Prescription Only

OrexiGuard

Cyproheptadine Appetite Stimulant Syrup

Class: Serotonin Antagonist / Orexigenic **Protocol:** Phase 3 (Rebuild) **Species:** Canine & Feline

1. DESCRIPTION

OrexiGuard is a targeted pharmacological appetite stimulant based on Cyproheptadine Hydrochloride. Voluntary food intake is the cornerstone of nutritional recovery. Following illness, surgery, or prolonged GI disturbance, many patients remain inappetent even after clinical stabilisation. OrexiGuard supports the resumption of voluntary eating, enabling essential nutritional rehabilitation to begin.

2. QUALITATIVE & QUANTITATIVE COMPOSITION

Format: Palatable Oral Syrup | **Pack Size:** 200 ml Bottle

Active Ingredient	Pharmacological Class
Cyproheptadine Hydrochloride	Serotonin (5-HT) antagonist / H_1 antihistamine / Orexigenic agent

**Excipients and exact quantitative assays available upon specific veterinary request.*

3. CLINICAL PHARMACOLOGY & MECHANISM OF ACTION

- **Serotonin (5-HT) Antagonism:** Cyproheptadine competitively blocks serotonin receptors — particularly 5-HT_2 receptors in the hypothalamus. Serotonin normally suppresses appetite; blocking these receptors reduces this inhibitory signal, increasing the drive to eat in anorexic patients.
- **H_1 Antihistamine Activity:** As a first-generation antihistamine, cyproheptadine also blocks histamine H_1 receptors. This contributes to mild sedation and reduced nausea perception, further supporting feeding behaviour in stressed patients.
- **Onset & Duration:** Appetite-stimulating effects are typically observed within 1–2 hours of administration in responsive patients. The duration of effect is approximately 4–8 hours per dose, supporting structured meal-time administration protocols.

4. CLINICAL INDICATIONS

OrexiGuard is indicated for appetite stimulation and nutritional recovery support in the following presentations:

- **Post-gastroenteritis anorexia:** When GI stability has been achieved but voluntary feeding has not resumed.
- **Post-parvovirus recovery:** Nutritional rehabilitation following inpatient management.
- **Post-surgical inappetence:** Supporting early voluntary feeding after major surgery.
- **Chronic systemic illness:** Appetite support in patients with cancer or renal disease.
- **Stress-related anorexia:** Hospitalisation or environmental change-induced appetite suppression.
- **Feline hepatic lipidosis risk:** Early appetite intervention to prevent anorexia-induced fat mobilisation in cats.

5. CONTRAINDICATIONS & WARNINGS

Do Not Use In:

- **Glaucoma:** Anticholinergic properties may increase intraocular pressure.
- **Urinary retention:** Anticholinergic activity may worsen urinary outflow obstruction.
- **Significant cardiac disease:** Use with caution; cardiovascular monitoring recommended.
- **Concurrent MAOI therapy:** Risk of serotonin-related interactions.

Monitor during use for sedation (particularly in cats), anticholinergic effects (dry mouth, reduced GI motility), and paradoxical excitability. Taper gradually when discontinuing after prolonged use.

6. DOSAGE & ADMINISTRATION

Route of Administration: Oral Syrup. Administer directly or mix with a small amount of palatable food.

Administration Guidelines:

- Administer approximately 30–60 minutes before the intended meal time to maximise orexigenic effect.
- Dosage is determined by the veterinarian based on species, body weight and clinical presentation. *See product packaging for exact dosing ratios.*
- Taper when voluntary food intake is consistently adequate for ≥ 3 consecutive days.

7. PROTOCOL INTEGRATION (ALCOVET GI LADDER)

OrexiGuard represents **Phase 3 (Rebuild)** in AlcoVet's GI Therapy Ladder. It should be introduced only after vomiting, diarrhoea, and dehydration have been corrected (Phases 1 and 2). It is fully compatible with concurrent use of **Alcozyme** and **Alcolyte Pro** under veterinary guidance.

8. SELECTED CLINICAL REFERENCES

- Papich MG. *Saunders Handbook of Veterinary Drugs: Small and Large Animal.* 4th ed. St. Louis: Elsevier; 2016. Cyproheptadine entry, pp. 201–203.
- Quimby JM, Lunn KF. Mirtazapine as an appetite stimulant and anti-emetic in cats with chronic kidney disease. *Vet J.* 2013;197(3):651–655.
- Delaney SJ, Fascetti AJ, Elliott DA. Critical care nutrition of dogs. *Clin Tech Small Anim Pract.* 2006;21(3):121–127.
- Chan DL. The inappetent hospitalised cat: clinical approach to maximising nutritional support. *J Feline Med Surg.* 2009;11(11):925–933.