

“Pearls”  
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Veterinary Medicine



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Volume 41 Number 3

June 2022

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## CBD for seizures

There has been one study performed at Colorado State University investigating the use of CBD in dogs with epilepsy, with promising results when using doses at 2.5 mg/kg, twice daily. This author has had very mixed results in practice with the use of CBD alone to treat seizures. If a patient has had seizures and the guardians do not elect to start anticonvulsants, the author starts with 1 mg/kg of CBD, twice daily. For some patients, this will control seizures completely or achieve an acceptable seizure interval. Doses up to 3 mg/kg, twice daily, have been used but more data is needed to understand a true therapeutic dose. It is important to educate clients about the many anticonvulsant options available and untreated seizures damaging to the brain. If at any time while trying CBD, the author's patient experiences cluster seizures, it is recommend starting, adding, or adjusting doses of traditional anticonvulsants. Owners who have their pets on several anticonvulsants may want to try CBD as a more natural approach. In these cases, the author advises these guardians to add CBD in addition to their pets' current anticonvulsant regimen. Many guardians are not aware of the risks when stopping anticonvulsants abruptly. If the CBD is proving effective, consider decreasing the seizure medication causing the most undesirable side effects.

Angie Krause, DVM, CVA, CCRT  
Vet Practice News, 09:21

## Sedation for euthanasia

Both the powdered and liquid formulations of pentobarbital and the liquid formulations of euthanasia solution containing pentobarbital and phenytoin are being used. Because of the bitter taste gel capsules should be used; unfortunately, the liquid formulations can cause these to melt or leak, so they should be prepared close to the time they are needed. When using the powdered formulation of pentobarbital, 1g per 11.5 kg (25 lbs.) has been suggested and the dog should be left undisturbed for 45-90 minutes for the drug to take effect. This dose is approximately 90 mg/kg, which is similar to recommended IV dose, therefore, if possible, aim to administer 2 to 3 times this amount to hasten onset of action and to enhance the depth of sedation or anesthesia. Regardless of which formulation is used, a “Capsule Machine” (e.g. The Capsule Machine, Capsule Connection LLC) is highly recommended for filling gel capsules. The gelatin capsules can be hidden in any favorite food such as meatballs, hamburger patties and hot dogs.

Sheilah A. Robertson, BVMS (Hons), PhD, DACVAA  
VMX, 06:21

## Dexmedetomidine dosing

There are currently 2 medications with a license for use in the treatment of canine fear of noises: imepitoin (Pexion: not distributed in the US) and oral-transmucosal (OTM) dexmedetomidine (Sileo). OTM dexmedetomidine is an  $\alpha$ -agonist. It is delivered as a gel to the gums and can be given up to 5 times a day, with applications separated by 90-120 minutes. Only 4% of the compound is absorbed into the systemic circulation. In a placebo-controlled, randomized, double-blind, multisite study of 182 dogs, dexmedetomidine was found to have a significant effect on behavioral signs, with an odds ratio of 3.4 ( $P < .0001$ ). Most (85%) dexmedetomidine-treated dogs experienced no effects of sedation in the functional assessment and only 7 (7.9%) dogs in the interventional group and 2 in the control group were sufficiently sedated that they were difficult to rouse. OTM dexmedetomidine can be given prophylactically or interventionally. Effects are seen within 20 minutes, with peak effects within an hour, making it the preferred choice for situational noise that is not expected or cannot be anticipated 2 days in advance. Additionally, **repeated dosing benefits the dog** and may help to improve the pathology, as indicated