dose required in the extended use phase was 2.5 mg twice daily, with a minimum of 2.5 mg per cat and a maximum of 15 mg per cat on a daily basis.

#### ANIMAL SAFETY:

In a 12-week safety study, healthy young cats were dosed with 0, 10, 20, and 30 mg FELIMAZOLE Coated Tablets per day, divided into two doses. Cats in all treated groups experienced anorexia, vomiting, loose stool, and lethargy. Cats in the 20 and 30 mg/day groups also had facial excoriations, pruritus, and lymphadenopathy. The following hematological changes were seen: neutropenia, lymphopenia, anemia, and thrombocytopenia. The following biochemical changes were seen: increased globulin, increased magnesium, increased blood urea nitrogen, increased creatinine, and decreased phosphorus. There was a dose-dependent occurrence of antinuclear antibodies. Most of the clinical pathology changes were mild in nature. One cat dosed with 20 mg/day experienced a six-fold increase in ALT during the study. This cat had loose stool, but was otherwise healthy throughout the study. Hepatomegaly was seen in this cat at necropsy and the histopathological examination was comparable to other treated cats with hepatomegaly and normal ALT.

Gross necropsy findings in all treated groups included hepatomegaly, thymus atrophy, and thyroid hyperplasia and darkening. Some treated males had delayed maturation of the testes.

The 30 mg/day dose was poorly tolerated and resulted in the clinical deterioration and euthanasia of four of the six cats in that group. Two of the cats showed signs of immune-mediated hemolytic anemia, thrombocytopenia, and severe clinical deterioration. One had been on the drug for 34 days, the other for 9 weeks. The drug was discontinued in a third cat treated with 30 mg/day while it received supportive care. It was euthanized on day 55 after becoming anorexic. This cat had anemia (HCT 21.6%) and red blood cell agglutination. Necropsy showed inflammation of the muscular layer of the stomach and a small erosion in the stomach. A fourth cat treated with 30 mg/day was euthanized after several days of anorexia when the decision was made to discontinue dosing in this group. All 30 mg/day cats that died had generalized lymphadenopathy. Necropsies revealed reactive lymph nodes and varying degrees of inflammation throughout the body. The remaining 2 cats in the 30 mg/day group were taken off FELIMAZOLE Coated Tablets at week 9 and fully recovered.

#### STORAGE INFORMATION:

Store at controlled room temperature 25°C (77°F) with excursions between 15°-30°C (59°-86°F) permitted.

Keep the container tightly closed in order to protect from moisture.

#### HOW SUPPLIED:

FELIMAZOLE Coated Tablets are available in 2.5 mg or 5 mg in bottles containing 100 tablets.

#### NADA 141-292, APPROVED BY FDA.

TAKE  
TIME  OBSERVE LABEL  
DIRECTIONS

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