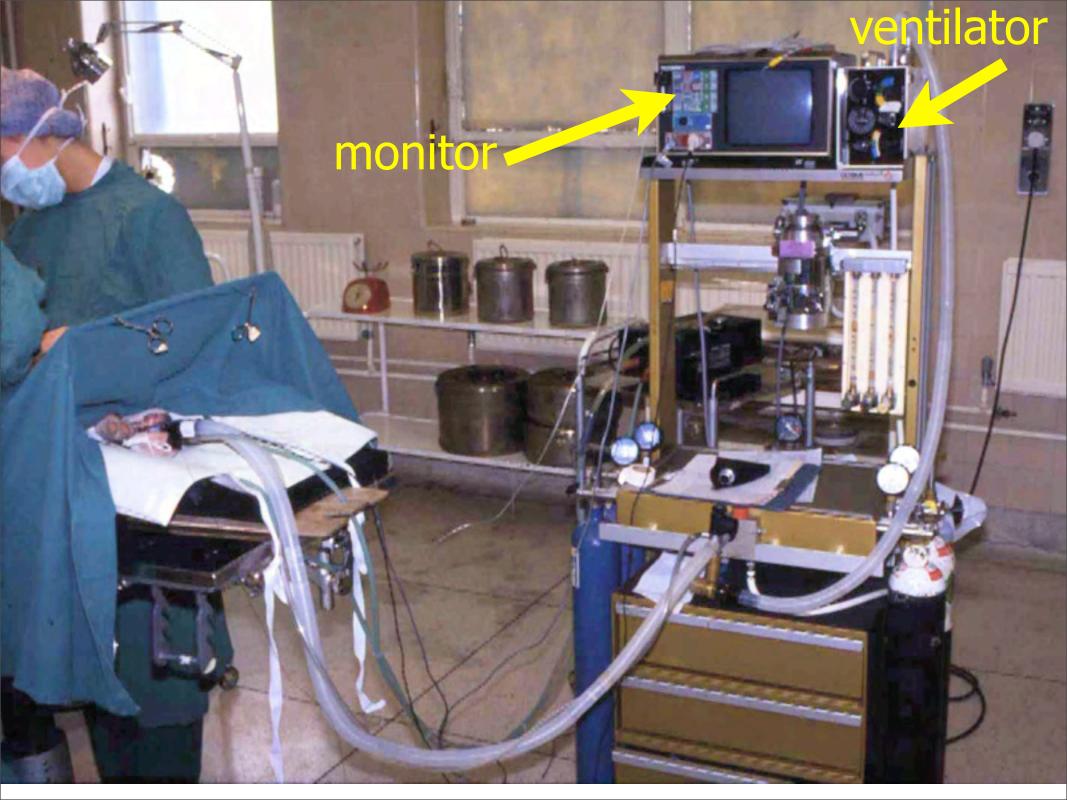
Neuromuscular Junction

NMJ

- muscle relaxation during anaesthesia
- myaesthenia gravis
- poisoning

balanced anaesthesia

- unconsciousness
- analgesia
- muscle relaxation



neuromuscular blockers

- depolarising (non competitive)
- competitive (non depolarising)
- (inhibition of ACh synthesis)
- (inhibition of ACh release)
 - magnesium
 - aminoglycoside antibiotics
 - botulinum toxin

neuromuscular blockers stop the animal's breathing and cause paralysis – the animal

be unconscious before they are used

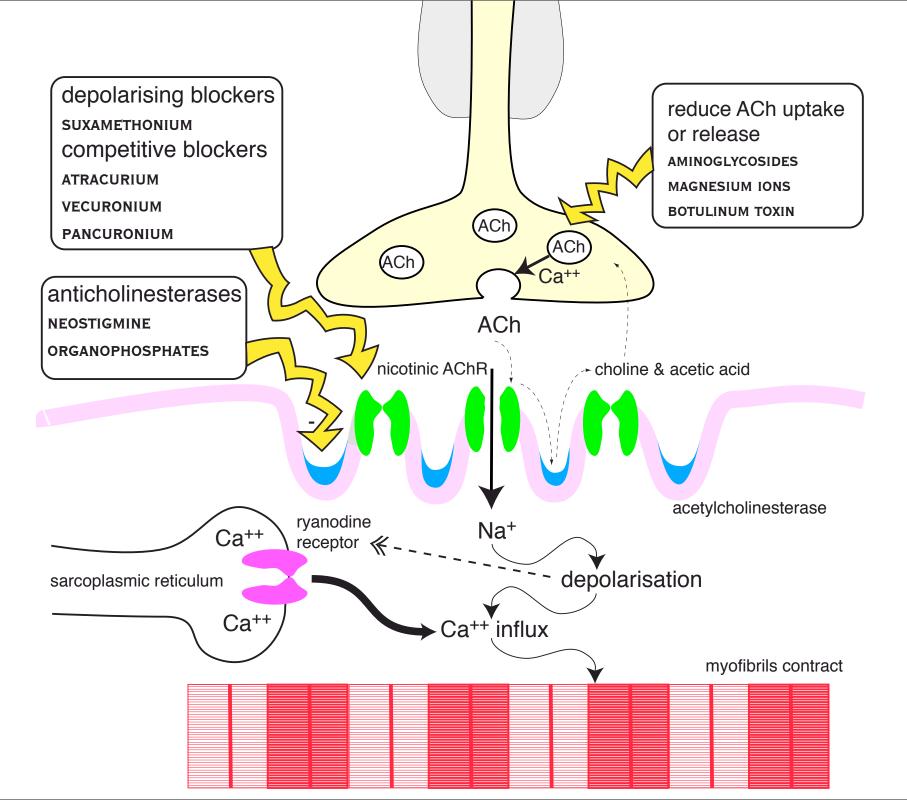
must

anaesthesia

- given iv after anaesthetic
- ventilation required
- degree of blockade monitored

onset of blockade

- 1 tail & face
- 2 limbs
- 3 swallowing
- 4 abdominal muscles
 - **5 intercostal muscles**
- 6 diaphragm



suxamethonium

- succinylcholine USAN
- depolarising blocker
- acts like ACh
- 2 ACh molecules joined
- hydrolysed by plasma cholinesterase
- succinylcholine USAN

suxamethonium

- depolarises muscle fibre
- fasiculation
- effects not reversible

side effects

- potassium release
- bradycardia
- muscle pain later?
- can provoke malignant hyperthermia in pigs

phase 2 block

- prolonged blockade after several doses of suxamethonium
- competitive
- partially reversible
- receptor desensitisation?

sux indications

- muscle relaxation for intubation (crash induction)
- (relaxation for caesarian section)

sux contra-indications

- no means of ventilation available
- doubt about unconsciousness
- recent OP administration

sux pharmacokinetics

- acts in one circulation time
- diffuses out of synapse
- metabolised by plasma cholinesterases
- effects wear off in 2 3 mins
 dogs 20 mins
- anticholinesterases prolong effects
 - organophosphate insecticides

competitive blockers

compete with ACh for receptor
effect reversed by increasing ACh concentration

competitive blockers

- actions influenced by other drugs
 inhalation anaesthetics
 - benzodiazepines
 - aminoglycoside antibiotics

competitive blockers

- atracurium
- vecuronium
- pancuronium
- mivacurium
- rocuronium

atracurium

acts for about 20 – 30 mins
broken down by Hofmann degradation

liver function not necessary

vecuronium

lasts 15 – 20 mins
non cumulative
metabolised in liver

pancuronium

lasts 40 – 50 mins
can cause tachycardia
must be reversed

mivacurium

rapid block – 2mins
short action – 10 – 15 mins

rocuronium

rapid onset – 1 min
duration 30 – 40 mins

do not use

 no longer available in NZ tubocurare causes histamine release kills dogs pipecuronium similar to pancuronium but longer acting & more side effects

indications

muscle relaxation during anaesthesia
thoracotomy
ophthalmic ops
some abdominal ops
(reducing dislocations)

after use

- effects can be reversed with anticholinesterase
- anticholinesterase increases ACh which competes with blocker

anticholinesterases

 edrophonium short acting, no longer available in NZ neostigmine medium duration of action pyridostigmine - long acting, inj not available in NZ all must be given with atropine

myaesthenia gravis

- autoantibodies to nACh R (& thymus in man)
- muscle weakness, megoesophagus
- diagnosis improvement with neostigmine (+ atropine)
 treatment – pyridostigmine po

others

reduce ACh release
magnesium
streptomycin
botulinus toxin
compete with Ca in muscle
magnesium

malignant hyperthermia

- defect in gene for ryanodine receptor
- common in pigs
- probably occurs in most species
- usually triggered by halothane
- can be triggered by suxamethonium

malignant hyperthermia

- pig goes rigid
- temperature goes up
- tachycardia then tachyarrhythmias
- cyanosis
- acidosis
- later

all the signs of muscle breakdown

stop giving halothane

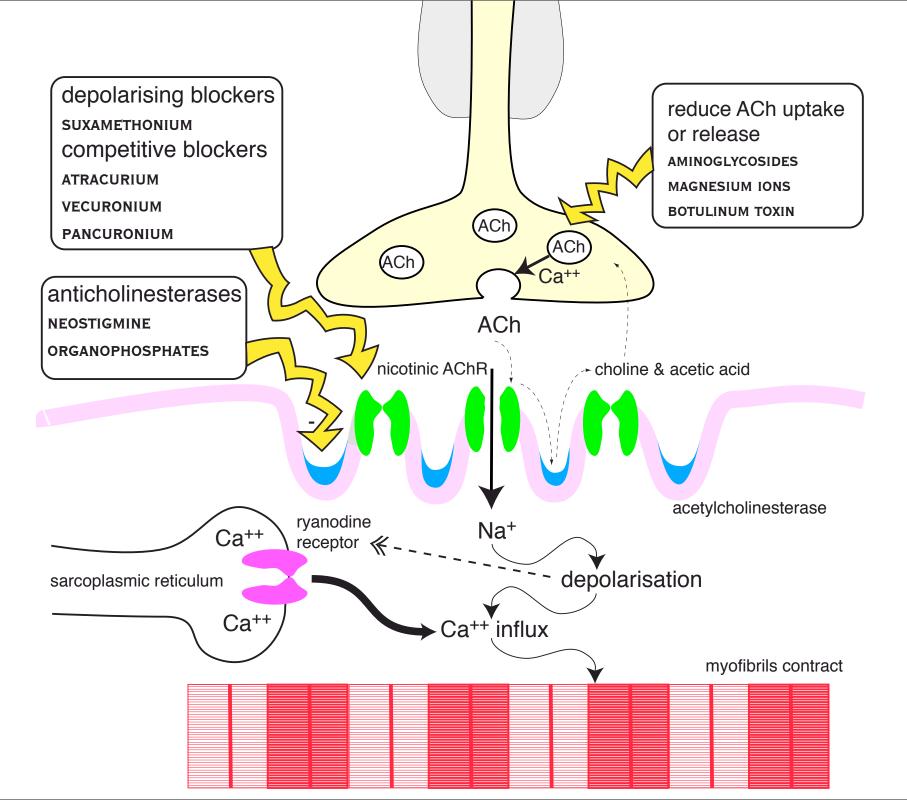
stop giving halothane
ventilate with oxygen

- stop giving halothane
- ventilate with oxygen
- cool down

- stop giving halothane
- ventilate with oxygen
- cool down
- give dantrolene

dantrolene

- does not act at NMJ
- prevents calcium release from sarcoplasmic reticulum
- uncouples excitation and contraction
- used in malignant hyperthermia
- too expensive to use



What would you do?

5 year old dog FB in bronchus Jung lobectomy

neuromuscular blockers

- neuromuscular blockers used for anaesthesia for some ops
- they must not be given to conscious animals
 - animals must be ventilated
 - do not use these drugs unless you have equipment for IPPV and know what you are doing