

Title: Co-administration of phenylbutazone with methocarbamol decreases methocarbamol clearance

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Methocarbamol is a centrally acting skeletal muscle relaxant that is commonly co-administered to horses with the non-steroidal anti-inflammatory, phenylbutazone. Both drugs must be below designated threshold concentrations in post-race blood samples collected from horses competing in the pari-mutuel racing industry. Veterinarians prescribing methocarbamol reported that withdrawal times based on published studies of the intravenous administration of methocarbamol were inadequate. The presence of a drug-drug interaction with phenylbutazone was hypothesized to explain the discrepancy. To test this hypothesis, nine horses were administered two protocols using a randomized cross-over design. Protocol 1 consisted of the administration of 2.2 mg/kg methocarbamol as a single intravenous bolus. Protocol 2 consisted of the administration of 2.2 mg/kg oral phenylbutazone for 5 days followed by the co-administration of 2.2 mg/kg methocarbamol and phenylbutazone (2.2 mg/kg) on day 6 as single intravenous boluses delivered 30 minutes apart. Methocarbamol and phenylbutazone plasma concentrations were measured using validated LC-MS-MS methods. The decline in methocarbamol plasma concentration following either protocol fit a three compartment mathematical model best. Clearance of methocarbamol was significantly decreased when phenylbutazone was co-administered with methocarbamol (408.5 \pm 85.7 mL/h/kg versus 301.2 \pm 65.3 mL/h/kg). A longer withdrawal time is needed when methocarbamol is co-administered with phenylbutazone.

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