- OPIOIDS
  - o Bradycardia
  - o Bradypnea
  - Hypotension
  - o Hypothermia
  - CNS Depression in Dogs
  - Excitement in Cats and Large Animals.
  - Sweating in horses

Drug Name	Controlled?	Other	What is it used for?	Reversal
Preservative Free Morphine	C-II		Epidural Anesthesia and Analgesia	
(Duramorph <sup>®</sup> )				
Morphine	C-II	<ul> <li>Salivation, nausea, vomiting</li> </ul>	• Mu agonist (highest level of pain control).	<ul> <li>Naloxone</li> </ul>
Hydromorphone	C-II	<ul> <li>Panting, anxiety, excitement, dysphoria,</li> </ul>	<ul> <li>Analgesia and sedation</li> </ul>	<ul> <li>Butorphanol</li> </ul>
Oxymorphone	C-II	increased motor activity	Preanesthetic	
Meperidine	C-II	Sweating in horses		
Methadone	C-II	Better for thoracic surgery because less panting	-	
Fentanyl	C-II	<ul> <li>and dysphoria</li> <li>Less excitement, salivation, nausea and vomiting than other Mu agonists</li> <li>Fentanyl <ul> <li>Very short acting needs to be CRI</li> <li>Also patch form that lasts 3 days</li> <li>Don't cut or tear patches.</li> <li>Be sure patch does not get heated (Don't use in MRI)</li> </ul> </li> </ul>		
Buprenorphine	C-III		<ul> <li>Partial Mu agonist</li> <li>Less analgesia but longer duration than the</li> </ul>	Naloxone
Simbadol®	C-III	<ul> <li>Lasts 6 - 8 hours when given IM at the same dose as standard Buprenorphine.</li> <li>Last 24 hours when given SQ at a higher dose than standard Buprenorphine.</li> </ul>	<ul> <li>Class analgesia but longer duration than the Mu agonist opioids.</li> <li>Analgesia</li> <li>Preanesthetic</li> <li>Stronger affinity for the Mu (μ) receptor</li> </ul>	
Buprenorphine XR	C-III	<ul> <li>Only to be given SQ and will last for 72 hours.</li> </ul>	<ul> <li>bit onget animity for the find (μ) receptor than the pure Mu (μ) opioids.</li> <li>Has a ceiling effect, giving more doesn't give a greater effect once you reach a certain dose.</li> </ul>	
Butorphanol	C-IV	Not appropriate for surgical pain control	Mu antagonist	Partially reversed
(Torbugesic <sup>®</sup> )			Kappa Agonist	by Naloxone
Nalbuphine	No		<ul><li>Sedative</li><li>Antitussive (cough suppressant)</li></ul>	
			<ul> <li>Analgesia (minimal)</li> </ul>	

Opiate Like Medications			
Tramadol	C-IV	<ul> <li>Not labeled for veterinary use</li> <li>May take up to two weeks to take full effect especially with chronic pain</li> <li>Efficacy is questionable</li> </ul>	<ul> <li>Synthetic Mu receptor opiate-like agonist.</li> <li>Inhibits uptake of serotonin and norepinephrine.</li> </ul>

<ul> <li>CNS depression</li> </ul>	n			
<ul> <li>Respiratory de</li> </ul>	pression			
<ul> <li>Hypothermia</li> </ul>				
<ul> <li>Gabba agonist</li> </ul>				
○ PU/PD				
<ul> <li>Use in caution</li> </ul>	in patients w	ith liver disease		
Diazepam (Valium®)	C-IV	<ul> <li>Lipid Soluble – can't be given IM (IV only)</li> <li>More likely incompatible when mixed with other medications in the same syringe.</li> <li>Dysphoria and aggression in cats</li> <li>Muscle fasciculations in horses</li> </ul>	<ul> <li>Anticonvulsant</li> <li>Sedative</li> <li>Pre-anesthetic</li> <li>Anti-anxiety</li> <li>Appetite Stimulant in Cats</li> </ul>	• Flumazenil
Midazolam (Versed®)	C-IV	<ul> <li>Water Soluble – can be given IM or IV</li> <li>More likely incompatible when mixed with other medications in the same syringe.</li> </ul>		
Alprazolam (Xanax <sup>®</sup> )	C-IV		Sedative	
<mark>Zolazepam (found in Telazol®)</mark>	C-III		<ul> <li>Pre-anesthetic</li> <li>Anti-anxiety</li> </ul>	

## • CYCLOHEXAMINES / DISSOCIATIVES

- CNS depression
- Marked respiratory depression at higher doses
- Mild cardiac stimulation Use with caution with certain cardiac conditions?

Tiletamine (Found in Telazol <sup>®</sup> )	C-III		Dissociative	None
Ketamine	C-111	<ul> <li>Painful when giving IM</li> <li>Apneustic breathing – inspiration followed by a long pause and short expiration (animal will look like it is holding its breath.</li> <li>Eyes open, pupils central and dilated – eye position not a reliable indicator of anesthetic depth.</li> <li>Nystagmus – erratic eye movements</li> <li>Exaggerated reflexes, muscle rigidity tremors, spasticity, and seizures</li> <li>Increased salivation</li> </ul>	<ul> <li>Anesthetic</li> <li>Sedative</li> <li>Block NMDA receptors in the central nervous system at the level of the spinal cord.</li> <li>Prevents wind-up</li> </ul>	

Phenothiazines				
<ul> <li>Hypotension</li> </ul>				
<ul> <li>Respiratory c</li> </ul>	lepression			
o Bradycardia				
<ul> <li>CNS depressi</li> </ul>	on			
Acepromazine	No	• Reported to lower seizure threshold in the literature,	Pre-anesthetic	None
		but more recent studies indicate that this may not be	<ul> <li>tranquilizer</li> </ul>	
		true.	<ul> <li>Anti-anxiety</li> </ul>	
		<ul> <li>Paraphimosis in stallions</li> </ul>	Antiemetic	

## • ALPHA 2 AGONISTS

• Initially:

Vasoconstriction which causes

- Pale mucous membranes
- Hypertension
  - Bradycardia

• After the initial period of vasoconstriction vasodilation can occur before the heart rate speeds back up decreasing cardiac output resulting in hypotension

- Bind to alpha 2 receptors that typically release Norepinephrine
- Norepinephrine production has decreased
- Norepinephrine maintains alertness—absence produces sedation
- Dose-dependent sedation can be profound
- Some analgesia
- Vomiting (especially in cats)
- Hypothermia
- Arrythmias (2nd degree AV Block)

Dexmedetomidine (Dexdomitor®)	No	<ul> <li>Decreased response to stimuli – CAUTION: some animals will override the effects of alpha 2 agonists</li> <li>Agitation or aggression when touched</li> <li>Reactions to loud noises</li> </ul>	<ul><li>Anesthetic</li><li>Sedative</li><li>Emetic</li></ul>	<ul> <li>Atipamezole (Antisedan®)</li> </ul>
Xylazine	No	Emetic of choice in cats		Yohimbine

Barbiturates				
<ul> <li>CNS depressio</li> </ul>	n			
<ul> <li>Caution with li</li> </ul>	iver disease			
Phenobarbital	C-IV		Anticonvulsant	None
Pentobarbital	V-II		Anticonvulsant	None
			Euthanasia	
Thiopental	C-III	<ul> <li>No longer used in the US</li> </ul>	Induction Antiesthetic	None

		Other Induction Drugs		
Propofol	No	<ul> <li>Expires 6 – 24 hours after opening depending on brand</li> </ul>	Anesthetic	None
Propofol 28	No	<ul> <li>Expires 28 days after opening.</li> <li>Use with caution in cats due to preservative. (OK for single anesthetic even but not for multiple days in a row or a CRI).</li> </ul>		None
Etomidate	No	<ul> <li>Less hypotension than propofol so better for critical patients.</li> <li>Induction and recovery generally less smooth than propofol.</li> </ul>		• None
Alfaxalone (Alfaxan®)	C-IV	Can be administer IM (off label use)		None

LOCAL ANESTHETICS				
Lidocaine	No	<ul> <li>Also used to treat ventricular arrythmias</li> <li>Faster acting / shorter duration</li> </ul>	Local Anesthetic	None
Bupivacaine (Marcaine®)	No	<ul> <li>Slower acting / longer duration</li> </ul>		• None

## • ANTICHOLONERGICS

- Blocks the action of acetylcholine
- Tachycardia
- Decrease bronchial secretions
- **Mydriatic:** Dilates the pupil
- Blocks vagally mediated reflexes
- Atropine and Glycopyrrolate used to be used as a routine part of a preanesthetic but now we wait until a patient demonstrates a need or used if there is a high likelihood of vagal stimulation.

Atropine	No	<ul><li>Faster onset of action</li><li>Shorter duration</li></ul>	<ul> <li>Treats bradycardia</li> <li>Treats 2<sup>nd</sup> degree AV block.</li> </ul>	• None
Glycopyrrolate	No	<ul> <li>Slower onset of action</li> <li>Longer duration</li> </ul>	<ul> <li>Does not increase blood pressure but can be used to treat hypotension when hypotension is accompanied by bradycardia (blood pressure increase is secondary to increased heart rate)</li> <li>Use with caution (if at all) in patients that have received an alpha 2 agonist.</li> </ul>	• None •
Pralidoxime (2-PAM <sup>®</sup> )	No		<ul> <li>Treats Organophosphate Toxicity</li> </ul>	None

ADRENERGICS				
<ul> <li>Work by stin</li> </ul>	nulating the CN	S		
Epinephrine	No	Used to treat anaphylaxis	Vasoconstrictor: increases blood     pressure	None
Norepinephrine	No		<ul> <li>Increases cardiac output /</li> </ul>	None
Dobutamine	No		stimulates the heart to beat	None
Dopamine	No		Vasoconstrictor: increases blood	<ul> <li>None</li> </ul>
Vasopressin	No	<ul> <li>Antidiuretic hormone: used to treat diabetes insipidus.</li> </ul>	pressure	None
Phenylephrine	No			<ul> <li>None</li> </ul>

	REPIRATORY STIMULANTS				
Dopram (Doxapram®)	No	<ul> <li>Until recently used to be used to stimulate respirations during CPR or while resuscitating puppies and kittens after c-section. This is now contraindicated due to increased cerebral oxygen demands. (May still see this on the VTNE?).</li> <li>Mostly now used to stimulate respirations to evaluate airway for laryngeal paralysis.</li> </ul>	Respiratory stimulant	• None	

0	<b>teroidal Anti-inf</b> Inhibit prostag	-	• • •		
0	Inhibit cycloox	•			
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0	COX-1	lentia			
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		Help maintain gastric mucosa to protect the stomach.			
	•				
	•	•	ain renal perfusion by dilating blood vessels.		
	•	Helps in the	production of platelets.		
0	COX-2				
	Prosta	-	ictivated when tissue is damaged		
	•	Promotes in			
	•	Promotes p			
	•	Promotes fe	ever		
	•	Inhibit plate	lets		
	FEWEI	R SIDE EFFECT	S THAN COX-1		
Aspirin		No	<ul> <li>Analgesia, antipyretic, anti-inflammatory, decreased platelet aggregation, caution in cats</li> </ul>	<ul> <li>Non-selective COX inhibitor</li> <li>(Inhibits COX-1 and COX-2)</li> </ul>	None
Phenylbutazone "Bute"		No	<ul> <li>Primarily used in horses, high incidence of GI ulcers, highly protein bound – caution in animals with low albumin</li> </ul>		
Ketoprofen (Ketofen®)		No	Treatment of musculoskeletal pain for a maximum of 5 days		
Flunixin Meglumine (Banamine®)		No	• Used in cattle and horses for muscular or colic pain, inhibits cyclooxygenase, analgesic, anti-pyretic		None
Carprofen (Rimadyl <sup>®</sup> )		No	<ul> <li>Metabolized in the liver (prolonged use can lead to liver toxicities).</li> </ul>	<ul> <li>Selective COX-2 Inhibitors</li> <li>(Inhibits COX-2 more than COX-2)</li> </ul>	None
Meloxicam (Metacam®)		No	<ul> <li>Used for arthritis and other pain in dogs.</li> <li>Approved in cats as a one-time injection before surgery.</li> </ul>		None
Robenacoxib (Onsior®)		No	Approved for use in cats and dogs for a maximum of 3 days	<ul> <li>Highly Selective COX-2 Inhibitors</li> <li>(Inhibits COX-2 / minimal COX-1)</li> </ul>	None
irocoxib	(Equioxx <sup>®</sup> )	No	• Equine formulation for osteoarthritis for a maximum of 14 days		None
	(Previcox®)	No	• Used daily to treat osteoarthritis or a maximum of 7		None

days for post-op analgesia