

# Toronto Humane Society Megestrol Acetate (MA) Pilot Program

Administration of MA microdose to community cats (1mg/cat/week)



Prepared March 2022 by Toronto Humane Society for ACC&D  
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## Set-up

- Program dates: 02/02/21 - 08/16/21
- Stakeholder engagement:
  - Toronto Feral Cat Coalition
  - College of Veterinarians of Ontario (regulatory body)
  - THS management, Board, staff
  - Community cat caregiver survey through TFCC
- Detailed information about possible risks in the survey, no attempt to convince
- Developed protocols, consent, monitoring systems

# Recruitment through e-mail linked to electronic survey

Number responded 93

Interest  
44 (47%) – yes  
12 (13%) – maybe

Excluded 22/56, leaving 34



- Exclusion reasons**
- Outside Toronto: 6
  - Duplicate submissions: 2
  - Colony TNRd: 5
  - Low stated commitment: 6
  - No count: 1
  - Assisting multiple colonies: 2

## Recruited 6 small groups

- Goal: Small number of dedicated caregivers for a pilot program
- Higher participation would have been likely if: More active recruitment, less deliberate focus on possible side effects, less monitoring required

Unable to contact

14/34

Declined

14/34

### Reasons for declining

Too busy/unable to monitor 6  
TNR appointment completed/booked 5  
Anxious about risks 1  
Males only 1  
No longer interested 1

# Prescribing MA

- Microdose (1mg/cat/week)
  - Cost: CA\$0.13/cat/week
- At beginning of pandemic, regulator relaxed requirement of an in-person “herd” visit
- Established VCPR through:
  - Individual photos of cats
  - Photos of site
  - DVM telemedicine consult

**Coronavirus:**  
**URGENT NOTICE**  
from the College of Veterinarians of Ontario  
March 18, 2020

**College Temporarily Relaxes Certain Regulations on Prescribing and Dispensing During Public Health Emergency**

As the need for physical distancing and other public health measures to curb the spread of COVID-19 exists, the challenges relating to regulations prohibiting prescribing via telemedicine alone have become clear. As a result, the College has made a decision to temporarily relax certain regulations relating to prescribing via telemedicine during the current public health emergency.

**Prescribing and Dispensing Drugs Via Telemedicine Alone**  
The ability to prescribe drugs to an animal in Ontario is, and continues to be, restricted to licensed veterinarians in Ontario.

Under the College's existing rules and regulations, a veterinarian-client-patient relationship (VCPR) may be established via telemedicine alone.

Currently, College regulations and policy state that a licensed veterinarian may not prescribe drugs when practising via telemedicine alone, as they would not have recent and sufficient knowledge of the animal obtained by a physical examination.

The College has made the decision to not strictly enforce certain provisions of our regulation (section 33. (1) (b) of Regulation 1093) during the current public health emergency. Veterinarians may now, until otherwise directed, prescribe a non-controlled drug using telemedicine alone, in cases where they have not conducted an in-person examination of the animal(s), and where they deem this necessary and prudent in their professional judgment. In such a case, the assessment on the animal(s) would be conducted virtually where a veterinarian can gather sufficient information on the animal(s) via telemedicine to reach at least a general or preliminary diagnosis, and continue to maintain medical records.

Possible scenarios currently are:

- As is the case currently, a licensed veterinarian within an existing VCPR may prescribe drugs for a patient with a known condition via telemedicine alone where they have recent and sufficient knowledge.

# Data collection

- Weekly follow-up calls:
  - List of questions about clinical issues, asked if any other concerns
  - Clinical issues
    - Lethargy
    - Teat enlargement
    - Pregnancy
    - Heat/mating behavior
    - Appetite
    - Hair coat
- DVM exam at TNR
- Stored uterus and ovaries for possible future analysis





# Results

- Six small groups - 11 female cats
- Pregnancies— 4 cats in 2 groups
  - 3 pre-MA, 1 during MA
  - 1 stillbirth - 3 kittens; not TNRd yet
  - 2 cats gave birth, normal kittens; 1 not TNRd yet; 1 normal at TNR
  - 1 pregnant at TNR – normal at TNR
- Non-pregnant spays - 5
  - Normal at TNR
- Remaining 4 not yet TNRd - 1 caregiver unwilling during COVID; 1 unable to trap remaining cats



# Assessment

- November start (as initially planned) would have been preferable – late start contributed to pregnancies.
- Program administration was easy
- Check-ins were time-consuming - only needed for the pilot
- Minor caregiver challenges
  - Initial problems drawing up the small dose (1)
  - Some preferred dry food but still ate the wet
  - Minor monitoring issues when cats did not arrive at expected times





# Conclusions

- Pilot too small for definitive conclusions, but increased our confidence in MA and decreased our safety concerns
- Measured dosing was feasible for caregivers
- MA is a useful adjunct to TNR
- A larger program is feasible
- Further roll-out dependent on demand and TNR availability vs. need



# Resources

Visit [acc-d.org/products/megestrol-acetate](http://acc-d.org/products/megestrol-acetate) for:

- Materials used in this pilot (protocol, spay data collection form, weekly caregiver interview tracking spreadsheet, and information packet for caregivers)
- Additional downloadable forms prepared by ACC&D and others
- More info about low-dose MA for use in female cats

Contact [info@acc-d.org](mailto:info@acc-d.org) , [ljacobson@torontohumanesociety.com](mailto:ljacobson@torontohumanesociety.com)