

Vetergesic[®]

Buprenorphine 0.3 mg/mL, 10mL vial

MULTI-DOSE

THE KEY TO PAIN MANAGEMENT

**THE OPIATE FOR ROUTINE
PREMEDICATION IN CATS**



CHAMPION ALSTOE
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Vetergesic[®] - the opiate for m

Introduction

Vetergesic is a high affinity / high avidity opioid agonist that is used extensively as part of premedication. It is both potent and long acting. All these benefits are now available to the cat patients of veterinary surgeries in Canada.

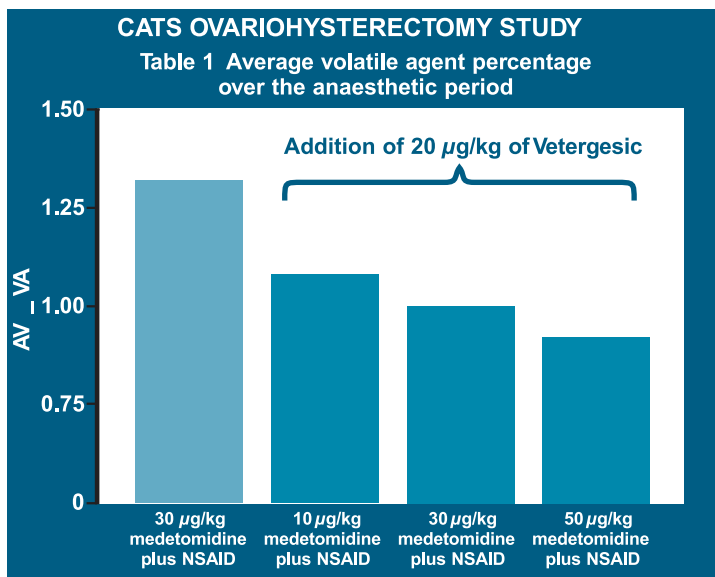
Premedication, anaesthesia and recovery

■ Vetergesic can reduce the dose of other premedicants

One of the effects of Vetergesic is to potentiate the action of centrally acting drugs and consequently it may be possible to reduce the amount of premedicant used.

■ Vetergesic gives good perioperative analgesia and may reduce the requirement for anaesthetic agents.

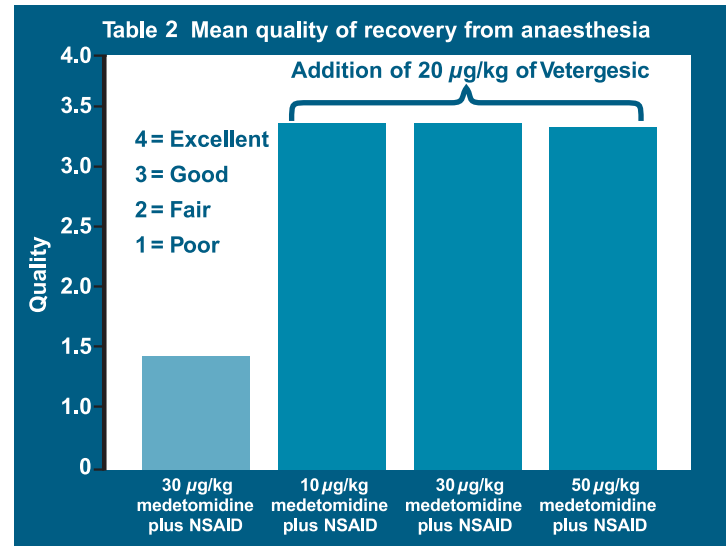
The addition of Vetergesic to the combination of medetomidine and NSAID, resulted in a significant reduction in the average isoflurane percentage used over the anaesthetic period.⁽¹⁾ See Table 1.



■ Addition of Vetergesic provides superior recovery to sedative/NSAID combinations

A recent study in cats undergoing ovario-hysterectomy showed that the quality of recovery from anaesthesia was significantly improved by the addition of Vetergesic (20 µg/kg) to combinations of medetomidine and injectable NSAID.⁽¹⁾

See Table 2.



■ Vetergesic has proven compatibility

Vetergesic has been successfully used with a wide range of premedicants and anaesthetic drugs such as: acepromazine, alphaxalone, dexmedetomidine, medetomidine, xylazine, ketamine, propofol, thiopentone, atropine, isoflurane and sevoflurane.

■ Vetergesic has a low impact on gastrointestinal tract function

Cases of vomiting or delayed gastrointestinal transit time in cats are rarely observed.

Vetergesic - demonstrates profound & prolonged analgesia

Recent studies have shown buprenorphine produces longer and better levels of analgesia following routine surgery than many opiates; morphine⁽²⁾, butorphanol⁽³⁾ and meperidine.^(4,5)

routine premedication in cats

- Provides profound and prolonged analgesia
- Can be administered via intravenous or intramuscular routes
- Superior effects to morphine, butorphanol or meperidine
- Flexible and can be used with a wide range of premedicant and anaesthetic agents, often permitting the use of lower doses of those drugs in routine anaesthetic protocols
- Minimal clinically significant side effects^(4,7)
- Can be used preoperatively to reduce central sensitisation “wind-up” and provide postoperative pain relief
- Provides better recovery when added to sedative/NSAID combinations than those drugs used alone

Prevention of “Wind up”

The administration of opiates preoperatively can have positive long-term benefits through the blocking of, or preventing the development of central sensitisation “wind up” resulting from surgical stimulation.⁽⁵⁾

In a large field study in cats presenting for routine surgery the Vetergesic treated group had significantly better levels of analgesia than a butorphanol group after 24 hours. Over 80% of cats receiving Vetergesic were pain free 24 hours after surgery.⁽⁶⁾ As the analgesic effects of Vetergesic are approximately 6-8 hours the lower pain level effect at 24 hours probably reflects a greater action in preventing central sensitisation.

Dose timings

The analgesic requirements of each patient will vary. Factors such as the level of pain, the health status of the animal and its genetic predisposition to painful stimuli, profoundly affect the success of pain management.

The pharmacological effects of Vetergesic may occur within minutes of administration. Analgesic effects occur around 30 minutes with peak analgesic effects normally occurring at about 1-1.5 hours. For this reason it is advisable to administer Vetergesic about 30 minutes prior to surgery.

Multi-modal analgesia

The recommended dose of Vetergesic (20 µg/kg) will provide profound and prolonged analgesia. If the analgesia is not sufficient a further dose of Vetergesic may be administered 2 hours after the initial dose. Alternatively the use of other agents, which act on different parts of the pain pathway can be considered. The simultaneous administration of two or more analgesics from different drug classes can provide additional effects. Similarly, the targeting of different points on the pain pathways may allow lower doses of each drug to be administered. Drugs to consider using with Vetergesic include: NSAID's, ketamine and local anaesthetics.⁽⁷⁾

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Cat dosage chart:

Weight kg	Vetergesic 0.3mg/mL (at 20µg/kg)	Plus either	Acepromazine 1.0 mg/mL (at 50µg/kg)	Or	Dexmedetomidine 0.5 mg/mL (at 20µg/kg)	Ketamine 100mg/mL at a dose of 5 mg/kg has been used with a premed combination of Vetergesic & Sedative
	mL		mL		mL	mL
0.5	0.03		0.03		0.02	0.03
1.00	0.07		0.05		0.04	0.05
1.50	0.10		0.08		0.06	0.08
2.00	0.13		0.10		0.08	0.10
3.00	0.20		0.15		0.12	0.15
4.00	0.26		0.20		0.16	0.20

Safety Information

1. The major route of excretion is the feces. Buprenorphine generally undergoes n-dealkylation by the intestinal wall and the liver and its metabolites are excreted via the bile into the gastro-intestinal tract.
2. Buprenorphine may cause drowsiness, which may be potentiated by other centrally acting agents including tranquilisers, sedatives and hypnotics.
3. Mydriasis and euphoria has been reported in cats. If mydriasis is observed, avoid the use of bright lights and sudden movements near the patient.
4. In cases of over dosage, supporting measures should be instituted and if appropriate, naloxone or respiratory stimulants may be used. However, dose levels many times higher than those indicated above have been used without serious effects.
5. Special warnings: Animals administered opioids possessing sedative and analgesic properties may show variable responses. Therefore the response of individual animals should be monitored.
6. Do not administer by intrathecal or epidural route. Do not use pre-operatively for caesarean section, due to the risk of respiratory depression in the offspring.

REFERENCES

- (1) N.J. Grint, J. Burford and A.H.A. Dugdale, J. of Small Animal Practice, 50, 73-81, 2009
- (2) G.W. Stanway, R.M. Taylor and D.C. Brodbelt, Veterinary Anaesthesia and Analgesia, 29, 29-35, 2002
- (3) S.A. Robertson, R.M. Taylor, B.D.X. Lascelles and M.J. Dixon, Vet. Record, 153, 462-465, 2003
- (4) S.A. Robertson, Association of Veterinary Anaesthetists Meeting, Newmarket, Technicians' Training Day: Cat Anaesthesia, 30-35, September 2005.
- (5) L.S. Slingsby and A.E. Waterman-Pearson, Veterinary Record 143, 185-189, 1998
- (6) R.M. Taylor, C. Robinson, D.D. Clarke, K.E. Chruch, J.J. Kirby, E.A. Watkins, M.A. Ford, Journal of Feline Medicine & Surgery, 247-255, 12, 2010
- (7) K.A. Lemke, BSAVA Manual of Canine & Feline Anaesthesia & Analgesia, 2nd Edition 104, 2007

DIN 02342510

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