





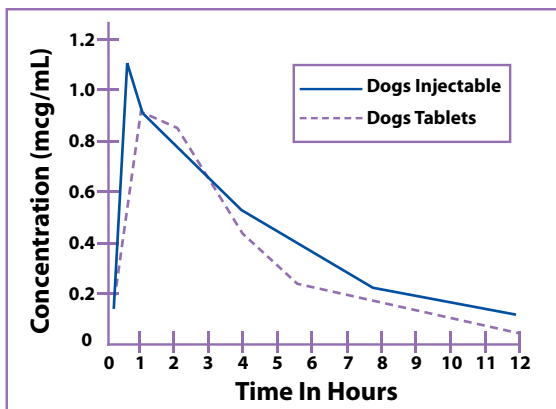
Enroflox[®] Injection (enrofloxacin) For Dogs 2.27%



KEY BENEFITS

-  Same active ingredient and dosing regimen as Baytril[®] Injectable Solution 2.27%
-  Concentration-dependent and bactericidal
-  Kills a broad range of Gram (+) and Gram (-) Bacteria
-  Significant savings versus Baytril Injectable Solution 2.27%

Serum Concentrations Of Enrofloxacin Following A Single Oral Or Intramuscular Dose At 2.5 mg/kg In Dogs



Enroflox[®] (enrofloxacin) Injection is a fluoroquinolone designed for the management of bacterial diseases, with broad-spectrum activity against both gram-negative and gram-positive bacteria including those causing dermal, respiratory and urinary tract infections. Each mL of injectable solution contains 22.7 mg of enrofloxacin. **Enroflox Injection** is available for dogs only.

CAUTION: Federal (U.S.A.) law restricts this drug to use by or on the order of a licensed veterinarian. Federal law prohibits the extra label use of this drug in food-producing animals. **CONTRAINDICATIONS:** Enrofloxacin is contraindicated in dogs known to be hypersensitive to quinolones. The safe use of enrofloxacin has not been established in large and giant breeds during the rapid growth phase. The use of enrofloxacin is contraindicated in small and medium breed dogs during the rapid growth phase (between 2 and 8 months of age). **WARNINGS:** For use in animals only. The use of this product in cats may result in Retinal Toxicity. Keep out of reach of children. Observe label directions and see product labeling for full product information.

DOSAGE AND ADMINISTRATION

Enroflox Injection may be used as the initial dose at 2.5 mg/kg. It should be administered intramuscularly (IM) as a single dose, followed by initiation of enrofloxacin tablet therapy.

Enroflox Injection May Be Administered As Follows:

Weight Of Animal	Enroflox [®] Injection For Dogs* 2.5 mg/kg
4.5 kg (10 lb.)	0.50 mL
6.8 kg (15 lb.)	0.75 mL
9.1 kg (20 lb.)	1.00 mL
11.3 kg (25 lb.)	1.25 mL
13.6 kg (30 lb.)	1.50 mL
15.9 kg (35 lb.)	1.75 mL
18.1 kg (40 lb.)	2.00 mL
20.4 kg (45 lb.)	2.25 mL
22.7 kg (50 lb.)	2.50 mL

*The initial Enroflox Injection administration should be followed 12 hours later by initiation of enrofloxacin tablet therapy.

HOW SUPPLIED:

Enroflox Injection is available in 20 mL, 50 mL and economical 100 mL vials to fit any practice.



Contact Your Distributor Or Call
Norbrook Today at 888-705-0408
For More Information

www.norbrookinc.com
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Enroflox® (enrofloxacin) Injection For Dogs

2.27%

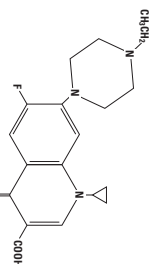
For Dogs Only

CAUTION: The U.S. Animal Health restricts this drug to use by or on the order of a licensed veterinarian.

Federal law prohibits the extralabel use of this drug in food-producing animals.

DESCRIPTION: Enrofloxacin is a synthetic chiral fluorinated quinolone antibiotic agent from the class of the fluoroquinolones. Enrofloxacin is available as a sterile, white, lyophilized powder for reconstitution to a clear, colorless to light yellow, aqueous, isotonic, buffered, sterile, ophthalmic solution (see Tables I and II). Each ml of injectable solution contains enrofloxacin 22.7 mg, 4-hydroxy-2,6-dioxo-3-quinolincarboxylic acid.

CHEMICAL NOMENCLATURE AND STRUCTURAL FORMULA:



ACTIONS:

Microbiology: Quinolone carboxylic acid derivatives are classified as DNA gyrase inhibitors. Enrofloxacin is bactericidal. The site of action is bacterial DNA synthesis, not cell wall synthesis. Enrofloxacin is active against both Gram negative and Gram positive bacteria. The minimum inhibitory concentrations (MICs) were determined for a series of 37 isolates representing 9 genera of bacteria from natural infections in dogs; selected principally because of resistance to one or more of the following antibiotics: ampicillin, cephalosporins, clindamycin, ciprofloxacin, erythromycin, gentamicin, kanamycin, penicillin, streptomycin, tetracycline, triple sulfas and sulfa/methoprim. The MIC values for enrofloxacin against these isolates are shown in Table I. The MIC values for enrofloxacin against these isolates were susceptible to enrofloxacin *in vitro* but the clinical significance has not been determined for some of the isolates.

The susceptibility of organisms to enrofloxacin should be determined using the enrofloxacin 5 mgc disks. Specimens for susceptibility testing should be collected prior to the initiation of enrofloxacin therapy.

TABLE I - MIC Values for Enrofloxacin Against Canine Pathogens (Diagnostic Laboratory Isolates, 1989)

Organisms	Isolates	MIC Range (mg/ml)
<i>Bacteroides</i> spp.	2	0.06-2.0
<i>Bacteroides bronchiseptica</i>	3	0.125-0.5
<i>Brucella canis</i>	2	0.125-0.25
<i>Campylobacter jejuni</i>	4	<0.06-0.031
<i>Enterobacteriaceae</i> spp.	10	0.031-0.05
<i>Proteus mirabilis</i>	6	0.062-0.125
<i>Pseudomonas aeruginosa</i>	4	0.5-8
<i>Staphylococcus</i> spp.	5	0.125

The inhibitory activity on 121 isolates of seven canine urinary pathogens was also investigated and is listed in Table II.

Distribution in the Body: Enrofloxacin penetrates into all canine tissues and body fluids. Concentrations of drug equal to or greater than the MIC for many pathogens (See Tables I, II and III) are reached in most tissues by two hours after dosing at 2.5 mg/kg and are maintained for 6-12 hours after dosing. Particularly high levels of enrofloxacin are found in urine. A single oral dose of 2.5 mg/kg results in drug levels at 12 hours after dosing at 2.5 mg/kg is given in Table III.

TABLE II - Body Fluid/Tissue distribution of Enrofloxacin in Dogs Single Oral Dose = 2.5 mg/kg (1.13 mg/ml) Post-treatment Enrofloxacin Levels (n=2)

Body Fluids (mg/ml)	24h	84h
Serum	4.25	0.78
Eye Fluids	0.53	0.56
Whole Blood	1.01	0.56
Plasma	0.67	0.33
Tissues (mg/g)	Hemopoietic System	
Liver	3.02	1.36
Spleen	1.45	0.95
Bone Marrow	2.10	0.72
Small Intestine	1.32	0.91
Urinary System		
Kidney	1.87	0.99
Bladder Wall	1.36	0.88
Testes	1.38	1.10
Prostate	1.36	2.20
Uterine Wall	1.59	0.29
Gastrointestinal and Cardiopulmonary Systems		
Heart	1.88	0.82
Somach	3.24	0.78
Small Intestine	2.10	2.16
Other	0.52	0.40
Fat	0.68	0.48
Skin	0.92	0.42
Muscle	0.36	0.74
Bone	0.45	0.21
Mammary Gland	0.45	0.21
Feeces	1.65	9.97

Pharmacokinetics: In dogs, the absorption and elimination characteristics of the oral formulation are linear. Plasma concentrations increase proportionally with dose. When enrofloxacin is administered at up to 11.5 mg/kg, twice daily, approximately 90% of the orally administered dose is excreted in the urine. The elimination half-life in dogs is approximately 2.4 hours at this dose. The primary route of excretion is via the urine. The absorption and elimination characteristics beyond this point are unknown. Saturable absorption and/or elimination processes may occur at greater doses. When saturation of the absorption process occurs, the plasma concentration of the active moiety will be less than predicted, based on the concept of dose proportionality.

Following an oral dose of 2.5 mg/kg (1.13 mg/ml), enrofloxacin reached 90% of its maximum serum concentration in 15 minutes and peak serum level was reached in one hour. The elimination half-life in dogs is approximately 2.4 hours at this dose.

A graph indicating the mean serum levels following a dose of 2.5 mg/kg (1.13 mg/ml) in dogs (oral and intramuscular) is shown in Figure 1.

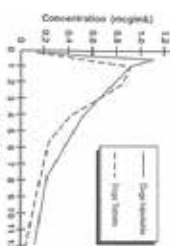


Figure 1 - Serum Concentrations of Enrofloxacin Following a Single Oral or Intramuscular Dose at 2.5 mg/kg in Dogs

Breakpoint: Based on pharmacokinetic studies of enrofloxacin in dogs after a single oral administration 2.5 mg enrofloxacin/kg BW (i.e. half of the lowest end-point daily dose range) and the data listed in Tables I and II, the following breakpoints are recommended for canine isolates.

Zone Diameter (mm)	MIC (mg/ml)	Interpretation
≥21	≤0.05	Susceptible (S)
17-20	1	Intermediate (I)
≤17	≥2	Resistant (R)

A report of "Susceptible" indicates that the pathogen is likely to be inhibited by the recommended concentration of drug. An organism reported as being "Intermediate" or "Resistant" should be tested on a different buffer and saline dilution. This organism should be tested at body site where drug is physiologically concentrated. A report of "Resistant" indicates that the achievable drug concentrations are unlikely to be inhibitory and other therapy should be selected.

Standardized procedures require the use of laboratory control organisms for both standardized disk diffusion assays and standardized cation assays. The drug formulation does not meet the following requirements for reference strains: *Staphylococcus aureus* ATCC 29213.

QC Strain	MIC (mg/ml)	Zone Diameter (mm)
<i>E. coli</i> ATCC 25922	0.068 - 0.03	32 - 40
<i>P. aeruginosa</i> ATCC 27853	1 - 4	15 - 19
<i>S. aureus</i> ATCC 28213	0.03 - 0.12	27 - 31

INDICATIONS:

Enrofloxacin (brand of enrofloxacin) Injectable Solution is indicated for the management of diseases in dogs associated with bacteria susceptible to enrofloxacin.

EFFICACY CONFIRMATION:

Clinical efficacy was established in dermal infections (wounds and abscesses) associated with susceptible strains of *Escherichia coli*, *Wolsteinella pneumoniae*, *Proteus mirabilis*, and *Staphylococcus intermedius*; respiratory infections (pneumonia, bronchitis, tracheitis) associated with susceptible strains of *Streptococcus pneumoniae*, *Haemophilus influenzae*, *Mycoplasma canis*, and *Staphylococcus aureus*.

CONTRAINDICATIONS:

Enrofloxacin is contraindicated in dogs known to be hypersensitive to quinolones.

ADVERSE REACTIONS:

No drug related adverse effects were reported in 172 clinical cases treated with an enrofloxacin injectable solution followed by enrofloxacin tablets at 5.0 mg/kg per day, to report adverse reactions call Norbrook at 1-866-591-5777.

ANIMAL SAFETY SUMMARY:

Adult dogs receiving enrofloxacin orally at a daily dosage rate of 52 mg/kg for 13 consecutive days had no clinical signs of vomiting, diarrhea, or other effects. The elimination half-life of 2.4 hours in dogs was not affected. Adult dogs receiving the tablet formulation for 30 consecutive days at a daily treatment of 25 mg/kg did not exhibit significant clinical signs nor were there effects upon the clinical chemistry, hematological or histological parameters. Daily doses of 125 mg/kg for up to 11 days induced vomiting, inappetence, depression, difficult locomotion and death while adult dogs receiving 50 mg/kg/day for 14 days had clinical signs (vomiting and inappetence).

Adult dogs dosed continuously for three treatments at 12.5 mg/kg followed by 57 oral treatments at 12.5 mg/kg, all at 2-hour intervals, did not exhibit either significant clinical signs or effects upon the clinical chemistry, hematological or histological parameters.

Dogs treated with 15.0 or 28.0 mg/kg oral dosing puppiness with daily dosage rate of 25 mg/kg has indicated abnormal carriage of the capillipait and weakness in the hindquarters. Significant improvement of clinical signs is observed following drug withdrawal. Microscopic studies have identified lesions of the articular cartilage following 30 day treatments at either 5, 15 or 25 mg/kg in this age group. Clinical signs of difficult ambulation or associated cartilage lesions have not been observed in 23 to 34 week old puppies following daily treatments of 25 mg/kg for 30 consecutive days in 21 week old puppies with the same treatment schedule.

Tests indicated no effect on circulating microflora or adult heartworms (*Dirofilaria immitis*) when dogs were treated at a daily dosage rate of 15 mg/kg for 30 days. No effect on chromosome values was observed. No adverse effects were observed on reproductive parameters when male dogs received 10 consecutive daily treatments of 15 mg/kg/day at 3 months

(90, 45 and 14 days) prior to breeding or when female dogs received 10 consecutive daily treatments of 15 mg/kg/day at 4 intervals between 30 and 0 days prior to breeding, early pregnancy (between 10th and 30th days), late pregnancy (between 40th and 80th days), and during lactation (the first 28 days).

DRUG INTERACTIONS:

Concomitant therapy with other drugs that are metabolized in the liver may reduce the clearance rates of the quinolone and the other drug.

WARNINGS:

Enrofloxacin has been administered to dogs at a daily dosage rate of 10mg/kg for 14 consecutive days. No signs of retinopathy were observed. The drug is contraindicated in dogs with known retinopathy. Enrofloxacin may cause blindness. Enrofloxacin should not be administered to dogs with known retinopathy, optic neuritis, optic atrophy, or other conditions of the eye.

PRECAUTIONS:

Quinolone-class drugs should be used with caution in animals with known or suspected renal or hepatic system disease. In dogs with CNS stimulation which may lead to convulsive seizures.

PRECAUTIONS:

Quinolone-class drugs have been associated with cartilage erosions in weight-bearing joints and other forms of arthropathy in immature animals of various species.

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The use of fluorquinolones in cats has been reported to adversely affect the retina. Such products should be used with caution in cats.

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