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| Drug  | Contraindication  | Side effects |
| Tolazoline  | Animals with circulatory and cardia issues.If sings of stress, debilitation, cardiac disease, sympathetic blockage, hypovolemia or shock. | Tachycardia, peripheral vasodilation, bright pink to dark red mucus membranes, hyperalgesia of lips (licking/flipping of lips seen) |
| Atropine  | Narrow angle glaucoma, tachycardias, ileus, urinary obstruction | -dry mouth (xerostomia), dysphagia, constipation, vomiting, and thirst.- urinary retention or hesitancy- stimulation, drowsiness, ataxia, seizures, respiratory depression, etc- blurred vision, pupil dilation, cycloplegia, and photophobia- sinus tachycardia (at higher doses), bradycardia (initially or at very low doses), hypertension, hypotension, arrhythmias (ectopic complexes), and circulatory failure. |
| Epinephrine  | - Narrow-angle glaucoma- hypersensitivity to epinephrine- shock due to non-anaphylactoid causes- general anesthesia with halogenated hydrocarbons- during labor (may delay the second stage)- cardiac dilatation or coronary insufficiency (cases where vasopressor drugs are contraindicated (e.g., thyrotoxicosis, diabetes, hypertension, toxemia of pregnancy)- should not be used in areas with end artery blood flow (e.g. ears, digits, tail) | **-** Anxiety, tremor, excitability, vomiting,hypertension (overdosage), arrhythmias, hyperuricemia, & lactic acidosis (prolonged use or overdosage)- necrosis at the injection site.(if used repreatedly) |
| Banamine (Flunixin Meglumine) – NSAID | - NSAIDs inhibit production of prostaglandins which are important in signalling the initiation of parturition- The use of flunixin can delay parturition and prolong labor which may increase the risk of stillbirth- Do not use within 48 hours of expected parturition- Do not use in animals showing hypersensitivity to flunixin meglumine - Use judiciously when renal impairment or gastric ulceration are suspected. Discontinue use if haematuria or faecal blood are observed.  | - May cause irritation and pain after IM administration - May cause damage to kidneys, stomach and blood cells resulting in kidney failure, ulcers and haemorrhage NB: The risk of these side effects occurring is increased if used concurrently with other NSAIDS  |
| Penicillin-Streptomycin (Antibiotic) | - Hypersensitivity to penicillins, procaine and/or aminoglycosides- Administration to animals with a seriously impaired renal function- Concurrent administration of tetracyclines, chloramphenicol, macrolides and lincosamides | - Administration of therapeutic dosages can result in abortion in sows, ototoxity, neurotoxicity or nephrotoxicity- Hypersensitivity reactions |
| Lidocaine (Local anaesthetic) | - Lidocaine is contraindicated in animals with a known hypersensitivity to the drug- Use with extreme care in animals with severe shock, heart block, neurological diseases, spinal deformities, septicemia and severe hypotension or hypertension. - Avoid injection at the actual surgery site since it may delay healing- Do not administer intravenously. Convulsions and shock may occur in sensitive animals if large doses of the drug are given intravenously (inadvertently) or intrathecally. This may be treated by injecting a short acting barbiturate intravenously to control central nervous system stimulation and immediately administering artificial respiration or oxygen. | - Transient drowsiness may occur in animals receiving large doses of Lidocaine HCl 2%.Signs of toxicity include: loss of consciousness, drop in blood pressure and respiratory collapse.The degree of toxicity depends upon the vascularization of the area. Spasm of certain muscle groups or convulsions may also occur. Treatment for toxicity is as follows: lowered head, artificial respiration, oxygen and I.V. pressor agents. Convulsions and spasm are controlled by means of small amounts of I.V. ultra short-acting barbiturates. |