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COMMISSION IMPLEMENTING REGULATION (EU) 2026/1810

of 24 July 2026

amending Implementing Regulation (EU) 2025/901 as regards the addition of the substances ketoconazole, midazolam and sevoflurane, and Regulation (EC) No 1950/2006 as regards the deletion of the substances digoxin, dorzolamide, griseofulvin, imipramine, ketoconazole, phenytoin and ticarcillin

(Text with EEA relevance)

THE EUROPEAN COMMISSION,

Having regard to the Treaty on the Functioning of the European Union,

Having regard to Regulation (EU) 2019/6 of the European Parliament and of the Council of 11 December 2018 on veterinary medicinal products and repealing Directive 2001/82/EC ([1]), and in particular Article 115(5) thereof,

Whereas:

(1) Commission Implementing Regulation (EU) 2025/901 ([2]) establishes a list of substances which are essential for the treatment of equine species, or which bring added clinical benefit compared to other treatment options available for equine species and for which the withdrawal period for equine species is to be six months.

(2) Under Implementing Regulation (EU) 2025/901, a substance only qualifies as an 'essential substance' where no satisfactory alternative for the treatment or diagnosis of an indication is available and where the condition would, if untreated, create unnecessary suffering for the animal. A substance only qualifies as 'bringing added clinical benefit' where it provides a clinically relevant advantage based on improved efficacy or safety or a major contribution to treatment or diagnosis. This may be the result, inter alia, of different modes of action, different pharmacokinetic or pharmacodynamic profiles, different lengths of treatment or different routes of administration.

(3) Since the adoption of Implementing Regulation (EU) 2025/901, new information has emerged indicating that griseofulvin, ketoconazole, midazolam, rifampicin and sevoflurane may meet the criteria for essential substances or bring added clinical benefit compared to other treatment options available for equine species when used for specific indications.

(4) The Commission requested ([3]) the European Medicines Agency ('the Agency') to examine that information and to provide guidance in accordance with Article 141(1), point (f), of Regulation (EU) 2019/6. In its resulting guidance ([4]), the Agency concluded that the substances griseofulvin, ketoconazole, midazolam and sevoflurane can be considered essential or to bring added clinical benefit compared to other treatment options available for equine species when used for the indications proposed.

(5) As part of the Commission's request, the Agency also assessed whether a withdrawal period of six months would be sufficient in respect of the equine animals treated with the substances found to be essential or to bring added clinical benefit for the proposed indications. The Agency could not exclude risks associated with griseofulvin and

([1]) OJ L 4, 7.1.2019, p. 43, ELI: http://data.europa.eu/eli/reg/2019/6/oj.
([2]) Commission Implementing Regulation (EU) 2025/901 of 19 May 2025 establishing a list of substances which are essential for the treatment of equine species, or which bring added clinical benefit compared to other treatment options available for equine species and for which the withdrawal period for equine species shall be six months and repealing Regulation (EC) No 1950/2006 (OJ L, 2025/901, 20.5.2025, ELI: http://data.europa.eu/eli/reg_impl/2025/901/oj).
([3]) Ares(2025)10199539; https://link.europa.eu/p4F9hp.
([4]) Guidance under Article 141(1)(f) of Regulation (EU) 2019/6 on veterinary medicinal products with regards five substances not included in Commission Implementing Regulation (EU) 2025/901 (EMA/CVMP/382370/2025, 16 April 2026).

ketoconazole when used for all or for some of the indications proposed for each of those substances, even if a withdrawal period of six months is observed. The Agency's scientific advice ([5]), which informed Implementing Regulation (EU) 2025/901, reached similar conclusions in respect of digoxin, dorzolamide, imipramine and phenytoin.

(6) Commission Regulation (EC) No 1950/2006 ([6]) continues to apply until 21 May 2027. To maintain a high level of consumer safety, it is appropriate to discontinue the use of those substances in accordance with Regulation (EC) No 1950/2006.

(7) Commission Implementing Regulation (EU) 2022/1255 ([7]) reserved the class of carboxypenicillins for the treatment of certain infections in humans. The use of the substance ticarcillin in animals is therefore not allowed in the Union. Since Regulation (EC) No 1950/2006 applies until 21 May 2027 and to ensure legal certainty for the competent authorities, veterinarians, animal keepers and economic operators concerned, it is appropriate to remove that substance from the list in the Annex to Regulation (EC) No 1950/2006.

(8) Implementing Regulation (EU) 2025/901 and Regulation (EC) No 1950/2006 should therefore be amended accordingly.

(9) To avoid consumer safety risks, to increase the availability of medicinal products to food-producing animals of the equine species and to avoid unacceptable suffering of those animals, this Regulation should enter into force on the day following that of its publication in the *Official Journal of the European Union*.

(10) The measures provided for in this Regulation are in accordance with the opinion of the Standing Committee on Veterinary Medicinal Products,

HAS ADOPTED THIS REGULATION:

Article 1

Amendment to Implementing Regulation (EU) 2025/901

The Annex to Implementing Regulation (EU) 2025/901 is replaced by the text in the Annex to this Regulation.

Article 2

Amendment to Regulation (EC) No 1950/2006

The entries for the substances digoxin, dorzolamide, griseofulvin, imipramine, ketoconazole, phenytoin and ticarcillin in the Annex to Regulation (EC) No 1950/2006 shall be deleted.

([5]) Scientific advice under Article 115(5) of Regulation (EU) 2019/6 for the establishment of a list of substances which are essential for the treatment of equine species, or which bring added clinical benefit compared to other treatment options available for equine species and for which the withdrawal period for equine species shall be six months (EMA/CVMP/159047/2023, 18 July 2024).

([6]) Commission Regulation (EC) No 1950/2006 of 13 December 2006 establishing, in accordance with Directive 2001/82/EC of the European Parliament and of the Council on the Community code relating to veterinary medicinal products, a list of substances essential for the treatment of equidae and of substances bringing added clinical benefit (OJ L 367, 22.12.2006, p. 33, ELI: http://data.europa.eu/eli/reg/2006/1950/oj).

([7]) Commission Implementing Regulation (EU) 2022/1255 of 19 July 2022 designating antimicrobials or groups of antimicrobials reserved for treatment of certain infections in humans, in accordance with Regulation (EU) 2019/6 of the European Parliament and of the Council (OJ L 191, 20.7.2022, p. 58, ELI: http://data.europa.eu/eli/reg_impl/2022/1255/oj).

Article 3

Entry into force

This Regulation shall enter into force on the day following that of its publication in the *Official Journal of the European Union*.

This Regulation shall be binding in its entirety and directly applicable in all Member States.

Done at Brussels, 24 July 2026.

For the Commission
The President
Ursula VON DER LEYEN

ANNEX

Groups of substances

I. **Anaesthetics**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Oxybuprocaine[a]	Local topical anaesthesia for use in eyes	None identified	Wide clinical experience
Prilocaine[b]	Local topical anaesthesia prior to intravenous injection or catheterisation	Lidocaine	In specific preparations (eutectic mixture of local anaesthetics), for topical application to skin; can be used to facilitate intravenous injection or catheterisation
Sevoflurane[b]	Mask induction of anaesthesia in foals	Isoflurane	Better suited for mask induction as less pungent than the alternative

([1]) Active substances identified with an 'a' are essential substances. Substances identified with a 'b' are substances which bring added clinical benefit.

II. **Analgesics**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Bromfenac[b]	Treatment of uveitis and ocular inflammation	Systemic nonsteroidal anti-inflammatory drugs (NSAIDs) (e.g. flunixin); topical (ocular) ketorolac	Topical NSAIDs may result in less patient discomfort, reduced postoperative inflammation, prevention of miosis, and improvements in visual acuity in the early postoperative period
Fentanyl[b]	Multimodal approach for moderate to severe acute painful conditions	Butorphanol, morphine	Produces better analgesia than certain other opioids and can be used for very painful conditions; recognised value for use in multi-modal approaches
Ketorolac[b]	Treatment of eye pain and inflammation	Systemic NSAID therapy (e.g. flunixin)	Formulated for local application
Methocarbamol[b]	As part of treatment protocols in severe painful muscle spasms or severe muscle inflammation conditions	Systemic NSAIDs (e.g. flunixin)	Potent skeletal muscle relaxation; specific action on the internuncial neurons of the spinal cord to reduce acute skeletal muscle spasms without a concomitant alteration in muscle tone
Morphine[b]	Analgesia	Butorphanol, fentanyl	More potent than other analgesics
Triamcinolone acetonide[b]	Treatment of joint inflammation	Methylprednisolone	Less harmful effects on cartilage metabolism

III. **Antimicrobials**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
I. Antibiotics			
Amikacin[b]	Treatment of septicemia in horses and foals	Gentamicin, ceftiofur	Better safety profile in the target animal
Azithromycin[b]	Treatment of *Rhodococcus equi* infections susceptible to azithromycin	Clarithromycin, erythromycin, gamithromycin, tulathromycin, doxycycline	Added clinical benefit in cases of *Rhodococcus equi* infections in foals that can be resolved as monotherapy or in combination with doxycycline
Clarithromycin[b]	Treatment of *Rhodococcus equi* infections susceptible to clarithromycin	Azithromycin, erythromycin, gamithromycin, tulathromycin, doxycycline	More active against *Rhodococcus equi* in vitro than erythromycin or azithromycin; achieves greater concentrations in pulmonary epithelial lining fluid and alveolar macrophages than either erythromycin or azithromycin, though the half-life is shorter
Fusidic acid[b]	Topical treatment of eye infections caused by gram-positive bacteria susceptible to fusidic acid	Ofloxacin, moxifloxacin	Broad spectrum for treatment of gram-positive infections; primary choice in superficial, uncomplicated corneal ulcers and acute conjunctivitis in horses
Moxifloxacin[b]	Topical treatment of external eye infections caused by gram-positive cocci, gram-negative, atypical and anaerobic bacteria, such as *Pseudomonas aeruginosa,* susceptible to moxifloxacin	Ofloxacin	Advantageous pharmacokinetic profile; spectrum of activity includes gram-positive cocci and anaerobic bacteria that may be resistant to other quinolones
Ofloxacin[b]	Treatment of external eye infections caused by gram-positive and gram-negative micro-organisms susceptible to ofloxacin	Moxifloxacin	Clinical experience; penetrates the entire cornea up to the anterior chamber of the eye
Polymyxin B[b]	Treatment of bacterial keratitis, topical use	Ofloxacin, moxifloxacin	Effective alternative to systemic treatments; different mechanism of action to other topical alternatives

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
II. Antifungals			
Amphotericin B[a]	Treatment of fungal pneumonia, systemic use	None identified	Treatment of choice
Ketoconazole[b]	Adjunctive therapy in the treatment of guttural pouch mycosis, topical use	Enilconazole	Less irritant compared to the alternative; formulated for local application
Miconazole[b]	Treatment of fungal infection of the eye	Natamycin, nystatin, voriconazole	Broad spectrum of activity; less irritant compared to other topical antifungals
Nystatin[b]	Treatment of fungal and yeast infections of the eye and genital tract	Miconazole	Treatment of choice for yeast infections
Voriconazole[b]	Treatment of fungal keratitis, topical use	Miconazole	Broad spectrum of activity
III. Antivirals			
Aciclovir[b]	Treatment of cases of equine herpes virus infection associated with complications, topical use only	Ganciclovir	Treatment of choice for ocular ulcers when the implication of a viral pathogen is suspected
Ganciclovir[b]	Treatment of cases of equine herpes virus infection associated with complications, topical use	Aciclovir, valaciclovir	Wealth of evidence for the treatment of different virus-types causing herpetic infections
Valaciclovir[b]	Treatment of cases of equine herpes virus infections, oral use	Aciclovir	Better pharmacokinetic profile and a different route of administration

IV. **Substances for respiratory disorders**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Ambroxol[b]	Stimulation of surfactant in premature foals	Steroids, bromhexine, dembrexine, surfactant transfer from healthy donor	Preferred clinical choice for premature foals

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Fluticasone[b]	Control of allergic pulmonary disease including mild to moderate cases of equine asthma and subtypes via inhalation	Beclomethasone	Inhalation leads to less adreno-cortical suppression, quicker rebound after therapy ends and fewer systemic side effects than systemic corticosteroid therapy because of its limited systemic absorption; especially indicated for control of mild-moderate and refractory severe asthma as well as long-term maintenance therapy
Ipratropium bromide[b]	As a bronchodilator in horses with mild-moderate asthma	Clenbuterol	Anticholinergic action, as an alternative to beta-agonists
Oxymetazoline[b]	Treatment of nasal oedema	Phenylephrine	Alpha-adrenoceptor agonist with strong vasoconstrictive properties and longer acting effect
Phenylephrine[b]	Treatment of nasal oedema	Oxymetazoline	Reduces the need for insertion of nasal tubes during recovery

V. **Substances for cardiology**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Amiodarone[b]	Systemic and oral treatment of atrial fibrillation, supraventricular and ventricular tachycardias	Quinidine sulphate/ gluconate, sotalol, verapamil	Different mode of action: class III anti-dysrhythmic
Propafenone[b]	Treatment of ventricular tachycardia and ventricular tachyarrhythmia	Quinidine sulphate/ gluconate	Different mode of action: sodium channel antagonist that decreases heart excitability
Quinapril[a]	Treatment of heart failure; cardiovascular protection in horses with atrial fibrillation (AF) or mitral regurgitation (MR)	None identified	Different mode of action: angiotensin-converting-enzyme (ACE) inhibitor
Quinidine sulphate/ gluconate[b]	Treatment of cardiac arrhythmias	Amiodarone, sotalol, verapamil	Treatment of choice for atrial fibrillation

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Sotalol[b]	Long-term treatment of cardiac arrhythmias	Amiodarone, quinidine sulphate/gluconate	More suitable in horses requiring long-term anti-arrhythmic therapy; less adverse events than amiodarone
Verapamil[b]	Treatment of supraventricular arrhythmias	Amiodarone, quinidine sulphate/gluconate, sotalol	Different mode of action: calcium channel blocker

VI. **Substances for diagnostic procedures**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Barium sulfate[a]	Enhanced gastrointestinal tract visualisation during radiographic examinations	None identified	No satisfactory alternative treatment for enhanced gastrointestinal tract visualisation during radiographic examinations
Fluorescein[b]	Diagnosing corneal keratitis or ulceration, topical use	Rose bengal	Diagnostic tool of choice when a viral culture is needed afterwards
Iohexol[a]	Contrast agent for lower urinary tract radiography, arthrography, myelography, sino- or fistulography and dacryocystography	None identified	Non-ionic, water-soluble contrast agent
Phenylephrine[a]	Diagnosing grass sickness	None identified	Ancillary diagnostic approach to equine grass sickness polyneuropathy
Rose bengal[b]	Diagnosing corneal keratitis or ulceration, topical use	Fluorescein	Diagnostic tool of choice for diagnosing eye keratitis/ulcers
Thyrotropin releasing hormone[a]	Diagnosing pituitary pars intermedia dysfunction	None identified	No satisfactory alternatives for diagnosing pituitary pars intermedia dysfunction

VII. **Substances for gastrointestinal disorders**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Metoclopramide[b]	Treatment of post-operative ileus	Intravenous fluid substitution, painkillers (e.g. flunixin), lidocaine	Prokinetic drug
Misoprostol[b]	Treatment of gastric glandular disease and colitis	Omeprazole, sucralfate	Superior to omeprazole for the treatment of equine gastric glandular disease
Phenylephrine[a]	Treatment of nephrosplenic entrapment	None identified	Clinical value in the resolution of nephrosplenic entrapment; causes a dose-dependent splenic contraction
Ranitidine[b]	Treatment of gastric ulcers in critically ill neonates, intravenous use	Omeprazole	The intravenous route of administration brings added clinical benefit over other oral antiulcer medications
Sucralfate[b]	Treatment and prevention of gastric ulcers in horses	Omeprazole	Different mode of action than omeprazole (mucosal adherent), which provides physical lesion stabilisation

VIII. **Substances for metabolic disorders**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Insulin[b]	As an aid in the treatment of hyperlipidaemia unresponsive to glucose therapy or severe hyperlipidaemia, used in combination with glucose and other therapies Diagnosing metabolic disorders (e.g. insulin resistance associated with equine metabolic syndrome or pituitary pars intermedia dysfunction)	Low-molecular weight heparin can be used for cases of hyperlipidaemia	Insulin is the preferred clinical choice

IX. **Substances for musculoskeletal disorders**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Atracurium[b]	Inducing muscle paralysis under general anaesthesia	Cisatracurium, guaifenesin	Brings added clinical benefit in horses under general anaesthesia in cases where increased muscle relaxation is necessary such as ophthalmic surgeries, certain orthopaedic repairs and when deep access to the abdominal cavity is needed.
Cisatracurium[b]	Inducing muscle paralysis under general anaesthesia	Atracurium, guaifenesin	Brings added clinical benefit in horses under general anaesthesia in cases where increased muscle relaxation is necessary such as ophthalmic surgeries, certain orthopaedic repairs and when deep access to the abdominal cavity is needed.
Dantrolene sodium[b]	Prevention of rhabdomyolysis Prevention of malignant hyperthermia during anaesthesia	NSAIDs, intravenous fluids, vitamin E/ selenium	Efficacious as preventative, inhibiting the release of calcium from the sarcoplasmic reticulum and thus causing dissociation of excitation-contraction coupling
Edrophonium[a]	Reversing the effects of atracurium muscle paralysis	None identified	Cholinesterase inhibitor, essential for reversal of neuromuscular blockade; least side effects of the cholinesterase inhibitors in horses
Guaifenesin[b]	Induction and maintenance of general anaesthesia in field conditions	Atracurium, cisatracurium	Particularly indicated in field (non-hospital) conditions where anaesthesia may be necessary; the reduced cardiopulmonary depressive effects facilitate safe anaesthesia without advanced monitoring equipment or mechanical ventilation

X. **Substances for nervous system disorders**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Diazepam[a]	Short-term anti-convulsant for treatment of seizures	None identified	Second-generation antiseizure
Midazolam[a]	Short-term anti-convulsant for treatment of seizures	None identified	Second-generation antiseizure

XI. **Substances for ophthalmology**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Acetazolamide[b]	Treatment of glaucoma, oral use	Phenylephrine	Its mechanism of action as carbonic anhydrase inhibitor
Cyclopentolate[b]	Mydriatic agent	Atropine, phenylephrine	Induces significant mydriasis without affecting tear production, intraocular pressure, digestive function (i.e. gut motility and faeces production), or heart rate
Cyclosporine A[b]	Treatment of autoimmune diseases of the eye	Topical steroids	Immunosuppressive effect by inhibiting T-lymphocyte proliferation and reducing cytokine gene expression
Phenylephrine[b]	Treatment of glaucoma and epiphora	Atropine and tropicamide	It does not (or only slightly) increase intra ocular pressure
Synephrine[b]	Treatment of the mucous membranes of the eye as a decongestant	Phenylephrine, tetryzoline	Fast local effect; enhances penetration of local therapy, providing synergistic effects with e.g. local antimicrobial therapy
Tetryzoline[b]	Treatment of the mucous membranes of the eye as a decongestant	Phenylephrine, synephrine	Fast local effect
Timolol maleate[b]	Treatment of glaucoma, topical use	Acetazolamide	Its specific mode of action as a non-selective beta-adrenergic receptor blocking agent, provides for an important therapeutic choice in the treatment of glaucoma
Triamcinolone acetonide[b]	Treatment of recurrent uveitis in cases that are refractory to other treatments	Atropine, tropicamide	Effective, low-morbidity treatment in cases that are refractory to other treatments
Tropicamide[b]	Treatment of recurrent uveitis	Atropine, cyclopentolate, triamcinolone acetonide	Rapid onset of action

XII. **Substances for sedation and premedication (and antagonism)**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Acepromazine[b]	For a multimodal approach for tranquilisation and premedication in combination with other sedatives	Detomidine, romifidine, xylazine, diazepam	The mode of action of acepromazine and its unique quality of sedation cannot be produced by alpha-2 agonist sedatives or benzodiazepines
Atipamezole[a]	Reversing the effects of alpha-2 agonists	None identified	Reverses sedative and analgesic effects and adverse cardiovascular reactions
Dexmedetomidine[b]	Sedation or general anaesthesia as part of partial or total intravenous anaesthesia protocols	Detomidine, romifidine, xylazine, diazepam	The most selective alpha-2 agonist; short half-life and rapid redistribution, which particularly favour its use as a continuous-rate infusion
Diazepam[b]	Premedication and induction of anaesthesia, mild tranquilisation with minimal cardiovascular and respiratory side effects	Acepromazine, detomidine, romifidine, xylazine	The mode of action (at gamma-aminobutyric acid (GABA) receptor) provides unique tranquilisation without cardiorespiratory depression that cannot be produced by alpha-2 agonist sedatives (detomidine, romifidine and xylazine) or acepromazine
Midazolam[b]	Premedication and induction of anaesthesia, mild tranquilisation with minimal cardiovascular and respiratory side effects	Acepromazine, detomidine, romifidine, xylazine	The mode of action (at GABA receptor) provides unique tranquilisation without cardiorespiratory depression that cannot be produced by alpha-2 agonist sedatives (detomidine, romifidine and xylazine) or acepromazine
Flumazenil[a]	Intravenous reversal agent for benzodiazepine effect during recovery from Total Intravenous Anaesthesia (TIVA) techniques	None identified	Antagonist that competitively inhibits the benzodiazepine binding site at the GABA receptor
Naloxone[a]	Reversal of opioid effects during emergencies	None identified	No alternatives available
Propofol[b]	Induction of anaesthesia in foals via intravenous administration	Isoflurane	Improvement in cardiovascular stability and quality of recovery over inhalation anaesthesia in foals

XIII. **Substances for systemic disorders**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Allopurinol[b]	Neonatal ischaemia reperfusion injury	Vitamin E	Different mode of action in inhibiting the formation of reactive oxygen species (ROS) than vitamin E
Dalteparin[b]	Anticoagulant	Heparin	Reduction in molecular size is associated with a loss of thrombin inhibitory activity, but conversely an increase in factor Xa (FXa) inhibition compared to unfractionated heparin
Dobutamine[b]	Management of hypotension under general anaesthesia	Ephedrine	First-line medication for the treatment of hypotension in adult equines under general anaesthesia
Dopamine[a]	As part of a treatment protocol for acute kidney injury/renal failure only	None identified	Low doses have been shown to cause renal vasodilation, increased renal blood flow, and increased urine production without systemic cardiovascular effects in conscious healthy horses
Ephedrine[b]	Treatment of hypotension under general anaesthesia	Dobutamine	Used to treat hypotension in adult equines under general anaesthesia where dobutamine is ineffective. Different mode of action to dobutamine with a more direct effect on cardiac contractility
Gelatinpolysuccinate[b]	Addressing long-term hypovolaemia resulting from conditions like e.g. low albumin	Crystalloids	Colloids are larger molecules compared to crystalloids, thus stay longer in the intravascular space, which is an advantage for correcting hypovolemia from e.g. hypoalbuminemia
Glycopyrrolate[b]	Treatment and prevention of bradycardia	Atropine	Minimal central effect; suitable in conscious horses, before and after anaesthesia
Noradrenaline / norepinephrine[b]	Treatment of early septic shock Supporting cardiovascular function in critically ill foals	Dobutamine, dopamine	In compromised (sick) foals it is generally the only catecholamine effective in treatment of hypotension

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Vasopressin[b]	Treatment of circulatory collapse in foals and adult horses	Epinephrine, dopamine, dobutamine	Alternative in cases where standard catecholamine therapies like dopamine, dobutamine, epinephrine are ineffective or require potentiation to restore vascular tone in refractory vasodilatory shock states

XIV. **Substances for tumours**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Imiquimod[a]	Treatment of sarcoids	None identified	Current research suggests that equine sarcoids likely result from a complex interaction including host immune system dysfunction

XV. **Miscellaneous**

Active substance ([1])	Indications	Identification of alternatives	Explanation of use / specific advantages
Cetirizine[b]	Treatment of conditions where an antihistamine is deemed necessary	Chlorphenamine	Second-generation histamine-1 (H1) receptor inverse agonists are alternatives with fewer central nervous system (CNS) (sedative) side effects
Domperidone[b]	Treatment of agalactia/ dysgalactia in mares	Sulpiride	Its ability to stimulate prolactin secretion in situations of dopaminergic inhibition
Sulpiride[b]	Treatment of agalactia/ dysgalactia in mares	Domperidone	Its ability to stimulate prolactin secretion in situations of dopaminergic inhibition