



<u>Substance</u>	<u>Preparation</u>	<u>Dose</u>	<u>Route of Administration</u>	<u>No of horses</u>	<u>Detection Time (hrs)</u>
Phenylbutazone	Equipazolone, Arnold	4.7mg/kg/5 days/ twice daily	Oral	2	
	Phenylarthrite, Vetoquinol SA	8.8mg/kg	i.v.	6	168
	Equipazolone, Intervet SA	8.8mg/kg/x2/day 1 4.4mg/kg/10 days/ x2 daily	Oral	6	
Flunixin	Finadyne, Schering Plough	1mg/kg	i.v.	4	144
Carprofen	Rimadyl, Pfizer Ltd	0.7mg/kg	i.v.	6	264
Ketoprofen	Ketofen Meriel Animal Health Ltd	2.2mg/kg/5 days/ daily	i.v.	6	96
Meloxicam	Metacam Boehringer Ingelheim	0.6mg/kg/14 days/ daily	oral	8	72
Eltenac	Telzenac Schering Plough Animal Health	0.5mg/kg/5 days/ daily	i.v.	6	192
Dipyrrone	Vetalgin Intervet Deutschland GmbH	30mg/kg	i.v.	10	72
Vedaprofen	Quadrisol Intervet SA	2mg/kg	i.v.	6	96
Furosemide	Dimazon Intervet	1mg/kg	i.v.	6	48
Mepivacaine	Intra- Epicaine Arnold Vet Products Ltd	2mL/40mg (0.07 -0.09 mg/kg)	s/c to lateral aspect of distal limb	6	48
Mepivacaine	Intra- Epicaine Arnold Vet Products Ltd	8mL/160mg (0.28 - 0.35 mg/kg)	s/c neck	6	48
Meclofenamic	Not commercially	2.2mg/kg/single	i.v.	6	48

acid	available	dose			
Meclofenamic acid	Sigma (see footnote) Dynoton	4mg/kg/5 days/ once daily			120
	Biove Laboratory Arques, France		oral	6	
Dembrexine	Sputolysin Boehringer Ingelheim	0.3mg/kg/ 9 doses at 12h intervals	oral	6	120
Detomidine	Domosedan Orion Pharma, Finland	0.02mg/kg	i.v.	10	48
Naproxen	Naprosyn Roche	10mg/kg/5 days/ once daily	oral	6	>15 days
Butyl scopolamine	Buscopan Boehringer Ingelheim	0.3mg/kg	i.v.	6	48
	Norocaine			6	
Lidocaine	Norbrook Laboratories	300mg/15 mL		6	48
		60mg/3 mL	s/c		
Omeprazole	Gastrogard 37% oral paste Merial	1mg/kg/ 28 days/daily	oral	*see note	72
Clenbuterol	Ventipulmin™ Syrup (25 micrograms/ml) Boehringer Ingleheim	1.6 µg/kg/day for 10 days	oral	6	312
Clenbuterol	Ventipulmin™ Injection (30 micrograms/ml) Boehringer Ingleheim	0.3 µg/kg /day for 5 days	nebulised\$	6	144
Ipratropium	Atrovent™ solution for nebulisation at 0.5 mg /ml Boehringer Ingleheim	5.5 µg/kg /day for 3 days (16.5 µg/kg in total)	nebulised	6	168

Footnote: Prepared according to Johansson et al Pharmaceutical & Biomedical Analysis (1986)4, 2 171-179

*calculated from several studies involving differing numbers of horses

\$ this route of administration is not licenced in the UK

Please note: those preparations from Arnolds Vet Products Ltd are now marketed and licensed under Dechra Veterinary Products

Withdrawal Times

To decide a Withdrawal Time, an adequate safety margin must be chosen by the treating veterinarian using his or her professional judgement to allow for biological, pharmaceutical and pharmacological variation, thus minimising the possibility that a positive finding will occur on race day. It is incumbent on all veterinary surgeons to exercise full professional judgement, taking into account all relevant circumstances and up-to-date information, before advising when a horse may safely race after drug treatment ([Barragry 2006 - Continuing education – Doping and drug detection times in horses: new data for therapeutic agents. Irish vet. J. 59, 394-398](#)).

A Detection Time, as issued by the EHLSC, is **not** equivalent to a Withdrawal Time. The Withdrawal Time should be longer than a Detection Time to take into account the impact of all sources of animal variability (age, sex, breed, training, racing...) in order to avoid a positive control and those of the medicinal product actually administered (formulation, route of administration, dosage regimen, duration of treatment...). Advice has been published on the estimation of Withdrawal Times from Detection Times ([P.-L. TOUTAIN \(2010\) How to extrapolate a withdrawal time from an EHLSC published detection time: A Monte Carlo simulation appraisal Equine Veterinary Journal 42 \(3\) 248-254](#))