

Anaesthetic Concerns

Similar situations, different reactions. Last week I had two patients undergoing dentistry. One was a strapping, healthy, middle-aged Labrador with terrible teeth. I had to work hard to convince his guardian to agree to the dentistry. He had stage 4 periodontal disease. He was in obvious pain, his mouth was stinking, and the upper molars were loose. I had to explain the danger of not addressing this problem – the infection could spread from the gums to the rest of the body, including the kidneys, liver, heart... The insidious damage was far more than one could imagine over the long term. Yet she was unconvinced. Her fear of anaesthesia did not let her think rationally. I then gave her the statistics. If given carefully, anaesthesia in a healthy pet is not likely to cause mortality any more than the likelihood of an accident on an expressway. It can happen, yes. Very, very rarely in a normal, healthy patient. But then that's destiny.

The other patient was an old dog, also with bad teeth. The pet parent came to me and said, "I can't bear to see him in pain. He winces when I touch his face. I know he's old and weak, and his anaesthetic risk is high. His regular veterinarian is unwilling to put him under anaesthesia. But I'm willing to take the risk. It's better than letting him suffer this pain and nausea he must be feeling due to his breath." We did his preoperative blood tests and ECG, and his dentistry was uneventful. She came back to thank me, saying, "He's like a new dog, active, playful, and wants to eat a lot!" I was happy for her. Right decision, right time.

In order to make anaesthesia as safe as possible, there is a standard protocol for preanaesthetic evaluation, anaesthesia as well as recovery from anaesthesia. All good veterinary practices follow these guidelines. Anaesthetic plans are never 'one size fits all', but are individualised according to the patient's age, health, and surgical procedure. Preanaesthetic and pain management drugs are



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given after taking into consideration any pre existing or chronic disease condition.

There are several phases leading up to the final surgery, the first of which includes a preanaesthetic patient assessment which includes blood tests, ECG and a urine test. On the day of surgery, premedication is given – these are sedatives and pain management drugs that allow endotracheal intubation for gas anaesthesia. These medications also reduce the dose of anaesthesia, thus reducing risk.

While the patient is under anaesthesia, heart rate, respiration, blood pressure and other vital parameters are monitored closely by a monitoring

system, and the depth of anaesthesia adjusted accordingly. Although anaesthetics can provide pain relief and loss of consciousness during an operation, they can have side effects. Most commonly, there are changes in circulation and breathing. Veterinarians are especially trained to ensure that these anaesthetic effects are managed so that there are no serious side effects.

During and after the procedure, emergency drugs and equipment, plus an action plan for their use is available, along with it, fluids and agents to maintain blood pressure and volume.

Throughout the recovery period, veterinary staff train to detect recovery complications and monitor the patient till all parameters stabilise. A vet then checks the patient to make sure all vital parameters are normal before the final release. For every 10000 patients who undergo anaesthesia, there will be one casualty in spite of the best possible care. But 9999 patients go on to lead better, healthier, pain-free lives due to that surgery.

Are you willing to take this calculated risk? The choice is yours. 

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