PAIN MANAGEMENT in the CANINE PATIENT

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PART 3

Basic Pain Pharmacology for the Rehab Practitioner

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- Tip of the hat... Nod of the head...
 - NOT within the context of this course:
 - Local Anesthesia (nerve blocks)
 - Epidural Analgesia
 - (Immediate peri-operative pain management)



- Opioids
- NSAIDS
- Corticosteroids
- Tylenol
- Tramadol
- Amantadine
- Gabapentin
- Muscle Relaxants





- OPIOIDS
 - Work primarily at pre- and post-synaptic receptors present in the PNS & CNS
 - Activation of opioid receptors (exogenous or endogenous) inhibits the presynaptic release of excitatory neurotransmitters from the nerve terminals in the dorsal horn of the SpC.
 - Essentially they inhibit the processing of pain at the periphery, the spinal cord, & the brain.



- OPIOIDS Types:
 - Morphine:
 - Low cost. For moderate severe pain
 - Can cause histamine release (IV given)
 - May be less effective in cats
 - Duration 3 5 hours
 - Hydromophone / Oxymorphone:
 - For moderate to severe pain
 - Usually IV given
 - Less side effects / some sedation
 - Okay in cats
 - Duration 2 4 hours





- OPIOIDS Types:
 - Fentanyl IV or IM:
 - For moderate to severe pain
 - 100 x more potent than Morphine
 - Short duration if IV or IM injected (30 60 min)
 - Fentanyl Patch
 - Onset ranges from 12 24 hours
 - For mild to moderate pain
 - Duration 3 days (3 5 days in cats)



Basic Pain Pharmacology

- OPIOIDS Types:
 - Butorphano
 - For mild to moderate pain
 - 45 60 mins of analgesia + hours of sedation
 - Reduced side effects
 - Buprenorphine
 - For mild to moderate pain
 - 2 40 mins onset / 6 12 hrs analgesia
 - Can be given orally to cats
 - Not easily reversed
 - Methadone
 - Moderate to severe pain
 - Duration 4 6 hrs



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- OPIOIDS side effects
 - Sedation
 - Can reduce heart rate & in cats can increase body temperature
 - Some may cause vomiting
 - (beware of increased intra-ocular, intra-abdominal, or esophageal pressure)
 - Dysphoria (particularly in cats) in some animals



- NSAIDS (non-steroidal anti-inflammatory drugs)
 - Analgesic
 - Anti-inflammatory
 - Modulating pain at the peripheral receptor level (see next slide) and at the spinal cord level (mechanism unknown)

- NSAIDS (non-steroidal anti-inflammatory drugs)
 - Work by blocking prostaglandin synthesis
 - Via inhibiting of cyclooxygenase (COX) enzymes
 - Thereby reducing production of inflammatory mediators.
 - You have COX-1 & COX-2 inhibitors
 - As a general rule, one is looking primarily for COX-2 specific-inhibitor-NSAIDS
 - Since COX-1 is needed for making prostaglandins used in normal GI, renal & platelet functions

- NSAIDS (non-steroidal anti-inflammatory drugs)
 - Lots to choose from!
 - Carprophen: 4.4 mg/kg qd Dogs / 1 2 mg/kg qd Cats
 Lasts 12 24 hrs
 - Aspirin: 10 25 mg/kg Dogs / 10 15 mg/kg Cats
 Lasts 8 12 hrs (dogs) / 24 72 hrs (cats)
 - Meloxicam: 0.2 mg/kg initially, 0.1 mg/kg thereafter Dogs & 0.1 mg/kg initially, 0.025 mg / kg thereafter Cats
 Lasts 24 hrs
 - Ketoprofen: 2.0 mg/kg initially, 1.0 mg/kg thereafter Dogs
 4 1.0 mg/kg initially, 0.5 mg/kg thereafter Cats
 Last 24 hrs
 - Dericoxib: 3.0 4.0 mg/kg x 7 days post op & 1 2 mg/kg for chronic pain Dogs only

 Lasts 24 hrs

- NSAIDS (non-steroidal anti-inflammatory drugs)
 - Lots to choose from... OTHERS
 - Ftodolac
 - Tepoxalir
 - Tolfenamic acid
 - Firocoxib



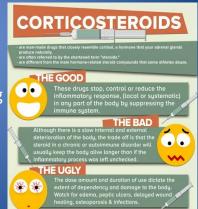
- If one NSAID is not working, try another (with a washout period in between)
- Can combine with Tylenol (Acetaminophen)
 - - (see future slide)
- Can combine other other adjunctive pain meds...

- NSAIDS Side Effects & Contraindications
 - Smart to have base-line blood work done before prescription & once or twice a year follow-up
 - Some NSAIDS (i.e. aspirin) may reduce clotting times
 - Careful use if animal has a history of GI bleed or renal disease
 - May react with other drugs
 - Do not use with Steroid... need a washout to switch between (up to 14 days)

- CORTICOSTEROIDS
 - Used for acute pain (e.g spinal cord compression)
 - Or chronic pain (spinal cord... or ? Intra-articular injection)
 - Oral or injectable
 - i.e. Prednisone, Prednisolone, Hydrocortisone,
 Dexamethasone, Betamethasone...

- CORTICOSTEROIDS Peculiarities...
 - Not first line of Rx
 - (except in cases of Spinal Cord Injury)
 - Can be used if all else fails
 - Controversial as a joint injection for OA (but could work)

- CORTICOSTEROIDS Peculiarities...
 - Ligament or Tendon damage if chronic use
 - Weight gain
 - GI ulceration
 - Diabetes in cats
 - Great thirst = greater peeing
 - Increased appetite



- ADJUNCTIVE ANALGESIC AGENTS
 - TYLENOL
 - Acetaminophen / Paracetamol
 - NOT an NSAID
 - Can be used for chronic pain, breakthrough pain, or for those that can't take NSAIDS
 - Can be used during a Medication 'wash out period'





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- ADJUNCTIVE ANALGESIC AGENTS
 - TYLENOL
 - 10 15 mg/kg BID or TID use 3 5 days, break for 2 3 days
 - Last 8 12 hrs
 - Monitor hepatic function
 - & NEVER EVER in CATS



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- ADJUNCTIVE ANALGESIC AGENTS
 - TRAMADOL
 - Serotonin & norepinephrine reuptake inhibitor
- - For Moderate to severe chronic pain
 - Loses efficacy when used long term
 - May be less effective when used alone
 - 2 10 mg/kg Dogs (Cats unknown or 3 -5 mg/kg)
 - Lasts 12 24 hrs
 - Don't combine with antidepressants (i.e. Amitriptyline)
 - Side effects: as per opioids

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- ADJUNCTIVE ANALGESIC AGENTS
 - AMANTADINE
 - Originally an antiviral drug.
- May work in dogs with OA pain when added to NSAID
 - For mild to moderate chronic pain
 - Dosage 3 5 mg/kg once a day (Dogs or Cats)
 - Lasts 24 hrs
 - (Try for 3 4 weeks, then d/c & reassess... could put on-board for a second course). Could be used chronically

- ADJUNCTIVE ANALGESIC AGENTS
 - GABAPENTIN (Neurontin)



- Originally an anticonvulsant
- Seems to decrease neurotransmitter release and transmission of pain signals
- Used for neuropathic pain
- Also cancer, spinal cord, or OA pain
- (Evidence in both acute & chronic pain situations)

- ADJUNCTIVE ANALGESIC AGENTS
 - GABAPENTIN (Neurontin)
 - Dosage (5 20+ mg/kg) TID QID dogs & cats
 - Lasts 12 24 hrs
 - Side Effects:
 - Ataxia & drowsiness
 - If using in Geriatric patients and they start 'slowing down', then try reducing the dose.
 - · Avoid if decreased renal function



Basic Pain Pharmacology

- ADJUNCTIVE ANALGESIC AGENTS
 - AMITRIPTYLINE (tricyclic antidepressant)
 - For Chronic, neuropathic pain
 - Modulates brain opiod system via serotonergic and noradrenergic neuromodulation
 - 1 2 mg / kg SID BID Dogs & 0.5 2.0 mg / kg Cats once a day
 - Lasts 12 24 hrs
 - Side effects
 - Drowsiness, disorientation, agitation
 - Don't use with Tramadol

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- ADJUNCTIVE ANALGESIC AGENTS
 - MUSCLE RELAXANTS
 - METHOCARBAMOL (Robaxin)
 - NOT Robacicet, Robaxicol, etc
 - 15-20 mg/kg TID
 - May help with sleep... could be used as a 'night time' drug.

- Sometimes, it's just good for the 'non-vet' rehab practitioner to KNOW these things, or to talk to the rDVM about them!
- Often times, clients ask question. It's good to know some simple answers.
- Sometimes you have to advocate for an adjunctive medication.
- Sometimes you have to stop clients from doing something stupid!

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