



Thiamacare®

10 mg/ml thiamazole oral solution for cats.

For the stabilisation of hyperthyroidism in cats prior to surgical thyroidectomy.

For the long-term treatment of feline hyperthyroidism.



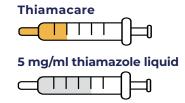
STRONGER COMPLIANCE:

- 87.4% of owners preferred using liquids for long term medication of their cats¹
- Liquid formulations are significantly more palatable to cats than solid formulations²
- · Vanillin flavouring widely accepted by cats



STRONGER CONCENTRATION:

 Half the dose volume required, compared to other liquid formulations available





STRONGER CONVENIENCE:

- Just one size of bottle to stock
 - Thanks to the double concentration formulation 1 x 30 ml bottle gives 60 days of treatment at the recommended starting dose
- Single scale dosing syringe clearly marked with
 1.25 mg increments
 - To facilitate easy & accurate dosing in response to tT4 measurement values
 - No conversion required when switching from other brands/ formulations



STRONGER SUPPORT:

- A suite of materials make raising awareness of feline hyperthyroidism, supporting your cat owning clients and using Thiamacare, as easy as possible
 - CPD with top tips from feline specialist Sarah Caney
 - Thiamacare 'switch sheet'
 - Pre-written newsletter/e-mail text and social posts
 - A post-prescription leaflet

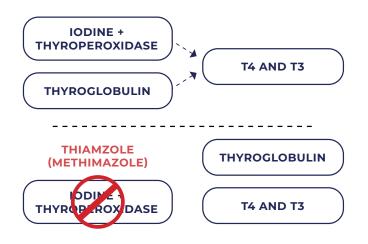
Primary mode of action Thiamzole (methimazole)

Thiamazole 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 catalysed iodination of thyroglobulin and T3 and T4 synthesis.

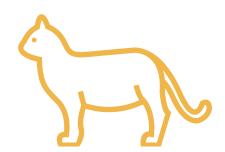
Thiamacare UK POM-V Vm 32742/4013 Further information is available from the SPC / datasheet or pack leaflet. USE MEDICINES RESPONSIBLY Animalcare, 10 Great North Way, York Business Park, Nether Poppleton, York, YO26 6RB.





Feline Hyperthyroidism

Most common endocrinopathy of cats³





Prevalence of up to 11.4% in older cats worldwide³

TYPICAL HISTORY/CLINICAL SIGNS

- · Weight loss despite normal appetite or polyphagia
- · Altered behaviours agitated/ aggressive
- Increased vocalisation
- Unkempt coat
- · Polyuria/ polydipsia

- Tachypnoea
- · Tachycardia
- · Vomiting/diarrhoea
- · Palpable goitre (enlarged thyroid)

Monitor relevant parameters before and during treatment.

Remember, stress can worsen the clinical signs of hyperthyroidism, so sensitive handling of patients is paramount.

DIAGNOSIS

Strong clinical suspicion based on history and signalment:

- · Cats >7 years, males and females equally affected
- · Characteristic clinical signs

ABSOLUTE DIAGNOSIS = demonstration of high plasma concentrations of T4

<10 nmol/L	<0.8 µg/dL	Subnormal
10.0-60.0 nmol/L	0.8-4.7 µg/dL	Normal (euthyroid)
30.0-60.0 nmol/L	2.3-4.7 µg/dL	Grey zone in old symptomatic cats*
>60.0 nmol/L	>4.7 µg/dL	Consistent with hyperthyroidism

COMMON COMORBIDITIES:

- Renal insufficiency
- Cardiovascular
- Hypertension

*Can consider repeating test in a number of weeks or using free T4 (fT4), T3 suppression test or Radionuclide thyroid imaging to assist diagnosis

References:

1. Zimmerman, T.M. et al. (2014) Ease of use of Semintra- cat owner feedback under European field conditions. J Feline Med Surg. 16, 764.
2. Sivén, M., et al. (2017) Difficulties in administration of oral medication formulations to pet cats: an e-survey of cat owners. Veterinary Record 180, 250
3. Carney, H. C., et al. 2016 AAFP Guidelines for the Management of Feline Hyperthyroidism. Journal of Feline Medicine and Surgery, 18(5), 400–416.

To learn more about feline hyperthyroidism, visit www.the-pac.co.uk

