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## Trilostane

### (Vetoryl (d)) POM-V

- Formulations

Oral: 10 mg, 30 mg, 60 mg, 120 mg capsules. 5 mg capsules and a liquid formulation are available on a named patient basis.VSP

- Action

Blocks adrenal synthesis of glucocorticoids by competitively and reversibly inhibiting the adrenocortical enzyme 3-beta-hydroxysteroid dehydrogenase. Effects on mineralocorticoids are relatively minor.

- Use

- Treatment of canine ACTH-dependent and -independent hypercortisolism.
- Treatment of feline hypercortisolism.
- Canine alopecia X syndrome.

Twice-daily dosing is advocated if clinical signs persist despite an increased dose, when 'escape' polydipsia occurs, or in patients with concurrent diabetes mellitus. Treatment in dogs should be monitored after 10 days, 4 weeks, 12 weeks and then every 3–4 months using a combination of clinical signs +/- pre-pill cortisol measurement (aim for pre-pill cortisol of 40–140 nmol/l) or an ACTH response test (start test 3 hours post-dosing, aim for a post-ACTH cortisol of 40–120 nmol/l). Monitor treatment in cats with ACTH response tests. Dosage adjustments may be necessary even after prolonged periods of stability. Trilostane should be given with food as absorption is poor on an empty stomach.

### [More +](#)

- DOSES

- Dogs Hypercortisolism: 2 mg/kg p.o. q24h or 1 mg/kg p.o. q12h.
- Cats Hypercortisolism: 10–30 mg/cat p.o. q12–24h.

### Adverse reactions

Reported adverse effects in dogs include vomiting, diarrhoea, lethargy and a reduced appetite. Mild increases in serum potassium, bilirubin and calcium may be seen. Iatrogenic hypoadrenocorticism and adrenal necrosis have been reported and may cause collapse or a hypoadrenocortical crisis. Adrenal



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hyperplasia may occur with prolonged treatment (clinical significance unknown). Prolonged adrenal suppression after drug withdrawal has been noted.

- Contraindications

Do not use in pregnant animals or those with renal or hepatic insufficiency.

- Drug interactions

Trilostane should not be administered concurrently with other drugs that suppress adrenal function, e.g. mitotane, itraconazole. May have additive aldosterone lowering effects if used with ACE inhibitors. May potentiate hyperkalaemia if used with potassium-sparing diuretics.

- Safety and handling

Normal precautions should be observed. People who are or may become pregnant should not handle this drug.

Extract from BSAVA Formulary March 2025