## Regulations Governing the use of medicines to treat animals

The guidance published in the RCVS Guide to Professional Conduct (from which this information is taken) is based on current EU and UK law.

According to the Veterinary Medicines Regulations, veterinary surgeons may only prescribe POM-V veterinary medicinal products following a clinical assessment of animals under their care. Therefore the animal must have been seen immediately before prescription or recently enough for the veterinary surgeon to be personally aware of the condition of the animal in order to make a diagnosis and prescribe accordingly. Diagnosis for the purpose of prescription should be based on professional judgement following clinical examination, supported where appropriate by laboratory or other diagnostic tests (including behavioural assessment by a competent behaviour counsellor).

## **Choice of medicinal products**

A veterinary surgeon must be satisfied that the animal would benefit from medication. The chosen product must be authorised for use in the UK in the target species for the condition being treated and used at the manufacturer's recommended dosage.

The Medicines (Restrictions on the Administration of Veterinary Medicinal Products) Regulations 1994 as amended allows that if there is no suitable product in the UK for treatment of a condition in a particular species, the veterinary surgeon may prescribe using the "Cascade". That is, alternative medication may be prescribed in accordance with the following sequence:

- 1) A veterinary medicine authorised for use with another animal species, or for another condition in the same species (off-label use)
- 2) A medicine authorised in the UK for human use
- 3) A medicine prepared by a veterinary surgeon or other authorised person.

If the veterinary surgeon chooses a medicine via the cascade the decision must be justified. Clinical evidence (such as a behavioural assessment) to support the decision should be available. The reason why a medicine is to be used off-label should be recorded in the patient's notes. The client should be made aware of the situation, including an indication of potential side effects, and give written consent.

The responsibility for the use of a medicine "off label" lies solely with the prescribing veterinary surgeon.

Other factors to take into account when prescribing medicines

The veterinary surgeon must advise on the safe administration of the product, and be satisfied that the client can use the product safely. It may not be safe to administer medication to an animal that shows aggression.

Consideration should also be made as to whether the client will use the medication in the way in which it is intended. Human medications are open to abuse, and this is especially true of psychoactive medication.

Only the minimum quantity required for treatment should be prescribed. This is not defined and must be judged by the veterinary surgeon on a case by case basis. One of the considerations to be taken into account is the potential for abuse.

## **Examples of "Off-Label" Use of Psychoactive Medications**

• Use of an authorised product for an unauthorised indication Clomipramine (Clomicalm, Novartis) is licensed for use in dogs for "separation anxiety". If it is prescribed for compulsive disorder or impulsive aggression, it is used at level 1 of the cascade. Phenobarbitone (Epiphen, Vétoquinol) is a Schedule 3 Controlled Drug. It is licensed for use in the control of epilepsy in dogs. If it is prescribed for phobia it is used at level 1 of the cascade.

- Use of an authorised product at an unauthorised dose Clomipramine is authorised for use at 1-2mg/kg bid. For treatment of compulsive disorder, the dose may be increased to 3mg/kg bid.
- Use of an authorised veterinary product in a different species Clomipramine may be used in cats to treat spraying.
- Use of a human medicationThere are very few POM-V drugs available for use in behavioural cases. Examples of human drugs commonly used in this field include diazepam, alprazolam, propranolol and sertraline.Medication remains the responsibility of the prescribing veterinary surgeon. It should only be used in support of a behavioural modification programme; the vast majority of behavioural cases do not require medication

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Reference:

Royal College of Veterinary Surgeons (2008) Guide to Professional Conduct For full text go to: <a href="www.rcvs.org.uk">www.rcvs.org.uk</a>Further Information: BSAVA Small Animal Formulary 6th Ed 2008
NOAH Compendium of Animal Medicines <a href="www.noahcompendium.co.uk">www.noahcompendium.co.uk</a>