

# UNIPRIM<sup>®</sup>

TMP/SDZ POWDER FOR HORSES



PROUDLY MADE  
IN THE USA

**Six sizes, Two flavors,  
One powerful  
antibiotic.**



# UNIPRIM<sup>®</sup>

## A solution as *unique*

✓ **FAST-ACTING, POWERFUL ANTIBIOTIC**  
UNIPRIM<sup>®</sup> powder is a combination of Trimethoprim/Sulfadiazine used to treat a wide spectrum of bacterial infections.

✓ **MULTIPLE, CONVENIENT SIZES**  
6 sizes, 2 Flavors

✓ **CONVENIENCE EQUALS COMPLIANCE**

- Dosing is easy, customizable and accurate. Why count, crush and sweeten SMZ human tablets when a 37.5g packet or two scoops of UNIPRIM treat an 1,100 lb horse?
- Adjusted dose is 1tsp / 100lbs.

✓ **EFFECTIVENESS**  
UNIPRIM powder was designed specifically for horses and is cost-effective when compared to its human counterpart (SMZ/TMP).

Pharmacokinetic studies show that sulfadiazine (SDZ) in UNIPRIM has a greater volume of distribution in the horse than sulfamethoxazole (SMZ) providing higher tissue levels and a beneficial treatment more suited to the horse. Also, the micronized trimethoprim used in the human tablets tends to adhere to roughage in the horse digestive system limiting its absorption. UNIPRIM was designed to maximize trimethoprim absorption while maintaining the horse's usual dietary regimen.



# apple UNIPRIM®

Use as their situation.



**ONLY FDA-APPROVED  
ANTIBIOTIC WITH  
APPLE FLAVOR**

Pioneer TMP/SDZ antibiotic for horses is also available in an apple flavored powder. Now you can offer you clients traditional and flavored options.

### COMPETITOR COMPARISON CHART

	UNIPRIM® (TMP/SDZ powder)	TUCOPRIM® (TMP/SDZ powder)	Human tablets (TMP/SMZ)
FDA Equine Approved	✓	✓	
6 sizes & 2 flavors	✓		
Easy to dose (2 scoops/1100 lbs.)	✓		
Easily-adjusted dose (1tsp./100 lbs.)	✓		
Made in the USA!	✓		?

*Uniprim is a registered trademark of Macleod Pharmaceuticals, Inc.  
Tucoprим is a registered trademark of Pharmacia & Upjohn Co., LLC*



2000g



1200g

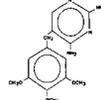
# UNIPRIM<sup>®</sup>

## POWDER FOR HORSES

(TRIMETHOPRIM/SULFADIAZINE)

**DESCRIPTION:** UNIPRIM Powder contains 67 mg trimethoprim and 333 mg sulfadiazine per gram.

UNIPRIM Powder is a combination of trimethoprim and sulfadiazine in the ratio of 1 part to 5 parts by weight, which provides effective antibacterial activity against a wide range of bacterial infections in animals.



Trimethoprim is 2, 4 diamino-5-(3,4,5-trimethoxybenzyl) pyrimidine.

**ACTIONS:**

**Microbiology:** Trimethoprim blocks bacterial production of tetrahydrofolic acid from dihydrofolic acid by binding to and reversibly inhibiting the enzyme dihydrofolate reductase.

Sulfadiazine, in common with other sulfonamides, inhibits bacterial synthesis of dihydrofolic acid by competing with para-aminobenzoic acid.

Trimethoprim/sulfadiazine thus imposes a sequential double blockade on bacterial metabolism. This deprives bacteria of nucleic acids and proteins essential for survival and multiplication, and produces a high level of antibacterial activity which is usually bactericidal.

Although both sulfadiazine and trimethoprim are antifolate, neither affects the folate metabolism of animals. The reasons are: animals do not synthesize folic acid and cannot, therefore, be directly affected by sulfadiazine; and although animals must reduce their dietary folic acid to tetrahydrofolic acid, trimethoprim does not affect this reduction because its affinity for dihydrofolate reductase of mammals is significantly less than for the corresponding bacterial enzyme.

Trimethoprim/sulfadiazine is active against a wide spectrum of bacterial pathogens, both gram-negative and gram-positive. The following *in vitro* data are available, but their clinical significance is unknown. In general, species of the following genera are sensitive to trimethoprim/sulfadiazine:

<u>Very Sensitive</u>	<u>Sensitive</u>	<u>Moderately Sensitive</u>	<u>Not Sensitive</u>
<i>Escherichia</i>	<i>Staphylococcus</i>	<i>Moraxella</i>	<i>Mycobacterium</i>
<i>Streptococcus</i>	<i>Neisseria</i>	<i>Nocardia</i>	<i>Leptospira</i>
<i>Proteus</i>	<i>Klebsiella</i>	<i>Brucella</i>	<i>Pseudomonas</i>
<i>Salmonella</i>	<i>Fusiformis</i>		<i>Erysipelothrix</i>
<i>Pasteurella</i>	<i>Corynebacterium</i>		
<i>Shigella</i>	<i>Clostridium</i>		
<i>Haemophilus</i>	<i>Bordetella</i>		

As a result of the sequential double blockade of the metabolism of susceptible organisms by trimethoprim and sulfadiazine, the minimum inhibitory concentration (MIC) of trimethoprim/sulfadiazine is markedly less than that of either of the components used separately. Many strains of bacteria that are not susceptible to one of the components are susceptible to trimethoprim/sulfadiazine. A synergistic effect between trimethoprim and sulfadiazine in combination has been shown experimentally both *in vitro* and *in vivo* (in dogs).

Trimethoprim/sulfadiazine is bactericidal against susceptible strains and is often effective against sulfonamide-resistant organisms. *In vitro* sulfadiazine is usually only bacteriostatic.

The precise *in vitro* MIC of the combination varies with the ratio of the drugs present, but action of trimethoprim/sulfadiazine occurs over a wide range of ratios with an increase in the concentration of one of its components compensating for a decrease in the other. It is usual, however, to determine MICs using a constant ratio of 1 part trimethoprim in 20 parts of the combination.

The following table shows MICs, using the above ratio, of bacteria which were susceptible to both trimethoprim (TMP) and sulfadiazine (SDZ). The organisms are those most commonly involved in conditions for which trimethoprim/sulfadiazine is indicated:

AVERAGE MINIMUM INHIBITORY CONCENTRATION (MIC-mcg/mL)				
Bacteria	TMP Alone	SDZ Alone	TMP/SDZ	
			TMP	SDZ
<i>Escherichia coli</i>	0.31	26.5	0.07	1.31
<i>Proteus species</i>	1.30	24.5	0.15	2.85
<i>Staphylococcus aureus</i>	0.60	17.6	0.13	2.47
<i>Pasteurella species</i>	0.06	20.1	0.03	0.56
<i>Salmonella species</i>	0.15	61.0	0.05	0.95
$\beta$ <i>Streptococcus</i>	0.50	24.5	0.15	2.85

The following table demonstrates the marked effect of the trimethoprim and sulfadiazine combination against sulfadiazine-resistant strains of normally susceptible organisms:

AVERAGE MINIMUM INHIBITORY CONCENTRATION OF SULFADIAZINE-RESISTANT STRAINS (MIC-mcg/mL)				
Bacteria	TMP Alone	SDZ Alone	TMP/SDZ	
			TMP	SDZ
<i>Escherichia coli</i>	0.32	>245	0.27	5.0
<i>Proteus species</i>	0.66	>245	0.32	6.2

**Susceptibility Testing:** In testing susceptibility to trimethoprim/sulfadiazine, it is essential that the medium used does not contain significant amounts of interfering substances which can bypass the metabolic blocking action, e.g., thymidine or thymine.

The standard SxT disc is appropriate for testing by the disc diffusion method.

**Pharmacology:** Following oral administration, trimethoprim/sulfadiazine is rapidly absorbed and widely distributed throughout body tissues. Concentrations of trimethoprim are usually higher in tissues than in blood. The levels of trimethoprim are high in lungs, kidney, and liver, as would be expected from its physical properties.

Serum trimethoprim concentration in horses following oral administration indicate rapid absorption of the drug; peak concentrations occur in 1.5 hours. The mean serum elimination half-life is 2 to 2.5 hours. Sulfadiazine absorption is slower, requiring 2.5 to 6 hours to reach peak concentrations. The mean serum elimination half-life for sulfadiazine is about 4 to 5.5 hours.

Usually, the concentration of an antibacterial in the blood and the *in vitro* MIC of the infecting organism indicate an appropriate period between doses of a drug. This does not hold entirely for trimethoprim/sulfadiazine because trimethoprim, in contrast to sulfadiazine, localizes in tissues and therefore, its concentration and ratio to sulfadiazine are higher there than in blood.

The following table shows the average concentration of trimethoprim and sulfadiazine, as measured in either serum or plasma, in twenty-four adult horses observed after a single dose of UNIPRIM Powder:

AVERAGE SERUM/PLASMA CONCENTRATION (mcg/mL)							
Trimethoprim (5 mg/kg)				Sulfadiazine (25 mg/kg)			
1h	3h	6h	10h	24h	1h	3h	6h
0.82	0.69	0.36	0.12	<.025	9.9	18.8	17.3
					9.0		1.6

Excretion of trimethoprim/sulfadiazine is chiefly by the kidneys, by both glomerular filtration and tubular secretion. Urine concentrations of both trimethoprim and sulfadiazine are severalfold higher than blood concentrations. Neither trimethoprim nor sulfadiazine interferes with the excretion pattern of the other.

**INDICATIONS AND USAGE:** Trimethoprim/sulfadiazine is indicated in horses where potent systemic antibacterial action against sensitive organisms is required. Trimethoprim/sulfadiazine is indicated where control of bacterial infections is required during treatment of:

- Acute Strangles
- Respiratory Tract Infections
- Acute Urogenital Infections
- Wound Infections and Abscesses

Trimethoprim/sulfadiazine is well tolerated by foals.

**CONTRAINDICATIONS:** Trimethoprim/sulfadiazine should not be used in horses showing marked liver parenchymal damage, blood dyscrasias, or in those with a history of sulfonamide sensitivity.

**WARNING:** Do not use in horses intended for human consumption.

**ADVERSE REACTIONS:** During clinical trials, one case of anorexia and one case of loose feces following treatment with the drug were reported.

Individual animal hypersensitivity may result in local or generalized reactions, sometimes fatal. Anaphylactoid reactions, although rare, may also occur. **Antidote:** Epinephrine.

**Post Approval Experience:** Horses have developed diarrhea during trimethoprim/sulfadiazine treatment, which could be fatal. If fecal consistency changes during trimethoprim/sulfadiazine therapy, discontinue treatment immediately and contact your veterinarian.

**PRECAUTION:** Water should be readily available to horses receiving sulfonamide therapy.

**ANIMAL SAFETY:** Toxicity is low. The acute toxicity (LD<sub>50</sub>) of trimethoprim/sulfadiazine is more than 5 g/kg orally in rats and mice. No significant changes were recorded in rats given doses of 600 mg/kg per day for 90 days.

Horses treated intravenously with trimethoprim/sulfadiazine 48% injection have tolerated up to five times the recommended daily dose for 7 days or on the recommended daily dose for 21 consecutive days without clinical effects or histopathological changes.

Lengthening of clotting time was seen in some of the horses on high or prolonged dosing in one of two trials. The effect, which may have been related to a resolving infection, was not seen in a second similar trial.

Slight to moderate reductions in hematopoietic activity following high, prolonged dosage in several species have been recorded. This is usually reversible by folic acid (leucovorin) administration or by stopping the drug. During long-term treatment of horses, periodic platelet counts and white and red blood cell counts are advisable.

**TERATOLOGY:** The effect of trimethoprim/sulfadiazine on pregnancy has not been determined. Studies to date show there is no detrimental effect on stallion spermatogenesis with or following the recommended dose of trimethoprim/sulfadiazine.

**DOSAGE AND ADMINISTRATION:** The recommended dosage is 3.75 g UNIPRIM Powder per 110 lbs (50 kg) body weight per day. Administer UNIPRIM Powder orally once a day in a small amount of palatable feed.

**Dose Instructions:** One 37.5 g packet is sufficient to treat 1100 lbs (500 kg) of body weight. For the 1125 g packets and 12 kg boxes, a level, loose-filled, 67 cc scoop contains 37.5 g, sufficient to treat 1100 lbs (500 kg) of body weight. For the 200 g, 400 g, and 1200 g jars, and 2000 g pail, two level, loose-filled, 32 cc scoops contain 37.5 g, sufficient to treat 1100 lbs (500 kg) of body weight. Since product contents may settle, gentle agitation during scooping is recommended.

The usual course of treatment is a single, daily dose for 5 to 7 days.

Continue acute infection therapy for 2 or 3 days after clinical signs have subsided.

If no improvement of acute infections is seen in 3 to 5 days, reevaluate the diagnosis.

UNIPRIM Powder may be used alone or in conjunction with intravenous dosing. Following treatment with trimethoprim/sulfadiazine 48% injection, therapy can be maintained using oral Powder.

A complete blood count should be done periodically in patients receiving UNIPRIM Powder for prolonged periods. If significant reduction in the count of any formed blood element is noted, treatment with UNIPRIM Powder should be discontinued.

**STORAGE:** Store at or below 25°C (77°F)

**HOW SUPPLIED:** UNIPRIM Powder is available in 37.5 g packets, 1125 g packets, 200 g jars, 400 g jars, 1200 g jars, 2000 g pails and 12 kg boxes. Apple Flavored UNIPRIM Powder is available in 37.5 g packets, 1125 g packets, 200 g jars, 400 g jars, 1200 g jars and 2000 g pails.

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

**ANADA#** 200-033, Approved by FDA

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UNIPRIM<sup>®</sup>



Contact your Midwest Veterinary Supply Representative for more information!  
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