ANNEX III

LABELLING AND PACKAGE LEAFLET

A. LABELLING

PARTICULARS TO APPEAR ON THE OUTER PACKAGE

CARTON

1. NAME OF THE VETERINARY MEDICINAL PRODUCT

Vetoryl 120 mg Hard capsules

2. STATEMENT OF ACTIVE SUBSTANCES

1 capsule contains 120 mg trilostane

3. PACKAGE SIZE

30 capsules

4. TARGET SPECIES

Dogs.

5. INDICATIONS

6. ROUTES OF ADMINISTRATION

Oral use.
Administer orally, once daily, with food.
Do not divide or open capsules.

7. WITHDRAWAL PERIODS

8. EXPIRY DATE

Exp. {mm/yyyy}

9. SPECIAL STORAGE PRECAUTIONS

Do not store above 25°C.
Keep the blister strips in the outer carton.

10. THE WORDS "READ THE PACKAGE LEAFLET BEFORE USE"

Read the package leaflet before use.

11. THE WORDS "FOR ANIMAL TREATMENT ONLY"

For animal treatment only.

12. THE WORDS "KEEP OUT OF THE SIGHT AND REACH OF CHILDREN"

Keep out of the sight and reach of children.

13. NAME OF THE MARKETING AUTHORISATION HOLDER

Dechra Limited

14. MARKETING AUTHORISATION NUMBERS

Vm 10434/3002

15. BATCH NUMBER

Lot {number}

MINIMUM PARTICULARS TO APPEAR ON SMALL IMMEDIATE PACKAGING UNITS

{NATURE/TYPE}

1. NAME OF THE VETERINARY MEDICINAL PRODUCT

Vetoryl

2. QUANTITATIVE PARTICULARS OF THE ACTIVE SUBSTANCES

1 capsule contains 120 mg trilostane

3. BATCH NUMBER

Lot {number}

4. EXPIRY DATE

Exp. {mm/yyyy}

B. PACKAGE LEAFLET

PACKAGE LEAFLET

1. Name of the veterinary medicinal product

Vetoryl 120 mg hard capsules for dogs

2. Composition

Each capsule contains 120 mg trilostane.
Hard gelatin capsules with an ivory body and a black cap, printed “VETORYL 120 mg”.

3. Target species

Dogs.

4. Indications for use

For the treatment of pituitary-dependent and adrenal-dependent hyperadrenocorticism (Cushing’s disease and syndrome).

5. Contraindications

Do not use in dogs weighing less than 20 kg.
Do not use in animals suffering from primary hepatic disease and/or renal insufficiency.
Do not use in cases of hypersensitivity to the active substance or to any of the excipients.

6. Special warnings

If your dog is being treated with any other medications advise your veterinary surgeon prior to the use of veterinary medicinal product.
Tell your veterinary surgeon if your dog is suffering from concurrent illnesses, especially liver disease, kidney disease, anaemia or diabetes mellitus.
Tell your veterinary surgeon if you intend to breed from your dog or your dog is pregnant or nursing.

Special precautions for safe use in the target species:
An accurate diagnosis of hyperadrenocorticism is essential.
Where there is no apparent response to treatment, the diagnosis should be re-evaluated. Dose increases may be necessary.
Veterinarians should be aware that dogs with hyperadrenocorticism are at increased risk of pancreatitis. This risk may not diminish following treatment with trilostane.
The product should be used with extreme caution in dogs with pre-existing anaemia as further reductions in packed-cell volume and haemoglobin may occur. Regular monitoring should be undertaken.
As the majority of cases of hyperadrenocorticism are diagnosed in dogs between the ages of 10 - 15 years, other pathological processes are frequently present. It is particularly important to screen cases for primary hepatic disease and renal insufficiency as the product is contraindicated in these cases.

The presence of diabetes mellitus and hyperadrenocorticism together requires specific monitoring.
If a dog has previously been treated with mitotane, its adrenal function will have been reduced. Experience in the field suggests that an interval of at least a month should elapse between cessation of mitotane and the introduction of trilostane. Close monitoring of adrenal function is advised, as dogs may be more susceptible to the effects of trilostane.
Subsequent close monitoring during treatment should be carried out. Particular attention should be paid to liver enzymes, electrolytes, urea and creatinine.

Special precautions to be taken by the person administering the veterinary medicinal product to animals:
Trilostane may decrease testosterone synthesis and has anti-progesterone properties.
Women who are pregnant or are intending to become pregnant should avoid handling the capsules.
Wash hands with soap and water following accidental exposure and after use.
The content of the capsules may cause skin and eye irritation and sensitisation. Do not divide or open capsules: in the event of accidental breakage of the capsules and contact of the granules with eyes or skin, wash immediately with plenty of water. If irritation persists, seek medical advice and show the package leaflet/label to the physician.
In the event of accidental ingestion, seek medical advice immediately and show the package leaflet or label to the physician.
People with known hypersensitivity to trilostane or any of the excipients should avoid contact with the product.

Pregnancy and lactation:
Do not use in pregnant or lactating bitches.

Fertility:
Do not use in any animals intended for breeding.

Interactions with other medicinal products and other forms of interaction:
The possibility of interactions with other medicinal products has not been specifically studied. Given that hyperadrenocorticism tends to occur in older dogs, many will be receiving concurrent medication. In clinical studies, no interactions were observed.
The risk of hyperkalaemia developing should be considered if trilostane is used in conjunction with potassium-sparing diuretics or ACE inhibitors. The concurrent use of such drugs should be subject to a risk-benefit analysis by the veterinary surgeon, as there have been a few reports of deaths (including sudden death) in dogs when treated concurrently with trilostane and an ACE inhibitor.

Overdose:
Overdose may lead to signs of hypoadrenocorticism. Treatment should be withdrawn and supportive therapy, including corticosteroids, correction of electrolyte imbalances and fluid therapy may be indicated depending on clinical signs.
There were no mortalities following chronic administration at 36 mg/kg to healthy dogs, however mortalities may be expected if higher doses are administered to dogs with hyperadrenocorticism.
In cases of acute overdosage, induction of emesis followed by administration of activated charcoal may be beneficial. Any iatrogenic adrenocortical insufficiency is usually quickly reversed following cessation of treatment. However in a small percentage of dogs, effects may be prolonged. Symptomatic treatment or appropriate

replacement therapy should be initiated. Following a one week withdrawal of trilostane treatment, treatment should be reinstated at a reduced dose rate.

7. Adverse events

Dogs:

Uncommon (1 to 10 animals / 1,000 animals treated):	Lethargy[a,b], Anorexia (loss of appetite)[a,b], Vomiting[a,b], Diarrhoea[a,b]
Rare (1 to 10 animals / 10,000 animals treated):	Hypoadrenocorticism[c], Hypersalivation (increased salivation)[d], Bloated[d], Ataxia (incoordination)[d], Muscle tremor[d], Skin disorders[d], Renal insufficiency[e], Arthritis[e]
Very rare (<1 animal / 10,000 animals treated, including isolated reports):	Weakness[b], Adrenal necrosis[f], Sudden death

[a] associated with iatrogenic hypoadrenocorticism, particularly if monitoring is not adequate; generally reversible within a variable period following withdrawal of treatment.
[b] Has been seen in dogs treated with trilostane in the absence of evidence of hypoadrenocorticism.
[c] including Acute Addisonian Crisis (collapse).
[d] mild
[e] unmasked by treatment with the product due to a reduction in endogenous corticosteroid levels.
[f] may result in hypoadrenocorticism

Corticosteroid withdrawal syndrome or hypocortisolaemia should be distinguished from hypoadrenocorticism by evaluation of serum electrolytes.

Reporting adverse events is important. It allows continuous safety monitoring of a product. If you notice any side effects, even those not already listed in this package leaflet, or you think that the medicine has not worked, please contact, in the first instance, your veterinarian. You can also report any adverse events to the marketing authorisation holder or the local representative of the marketing authorisation holder using the contact details at the end of this leaflet, or via your national reporting system: <{national system details}>.

8. Dosage for each species, routes and method of administration

For oral use.

The starting dose for treatment is approximately 2 mg/kg, based on available combinations of capsule sizes. Administer once daily, with food.
To ensure a correct dosage, body weight should be determined as accurately as possible.

Titrate the dose according to individual response as determined by monitoring (see below). If a dose increase is required, use combinations of capsule sizes to slowly

increase the once daily dose. A wide range of capsule sizes enables optimum dosing for the individual dog. Administer the lowest dose necessary to control the clinical signs.

Ultimately, 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.
A small number of animals may require doses significantly in excess of 10 mg per kg body weight per day. In these situations appropriate additional monitoring should be implemented.

Monitoring:
Samples should be taken for biochemistry (including electrolytes) and an ACTH stimulation test pre-treatment and then at 10 days, 4 weeks, 12 weeks, and thereafter every 3 months, following initial diagnosis and after each dose adjustment. It is imperative that ACTH stimulation tests are performed 4 - 6 hours post-dosing to enable accurate interpretation of results.
Dosing in the morning is preferable as this will allow your veterinary surgeon to perform monitoring tests 4-6 hours following administration of the dose.
Regular assessment of the clinical progress of the disease should also be made at each of the above time points.

In the event of a non-stimulatory ACTH stimulation test during monitoring, treatment should be stopped for 7 days and then re-started at a lower dose. Repeat the ACTH stimulation test after a further 14 days. If the result is still non-stimulatory, stop treatment until clinical signs of hyperadrenocorticism recur. Repeat the ACTH stimulation test one month after re-starting treatment.

Dogs should be monitored at regular intervals for primary hepatic disease, renal disease, and for diabetes mellitus.

9. Advice on correct administration

Do not divide or open capsules.

10. Withdrawal periods

Not applicable.

11. Special storage precautions

Keep out of the sight and reach of children.
Do not store above 25°C.
Keep the blister strips in the outer carton.
Do not use this veterinary medicinal product after the expiry date which is stated on the blister after Exp.
The expiry date refers to the last day of that month.

12. Special precautions for disposal

Medicines should not be disposed of via wastewater or household waste.
Use take-back schemes for the disposal of any unused veterinary medicinal product or waste materials derived thereof in accordance with local requirements and with

any applicable national collection systems. These measures should help to protect the environment.
Ask your veterinary surgeon or pharmacist how to dispose of medicines no longer required.

13. Classification of veterinary medicinal products

Veterinary medicinal product subject to prescription.

14. Marketing authorisation numbers and pack sizes

Vm 10434/3002

Cardboard box containing 30 capsules.

15. Date on which the package leaflet was last revised

<{MM/YYYY}>

Detailed information on this veterinary medicinal product is available in the Union Product Database (https://medicines.health.europa.eu/veterinary).

16. Contact details

Marketing authorisation holder and contact details to report suspected adverse reactions:
Dechra Limited
Snaygill Industrial Estate
Keighley Road
Skipton
North Yorkshire
BD23 2RW
United Kingdom

Manufacturer responsible for batch release:
Genera Inc.
Svetonedeljska cesta 2
Kalinovica
10436 Rakov Potok
Croatia

Local representatives and contact details to report suspected adverse reactions:

17. Other information

Approved 28 November 2023