

“Pearls”  
of  
Veterinary Medicine



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## Anesthesiology

### Anesthesia and Perioperative Care Guidelines

#### Fasting

AAHA now recommends a **fasting period of 4-6 hours prior to anesthesia** - 12 hours is no longer advised unless the pet has a history of or is at risk for regurgitation. [ref]

#### Premedicate at home prior to anesthesia

It is suggested that owners administer pre-anesthetic medications at home before the procedure. **Omeprazole** should be used to decrease stomach pH, while **maropitant**

helps reduce nausea, decrease the anesthetic minimum alveolar concentration (MAC), improve pain control, and hasten the return to eating. **Gabapentin** can effectively increase appetite and provide both anxiolysis and sedation in cats. However, in dogs, gabapentin acts only as a sedative, not an anxiolytic. **Cerenia** in its IV form takes about an hour to take effect, and giving it orally by the owner is more cost-effective and efficient.

*NB: see Cap Rep (2024):43(3):3-4 about Nexium*

#### Do not tilt surgical tables

Surgical tables should not be tilted during procedures.

#### Premedications and anesthetics

For opioid and sedative combinations, options include **acepromazine** (0.005-0.1 mg/kg), **Dexdomitor** (1-3 mcg/kg), or **butorphanol**. **Midazolam** should not be used alone, and **alfaxalone** should always be combined with either **acepromazine** or **butorphanol** [ref]. Combining **butorphanol** and **acepromazine** is insufficient for preoperative sedation. **Atropine** and **glycopyrrolate** should generally be avoided as they decrease gastrointestinal motility, except in cases such as eye surgery, brachycephalic or dolichocephalic breeds, dogs with mitral valve disease and bradycardia, airway surgery, or spinal surgery. When it comes to analgesia, **buprenorphine** provides superior pain relief compared to **butorphanol** in cats [ref], but it is a partial mu agonist and has poor reversibility. It is particularly useful for minor procedures such as abscesses, neuters, FNAs, and abdominal ultrasounds. **Hydromorphone** given SQ in cats tends to cause more side effects and shorter duration of action than when administered IV [ref].

However, in rabbits, **buprenorphine** may decrease food and water intake, potentially leading to stasis.

**Dexdomitor** rarely requires reversal since it does not always reverse bradycardia, but it does reverse sedation and analgesia and may lead to severe hypotension. It is less effective in cats, and reversing it with **Antisedan** may cause severe, poorly responsive hypotension in cats. [ref]

