PEER-REVIEWED

# 5-Fluorouracil toxicosis in dogs

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Fluorouracil, a pyrimidine analogue, is considered an antimetabolite. It destroys rapidly dividing cells, so it is used to treat many neoplastic conditions. In combination with other antineoplastic agents (e.g. doxorubicin hydrochloride, cisplatin), 5-fluorouracil is considered a first-line therapy for many cancers in people (e.g. stomach, breast, prostate). 5-Fluorouracil creams and solutions are used topically to treat solar keratitis and skin cancers in people. In animals, 5-fluorouracil is also used to treat neoplastic conditions, but because of severe adverse reactions and death, its use has been limited. In animals of the considered and death, its use has been limited.

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Pharmacists and other medical personnel may be unaware of the severe problems that arise when dogs ingest 5-fluorouracil. Occasionally, owners are erroneously told that ingesting 5-fluorouracil is harmless or that dogs may develop only mild oral and gastrointestinal irritation. These potentially disastrous comments may stem from package insert information that states that no reports of overdosage have occurred with the product.<sup>4</sup> However, 5-fluorouracil frequently causes vomiting and seizures in dogs. The seizures soon become difficult to treat, and, despite aggressive therapy, the dogs often die.<sup>3,5</sup>

### Formulations and toxic dosages

5-Fluorouracil is available by prescription in injectable and topical formulations. The injectable form is available as Adrucil (Pharmacia & Upjohn) or as a generic in 50-mg/ml vials.<sup>1,2</sup> Efudex (ICN Pharmaceuticals) is available as topical 2% and 5% solutions in 10-ml drop dispensers and as a 5% cream in 25-g tubes. 5-Fluorouracil is also available as Fluoroplex (Allergan), a 1% topical solution in a 30-ml plastic dropper bottle or a 1% cream in 30-g tubes. <sup>1,2,4,6,7</sup>

While any form of 5-fluorouracil can cause problems, dogs are usually poisoned when they chew the small containers of topical ointment or solution used to treat their owners' skin conditions. The ASPCA APCC determined that the lowest toxic dose at which dogs show adverse signs is 8.6 mg/kg. The lowest lethal dose of 5-fluorouracil in dogs is estimated to be 20 mg/kg. This means if a dog weighing less than 160 lb (73 kg) ingests half the contents of a 25-g tube of 5% 5-fluorouracil, the dog will probably develop adverse signs. Even more alarming, any dog weighing less than 70 lb (32 kg) that in-

gests half the contents of a 25-g tube of 5% 5-fluorouracil has consumed a potentially lethal dose. The containers of 5-fluorouracil are quite small (about 11 cm long and 3 cm wide), so even small dogs could ingest the entire contents.

Another compound that can potentially result in 5-fluorouracil toxicosis is 5-flucytosine. This antifungal agent must be converted by cytosine deaminase to

5-fluorouracil to have cytotoxic effects. Mammalian cells lack cytosine deaminase. But if 5-flucytosine is taken orally, microbes in the digestive tract will convert it to 5-fluorouracil.<sup>7</sup>

# Mechanism of action and manifestations of toxicosis

The mechanism of 5-fluorouracil toxicosis in dogs is not fully understood. As a pyrimidine analogue, 5-fluorouracil can inhibit RNA processing and function as well as DNA synthesis and repair processes. So 5-fluorouracil inhibits cell division, affecting actively dividing cell lines such as bone marrow stem cells and intestinal crypt epithelial cells. <sup>1,3,5</sup> It is not known why dogs develop such severe seizures with 5-fluorouracil toxicosis. It is thought that 5-fluorouracil's metabolism to fluorocitrate causes cerebellar ataxia and convulsions, because fluorocitrate interferes with the normal Krebs cycle mechanisms of cellular energy production.<sup>3</sup>

Clinical signs reported in dogs after 5-fluorouracil ingestion include vomiting, lethargy, tremors, seizures, cardiac arrhythmias, and respiratory depression.<sup>2,6</sup> As men-

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tioned earlier, affected dogs often develop severe vomiting and uncontrollable seizures resulting in death or euthanasia despite aggressive decontamination procedures and intensive treatment. Out of 72 cases of 5-fluorouracil toxicosis reported to the ASPCA APCC between 1989 and 1998, 35 dogs died and 11 dogs were euthanatized.<sup>6</sup> The onset of clinical signs usually occurred within a half an hour to five hours after ingestion, and death occurred as quickly as seven hours after ingestion.

Although 5-fluorouracil toxicosis in dogs rarely results in bone marrow suppression, 5-fluorouracil's mechanism of action makes myelosuppression possible. 1,2,6 In most instances, the severe vomiting, tremors, and seizures that develop after dogs ingest 5-fluorouracil result in death or

euthanasia before evidence of bone marrow suppression occurs. 6 Myelosuppression is possible if dogs survive for more than four to seven days after 5-fluorouracil ingestion<sup>6</sup> and is manifested by leukopenia, depression, and hyperthermia. White blood cell counts as low as 750/µl have been reported (normal = 5,000 to  $14,000/\mu l$ ).<sup>2,6,8</sup>

## Treatment

There is no antidote for 5-fluorouracil toxicosis. Early decontamination (i.e. emesis induction followed by oral activated charcoal administration) is the best option to prevent serious signs from developing.<sup>2</sup> However, once signs begin, do not induce emesis or administer activated charcoal until the vomiting and seizures are controlled and the animal's airway is protected so that aspiration does not occur. Inducing emesis is often not helpful more than two or three hours after ingestion, because the 5fluorouracil will likely have passed through the stomach. Activated charcoal may be helpful up to 24 hours after ingestion; after 24 hours most of the 5-fluorouracil will likely be absorbed.

Once clinical signs are manifested, treatment includes gastrointestinal protection, tremor and seizure management, and other supportive care. For gastrointestinal protection, administer sucralfate (1 g in large dogs, 0.5 g in small dogs, orally t.i.d.), misoprostol (2 to 5 µg/kg orally [if the dog is not vomiting] t.i.d. to q.i.d.), or other gastric acid secretion inhibitors. 9 Administering metoclopramide hydrochloride (0.1 to 0.3 mg/kg intravenously or orally t.i.d.) in cases of protracted vomiting has been suggested, but use caution because it could cause additional neurologic signs.2

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The seizures and tremors from 5-fluorouracil poisoning are rarely controlled with diazepam. Pentobarbital sodium (3 to 15 mg/kg intravenously slowly to effect), phenobarbital (3 to 30 mg/kg intravenously slowly to effect), isoflurane, and propofol (4 to 6 mg/kg intravenously or continuous-rate infusion 0.6 mg/kg/min) have controlled 5-fluorouracil-induced seizures successfully.<sup>2,9</sup> Other supportive treatments include intravenous fluid administration, thermoregulation, and pain control (e.g. butorphanol tartrate 0.2 to 0.4 mg/kg every two to five hours subcutaneously, intramuscularly, or intra-

# Drontal® Plus

(praziquantel/pyrantel pamoate/febantel) Tablets

Broad Spectrum Anthelmintic for Dogs
Each Drontal® Plus Tablet for Small dogs contains 22.7 mg praziquantel, 22.7 mg pyrantel base as pyrantel pamoate and 113.4 mg febantel. Each Drontal\* Plus Tablet for Medium and Large Dogs contains 68.0 mg praziquantel, 68.0 mg pyrantel base

as pyrantel pamoate and 340.2 mg febantel.

INDICATIONS: Drontal\* Plus (praziquantel/pyrantel pamoate/febantel) Broad Spectrum Anthelminitic Tablets are indicated for removal of Tapeworms (Dipylidium caninum, Taenia pisiformis, Echinococcus granulosus, and removal and control of Echinococcus multilocularis). For removal of Hookworms (Ancylostoma caninum, Taenia pisiformis, Echinococcus granulosus, and removal and control of Echinococcus multilocularis). For removal of Hookworms (Ancylostoma caninum, Taenia pisiformis, Echinococcus granulosus, and removal and control of Echinococcus multilocularis). For removal of Hookworms (Ancylostoma caninum, Taenia pisiformis, Echinococcus granulosus, and removal and Control of Echinococcus multilocularis). Uncinaria stenocephala), Ascarids (Toxocara canis, Toxascaris leonina), and Whipworms (Trichuris vulpis)

\*NOT FOR USE IN DOGS WEIGHING LESS THAN 2 LBS. OR PUPPIES LESS THAN 3 WEEKS OF AGE.

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PRECAUTIONS: Strict hygenic precautions should be taken when handling dogs or feces suspected of harboring 
E. multilocularis. Infected dogs treated for the first time with Drontal\* Plus Tablets and dogs treated at intervals greater than 28 days may shed eggs in the feces after treatment. The animal should be held in the clinic
during this interval and all feces should be incinerated or autoclaved. If these procedures are not possible
the eggs can be destroyed by soaking the feces in a sodium hypochlorite (bleach) solution of 3.75% or greater.¹
All areas where the animal was maintained or in contact with should be thoroughly cleaned with sodium
hypochlorite and allowed to dry completely before reuse.

CONTRAINDICATIONS: DO NOT USE IN PREGNANT ANIMALS. Dogs treated with elevated levels (6 consecutive days with 3 times the labeled dosage rate) of the combination of febantel and praziquantel in early pregnancy demonstrated an increased incidence of abortion and fetal abnormalities.<sup>2</sup> The effects of Drontal\* Plus on

pregnant animals have not been determined.

There are no known contraindications against the use of praziquantel or pyrantel pamoate in dogs. There are no known contraindications against the use of praziquantel or pyrantel parmoate in dogs. ANIMAL TOXICOLORY: Controlled safety evaluations have been conducted in dogs with Drontal® Plus (praziquantel/pyrantel parmoate/beantel) Broad Spectrum Anthelmintic Tablets. Dogs receiving up to 5 times the label dosage (35 mg praziquantel, 35 mg pyrantel parmoate and 179 mg febantel per kg of body weight) for 3 consecutive days (3 times the label duration) showed clinical signs of vomition and non-formed stools, one dog receiving a 3 times labeled dose had elevated SEPT, SEOT, CPK and GGT readings (outside of normal range) at 5 days post-treatment. No additional findings were noted in hematology/clinical chemistry parameters nor were there any treatment related histological lesions. Vomition was the only side effect observed when dogs received a single treatment of 61 mg praziquantel, 61 mg pyrantel pamoate and 305 mg febantel/kg with one dog having an elevated SEPT reading (outside of normal range) at 24 hours post-treatment which had returned to normal by 7 days. eturned to normal by 7 days

WARNING: KEEP OUT OF REACH OF CHILDREN

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

TCraig, P.S. and McPharson, C.N.L., 1988. Sodium Hypochlorite as an ovicide for *Echinococcus. Ann Trop Med.* and Parasil. 82(2):211-213.

<sup>2</sup>Freedom of Information Summary (FOI) NADA 133-953 Vercom Paste (febantel and praziquantel).

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Bayer Corporation, Agriculture Division, Animal Health, Shawnee Mission, Kansas 66201 NADA 141-007, Approved by FDA

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venously). Using broad-spectrum antibiotics to prevent secondary bacterial infections may also be warranted. 2

If bone marrow suppression develops, filgrastim (Neupogen—Amgen) can be used to stimulate bone marrow stem cell proliferation in dogs. Filgrastim is a granulocyte colony-stimulating factor of human origin. The dosage is 4.2 to 6  $\mu$ g/kg given subcutaneously once a day for one to three days. No adverse effects have been reported.

### Conclusion

Based on the number of cases reported to the ASPCA APCC, 5-fluorouracil poisoning is uncommon in dogs. However, because severe signs or death can result from 5-fluorouracil toxicosis, you should consider the importance of early decontamination and proper treatment and be able to advise clients of the seriousness of an accidental ingestion.

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