

# **Injectable Solution**

# Antibiotic 100 mg of tulathromycin/mL

# For subcutaneous injection in beef and non-lactating dairy cattle and intramuscular injection in swine only.

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

## DESCRIPTION

DRAXXIN Injectable Solution is a ready-to-use sterile parenteral preparation containing tulathromycin, a semi-synthetic macrolide antibiotic of the sub-class; triamilide. Each mL of DRAXXIN contains 100 mg of tulathromycin as the free base in a 50% propylene glycol vehicle, monothioglycerol (5 mg/mL), with citric and hydrochloric acids added to adjust pH.

DRAXXIN consists of an equilibrated mixture of two isomeric forms of tulathromycin in a 9:1 ratio. Structures of the isomers are shown below

# Figure 1.



The chemical names of the isomers are (2R,3S,4R,5R,8R,10R,11R,12S,13S, The chemical names of the isomers are (2R, 3S, 4R, 5R, 8R, 10R, 11R, 12S, 13S, 14R)-13-[[2,6-cidieoxy-3-C-methyl-3-0-methyl-4-C-[(propylamino)methyl]-α-L-ribo-hexopyrano-syl]oxy]-2-ethyl-3, 4, 10-trihydroxy-3, 5, 8, 10, 12, 14-hexamethyl-11-[[3,4,6-trideoxy-3-(dimethylamino)-B-D-xylo-hexopyranosyl] -oxy]-1-oxa-6-azacyclopentadecan-15-one and (2S, 3S, 6R, 8R, 9R, 10S, 11S, 12R)-11-[[2,6-dideoxy-3-C-methyl-3-O-methyl-4-C-[(propylamino)methyl]-α-L-ribohexopyranosyl]oxy]-2-[(1R, 2R)-1,2-dihydroxy-1-methylbutyl]-8-hydroxy-3-6, 8, 10, 12-pentamethyl-9-[[3,4,6-trideoxy-3-(dimethylamino)-β-D-xylohexopyranosyl]oxy]-1-oxa-4-azacyclotridecan-13-one, respectively.

#### INDICATIONS Cattle

DRAXXIN Injectable Solution is indicated for the treatment of bovine respi ratory disease (BRD) associated with Mannheimia haemolytica. Pasteurella multocida, and Histophilus somni (Haemophilus somnus), and for the control of respiratory disease in cattle at high risk of developing BRD, associated with Mannheimia haemolytica, Pasteurella multocida and Histophilus somni (Haemophilus somnus),

DRAXXIN Injectable Solution is indicated for the treatment of swine respiratory disease (SRD) associated with Actinobacillus pleuropneumoniae, Pasteurella multocida, Bordetella bronchiseptica and Haemophilus parasuis.

# DOSAGE AND ADMINISTRATION

Inject subcutaneously as a single dose in the neck of cattle at a dosage of 2.5 mg/kg (1.1 mL/100 lb) body weight (BW). Do not inject more than 10 mL per injection site. Cattle

Table 1. DRAXXIN Cattle Dosing Guide

Animal Weight (Pounds)	Dose Volume (mL)		
100	1.1		
200	2.3		
300	3.4		
400	4.5		
500	5.7		
600	6.8		
700	8.0		
800	9.1		
900	10.2		
1000	11.4		

#### Swine

Inject intramuscularly as a single dose in the neck of swine at a dosage of 2.5 mg/kg (0.25 mL/22 lb) BW. Do not inject more than 2.5 mL per injection site. Table 2. DRAXXIN Swine Dosing Guide

Animal Weight (Pounds)	Dose Volume (mL)		
15	0.2		
30	0.3		
50	0.6		
70	0.8		
90	1.0		
110	1.3		
130	1.5		
150	1.7		
170	1.9		
190	2.2		
210	2.4		
230	2.6		
250	2.8		
270	3.1		
290	3.3		

### CONTRAINDICATIONS

The use of DRAXXIN Injectable Solution is contraindicated in animals pre viously found to be hypersensitive to the drug.

# WARNINGS

FOR USE IN ANIMALS ONLY, NOT FOR HUMAN USE. KEEP OUT OF REACH OF CHILDREN. NOT FOR USE IN CHICKENS OR TURKEYS.

#### RESIDUE WARNINGS Cattle

Cattle intended for human consumption must not be slaughtered within 18 days from the last treatment. Do not use in female dairy cattle 20 months of age or older. A withdrawal period has not been established for this product in pre-ruminating calves. Do not use in calves to be processed for veal

# Swine

Swine intended for human consumption must not be slaughtered within 5 days from the last treatment

#### PRECAUTIONS Cattle

The effects of DRAXXIN on bovine reproductive performance, pregnancy and lactation have not been determined. Subcutaneous injection can cause a transient local tissue reaction that may result in trim loss of edible tissue at slaughter.

Swine The effects of DRAXXIN on porcine reproductive performance, pregnancy and lactation have not been determined. Intramuscular injection can cause a tran-sient local tissue reaction that may result in trim loss of edible tissue at slaughter.

#### ADVERSE REACTIONS Cattle

In one field study, two calves treated with DRAXXIN at 2.5 mg/kg BW exhi-bited transient hypersalivation. One of these calves also exhibited transient dyspnea, which may have been related to pneumonia.

Swine In one field study, one out of 40 pigs treated with DRAXXIN at 2.5 mg/kg BW exhibited mild salivation that resolved in less than four hours.

#### CLINICAL PHARMACOLOGY

CLINICAL PHARMACOLOGY At physiological pH, tulathromycin (a weak base) is approximately 50 times more soluble in hydrophilic than hydrophobic media. This solubility profile is consistent with the extracellular pathogen activity typically associated with the macrolides.<sup>1</sup> Markedly higher tulathromycin concentrations are observed in the lungs as compared to the plasma. The extent to which lung concentra-tions represent free (active) drug was not examined. Therefore, the clinical relevance of these deviced lung concentrations in underpresed. relevance of these elevated lung concentrations is undetermined.

Although the relationship between tulathromycin and the characteristics of its antimicrobial effects has not been characterized, as a class, macrolides Its animitrotopia effects has not been characterized, as a class, macroindes tend to be primarily bacteriostatic, but may be bactericidal against some pathogens.<sup>2</sup> They also tend to exhibit concentration independent killing; the rate of bacterial eradication does not change once serum drug concentra-tions reach 2 to 3 times the MIC of the targeted pathogen. Under these con-ditions, the time that serum concentrations remain above the MIC becomes the major determinant of antimicrobial activity. Macrolides also exhibit a post-antibiotic effect (PAE), the duration of which tends to be both drug and pathogen dependent in concentrations remains a set of the major dependent of the concentraparticipant dependent. In general, by increasing the macrolide concentra-tion and the exposure time, the PAE will increase to some maximal duration. Of the two variables, concentration and exposure time, drug concentration tends to be the most powerful determinant of the duration of PAE

Tulathromycin is eliminated from the body primarily unchanged via biliary

#### excretion. Cattle

Following subcutaneous administration into the neck of feeder calves at a Following subcutaneous administration into the neck of feeder calves at a dosage of 2.5 mg/kg BW, tulathromycin is rapidly and nearly completely absorbed. Peak plasma concentrations generally occur within 15 minutes after dosing and product relative bioavailability exceeds 90%. Total systemic clearance is approximately 170 mL/hr/kg. Tulathromycin distributies exten-sively into body tissues, as evidenced by volume of distribution values of approximately 11 L/kg in healthy ruminating calves.<sup>3</sup> This extensive volume of distribution is largely responsible for the long elimination half-life of this compound [approximately 2.75 days in the plasma (based on quantifiable terminal cheme druin concentrations) versue 3.7 days for table lung conterminal plasma drug concentrations) versus 8.75 days for total lung con-centrations (based on data from healthy animals)]. Linear pharmacokinetics are observed with subcutaneous doses ranging from 1.27 mg/kg BW to 5.0 mg/kg BW. No pharmacokinetic differences are observed in castrated male versus female calves

#### Swine

Swine Following intramuscular administration to feeder pigs at a dosage of 2.5 mg/kg BW, tulathromycin is completely and rapidly absorbed (T<sub>max</sub> ~0.25 hour). Subsequently, the drug rapidly distributes into body tissues, achieving a volume of distribution exceeding 15 L/kg. The free drug is rapidly cleared from the systemic circulation (CL<sub>systemic</sub> = 187 mL/hr/kg). However, it has a long terminal elimination half-life (60 to 90 hours) owing to its extensive volume of distribution. Although pulmonary tulathromycin concentrations are substan-tially higher than concentrations observed in the plasma, the clinical signifi-cance of these findings is undetermined. There are no concert differences in cance of these findings is undetermined. There are no gender differences in swine tulathromycin pharmacokinetics.

#### MICROBIOLOGY Cattle

In vitro activity of tulathromycin has been demonstrated against Mannheimia haemolytica, Pasteurella multocida and Histophilus somni (Haemophilus somnus), the three major pathogens associated with BRD.

All minimum inhibitory concentration (MIC) values were determined using the 9:1 isomer ratio of this compound. The MICs of tulathromycin were determined for isolates obtained from animals enrolled in field studies in the U.S. during 1999.

Table 3. Tulathromycin MIC values from field studies evaluating BRD in the U.S.

Organism	No. Isolates	MIC <sub>90</sub> † (µg/mL)	MIC range (µg/mL)
Mannheimia haemolytica*	642	2.0	0.5 to 64.0
Pasteurella multocida*	221	1.0	0.25 to 64.0
Histophilus somni (Haemophilus somnus)*	36	4.0	1.0 to 4.0
Mycoplasma bovis**	35	1.0	≤0.063 to 2.0

<sup>†</sup>The minimum inhibitory concentration for 90% of the isolates

\*Clinical isolates supported by clinical data and indications for use. \*\*The correlation between *in vitro* susceptibility data and clinical response has not been confirmed

# Swine

In vitro activity of tulathromycin has been demonstrated against Actinoba-cillus pleuropneumoniae, Pasteurella multocida, Bordetella bronchiseptica, and Haemophilus parasuis, commonly isolated pathogens associated with SBD

All minimum inhibitory concentration (MIC) values were determined using The 9.1 isomethics of the second seco

Table 4. Tulathromycin MIC values from field studies evaluating SRD in the U.S. and Canada

Organism	No. Isolates	MIC <sub>90</sub> * (µg/mL)	MIC range (µg/mL)
Actinobacillus pleuropneumoniae	135	32.0	16.0 to 32.0
Haemophilus parasuis	31	2.0	0.25 to >64.0
Pasteurella multocida	55	2.0	0.5 to >64.0
Bordetella bronchiseptica	42	8.0	2.0 to 8.0

\*The minimum inhibitory concentration for 90% of the isolates.

# EFFECTIVENESS Cattle

In a multi-location field study, 314 calves with naturally occurring BRD were In a multi-location held study, 314 calves with naturally occurring EnD were treated with DRAXIN. Responses to treatment were compared to saline-treated controls. A cure was defined as a calf with normal attitude/activity, normal respiration, and a rectal temperature of ≤104<sup>+</sup>F on Day 14. The cure rate was significantly higher (P<sub>2</sub>O.05) in DRAXXIN-treated calves (24%). There were two BRD-related deaths in the DRAXXIN-treated calves compared to nine BRD-related deaths in the salina-treated calves. saline-treated calves.

In another multi-location field study with 399 calves at high risk of developing BRD, administration of DRAXXIN resulted in a significantly reduced incidence of BRD (11%) compared to saline-treated calves (59%). Effectiveness evaluation was based on scored clinical signs of normal attitude/activity, normal respiration, and a rectal temperature of ≤104°F on Day 14. There were no BRD-related deaths in the DRAXXIN-treated calves compared to two BRDrelated deaths in the saline-treated calves.

#### Swine

Swine In a multi-location field study, 266 pigs with naturally occurring SRD were treated with DRAXXIN. Responses to treatment were compared to saline-treated controls. Success was defined as a pig with a normal attitude, normal respiration, and a rectal temperature of <104°F on Day 7. The treatment success rate was significantly greater ( $P_{s}$ 0.05) in DRAXXIN-treated pigs (70.5%) compared to saline-treated pigs (46.1%).

# ANIMAL SAFETY Cattle

Cattle Safety studies were conducted in feeder calves receiving a single subcu-taneous dose of 25 mg/kg BW, or 3 weekly treatments of 2.5, 7.5 or 12.5 mg/kg BW. In all groups, transient indications of pain after injection were seen, including head shaking and pawing at the ground. Injection site and corresponding histopathologic changes were seen in animatis in all dosage groups. These lesions showed signs of resolving over time. No other drug-related lesions were observed macrosconically or microsconically. related lesions were observed macroscopically or microscopically.

An exploratory study was conducted in feeder calves receiving a single subcutaneous dose of 10, 12.5 or 15 mg/kg BW. Macroscopically, no lesions were observed. Microscopically, minimal to mild myocardial degeneration was seen in one of six calves administered 12.5 mg/kg BW once and two of six calves administered 15 mg/kg BW once.

A safety study was conducted in calves 13 to 27 days of age receiving 2.5 mg/kg BW or 7.5 mg/kg BW once subcutaneously. With the exception of minimal to mild injection site reactions, no drug-related clinical signs or other lesions were observed macroscopically or microscopically

# Swine

Safety studies were conducted in pigs receiving a single intramuscular dose Safety studies were conducted in pigs receiving a single intramuscular dose of 25 mg/kg BW, or 3 weekly intramuscular doses of 2.5, 7.5 or 12.5 mg/kg BW. In all groups, transient indications of pain after injection were seen, including restlessness and excessive vocalization. Tremors occurred briefly in one animal receiving 7.5 mg/kg BW. Discoloration and edema of injection site tissues and corresponding histopathologic changes were seen in animals at all dosages and resolved over time. No other drug-related lesions were observed represented the presented represented to the set of the se were observed macroscopically or microscopically.

STORAGE CONDITIONS

# Store at or below 25°C (77°F)

### HOW SUPPLIED

DRAXXIN Injectable Solution is available in the following package sizes: 100 mL vial 250 mL vial

500 mL vial

- Carbon C. Pharmacodynamics of macrolides, azalides, and streptogramins: effect on extracellular pathogens. *Clin Infect Dis* 1998;27:28-32.
  Nightingale CJ. Pharmacokinetics and pharmacodynamics of newer macro-tional content of the pharmacokinetics and pharmacodynamics of newer macro-tics. *Clin Content Co*
- lides. Pediatr Infect Dis J 1997:16:438-443.
- Clearance and volume estimates are based on intersubject comparisons of 2.5 mg/kg BW administered by either subcutaneous or intravenous injection.

U.S. Patents: See US 6,329,345; US 6,420,536; US 6,514,945; US 6,583,274; US 6,777,393

NADA 141-244, Approved by FDA



To report a suspected adverse reaction call 1-800-366-5288. prequest a material safety data sheet call **1-800-733-5500**. or additional DRAXXIN product information call: For additional DRAXXIN product Information ca 1-888-DRAXXIN or go to www.DRAXXIN.com



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