

Analgesia for Onychectomy (Declaw)

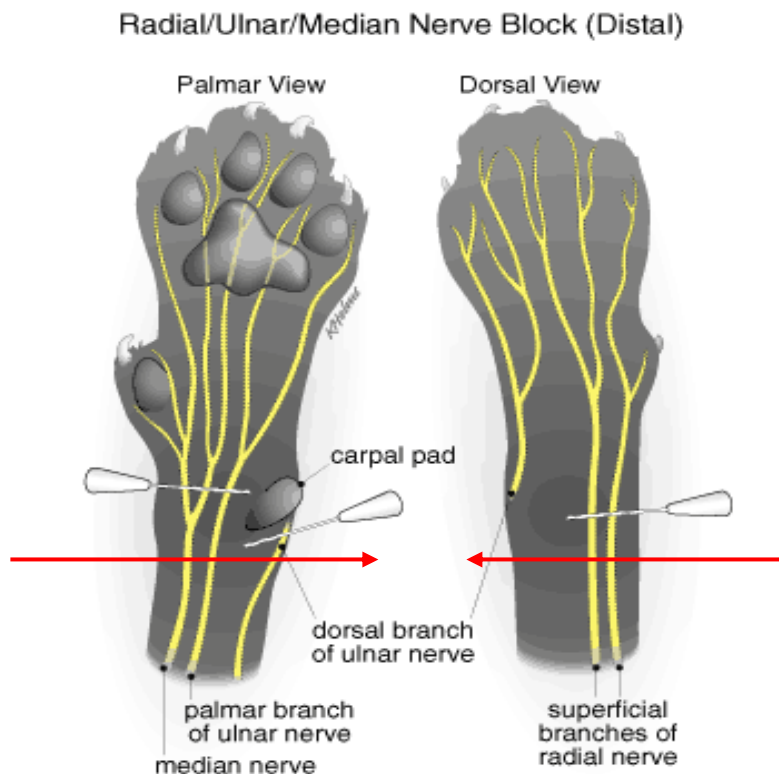
Tamara Grubb, DVM, MS, Diplomate ACVA

Onychectomies are associated with a moderate to severe degree of pain. Basically, declaws are amputations and amputations are traditionally associated with severe pain. Since pain is much easier to prevent than to treat, it is imperative that we utilize preemptive analgesia for declaws. Furthermore, the pain following a declaw lasts for several days so it is also imperative that we continue analgesic therapy after the cat is discharged from the hospital.

One of the easiest, cheapest and most effective ways to provide preemptive analgesia is to block the nerves supplying the paw with a local anesthetic (see block below). The best drug to use for this technique is bupivacaine or marcaine since it has a duration of action of 4-6 hours (lidocaine duration of action is approximately 90 minutes). The dose of bupivacaine is 1-2 mg/kg (this equates to approximately 1 ml of 0.5% bupivacaine PER ADULT CAT).

Although the local block contributes to the relief of postoperative pain, another method of analgesia must to be provided prior to the time that the local block wears off. Two very effective methods are oral buprenorphine (0.01-0.02 mg/kg PO BID or TID) and transcutaneous fentanyl (1/2-1 25-microg patch per cat). Both of these methods are appropriate for the degree of pain that is associated with declaws and both should be instituted prior to the painful stimulus (preemptive).

Obviously, no matter what analgesic therapy is chosen, the cat should be reevaluated frequently for signs of discomfort.



Line block or modified three point block.

Figure adapted from Pain Management for the Small Animal Practitioner, WJ Tranquilli, KA Grimm, LA Lamont. Teton NewMedia, 2000.