

“Pearls”
of
Veterinary Medicine



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AT A GLANCE

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Emetics

Emetics generally empty 40%-60% of the stomach contents and are assumed to be more beneficial than gastric lavage. Emesis should not be attempted if the animal has already vomited or is exhibiting significant clinical signs. Potential complications from emesis induction may include aspiration, persistent gastritis, and transient bradycardia (due to vagal stimulation). Emesis is most productive if performed within 2-3 hours post-ingestion. Feeding the animal a small meal prior to inducing vomiting can increase chances of an adequate emesis. Three percent (3%) hydrogen peroxide is a **preferred emetic**, especially if emesis is to be induced at home by the owner. Peroxide is readily available (needs to be “fizzy,” not flat), easy to administer, and often highly effective, especially in dogs. The dosage is 1 teaspoon/5 lbs body weight, not to exceed 3 tablespoons. Vomiting usually occurs within 10-15 minutes and the dose can be repeated once if not initially successful. In the process of foaming (which triggers the vomiting) the peroxide is converted to water and oxygen, so if no vomiting occurs there is no concern about adverse effects from the retained peroxide. Overdosing with hydrogen peroxide should be avoided, as it may result in gastritis that may take days to resolve.

*Tina Wismer, DVM, MS, DABVT, DABT
Midwest Vet Conf, 02:22*

Treatment of extravasation

Even a couple of drops of Doxorubicin or Adriamycin can cause an exquisitely painful wound that takes many

months to heal—if it ever does. Many patients undergo amputation. So, it's critical to prevent this from happening. This author has learned that if you inject Dexrazoxane (Totect, Zinecard) by IV within a couple of hours of the extravasation, you can abrogate the extravasation reaction.

*Philip Bergman, DVM, PhD, MS, DACVIM
dvm360, 01:22*

Treating pain with the Assisi Loop

The Assisi® Loop (<https://assisianimalhealth.com/assisi-loop>), has truly revolutionized pain management in the author's patients. The loop uses Assisi's patented, targeted, pulsed electromagnetic field (tPEMF™) signal to deliver a micro-current (which is precisely tuned to trigger an animal's own natural anti-inflammatory process) to damaged tissue. The electromagnetic signal, which is one-one-thousandth the strength of a cell phone, stimulates cellular repair by upregulating the body's own production of endogenous nitric oxide (NO). The biological effect of that induced current is the functional therapeutic component of Assisi's tPEMF technology. Enhancing nitric oxide, the body's own anti-inflammatory molecule, has several biotherapeutic effects depending on the target tissue and the specific characteristics of the tPEMF waveform used. There are many therapeutic indications for use of the Assisi loop. Refer to the company's website to learn of all its indications. From the author's personal use, it has found great success in patients recovering from orthopedic and neurologic surgeries.

*Adam Christman, DVM, MBA
Fetch San Diego, 06:22*

Treating dysphoria

Excitement in recovery is normal. A BRIEF period of mild to moderate dysphoria right at extubation may be normal as the patient goes back through Stage II of anesthesia (the normal excitatory phase). But prolonged (>1-2 mins) or severe excitement is **not normal and should not be tolerated**. Is it pain or dysphoria? It doesn't matter – for the sake of the patient, the other patients within earshot and the owners/technicians/ veterinarians/staff that are in ear shot – TREAT IT!!! First address analgesia and consider an opioid, but if the opioid isn't effective – or if an opioid has recently been administered, use alpha-2 agonists. This 'rescue' from bad recovery is one this author's favorite uses of the alpha-2 drug class. These drugs are sedative/analgesics so it doesn't matter if the patient