Benessere e cura dei grandi animali impiegati in progetti scientifici" 26 aprile 2021

Segni clinici di malessere e interventi terapeutici Dr Briganti Angela

Dipartimento di Scienze Veterinarie



Utilizzo dei grandi animali per la ricerca

- ricerca di base
- ricerca traslazione
- chirurgia sperimentale
- trial clinici

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- 70000 suini ogni anno in Europa
- ovini e caprini: chirurgia sperimentale, modelli di rigenerazione ossea, modelli di osetoartrite, trial clinici
- clinici
- equini: trial clinici per la specie equina

• suini: patologie cardiache, chirurgia sperimentale, enteropatie, coagulopatie, modelli di ischemia cardiaca, test farmacologici, patologie della pelle; circa

• bovini: modelli per cuore artificiale (CARMAT), coagulopatie, trapianti, trial clinici, produzione di siero bovino fetale (non sottoposto a legislazione), trial



- i segni clinici sono specie-specifici
- necessità di conoscere l'etologia della specie
- necessità di valutare gli animali prima dello stimolo nocicettivo
- monitorare le modificazioni nel tempo



Come identificare i segni clinici di dolore e stress

- alterazione del comportamento interattivo
- alterazione del comportamento abituale
- riduzione dell'appetito/defecazione
- riduzione/alterazione del movimento
- riduzione della toelettatura
- riduzione dell'attività ludica

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Perché è necessario controllare il dolore?

- Dovere etico e morale
- Buon fine della sperimentazione
- 1) ridurre morbilità e mortalità
- 2) migliorare interazione con gli animali

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- previsione del grado di dolore
- identificazione del dolore
- valutazione del grado di dolore
- progettazione del tipo di intervento
- ri-valutazione dell'efficacia dell'intervento
- HEP (human end point): deciso al momento della progettazione

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Progettazione del protocollo



Osservazioni cliniche

Glossario delle osservazioni cliniche

L'adeguatezza di qualsiasi piano di valutazione della gravità dipende dalla selezione di indicatori di benessere che:

- siano riconoscibili in modo immediato e affidabile;
- siano efficaci nel fornire misurazioni adeguate del benessere;
- siano pertinenti in relazione allo studio scientifico, alla specie e alla razza (se del caso);
- siano agevoli da applicare e non arrechino eccessivo disturbo per l'animale;
- si prestino a misurazioni, interpretazioni e analisi coerenti.

L'adozione di un approccio condiviso alla registrazione delle osservazioni cliniche è quindi un obiettivo auspicabile in quanto contribuisce alla formulazione di approcci coerenti alla classificazione della gravità. Ciò può consentire un più agevole confronto dei risultati clinici ottenuti nei vari studi e l'informazione dei soggetti coinvolti nella valutazione della gravità.

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Appendice I





Macro-categorie	Aspetti sui quali concentrare l'attenzione nell'osservazione degli animali
Aspetto	Condizione fisica
	Stato del mantello e della cute
	Scarico
	Occhi
	Bocca
	Altro
Funzioni corporee	Respirazione

Indicatori specifici da monitorare
Aumento/ calo ponderale
Obesità
Magrezza
Punteggio di valutazione della condizione fisica, se disponibile
Piloerezione
Mantello arruffato/ assenza di grooming (cura di sé)
Mantello untuoso
Alopecia/perdita di pelo
Disidratazione: perdita di elasticità e turgore della cute (skin tenting)
Lesioni della cute: tumefazione; crosta; ulcerazione; lesione/ferita
Tracce di feci o di urina
Oculare; nasale; uro-genitale; secrezioni di porfirina in alcune specie, ad
esempio il ratto
Infossati o "spenti"
Chiusi/socchiusi
Danno/lesione oculare (ad esempio ulcera corneale)
Salivazione
Malocclusione/denti sporgenti
Espressione facciale di dolore: ad es. occhi socchiusi e naso protuberante
(nose bulge) nei topi
Costrizione addominale
Gonfiore di una parte del corpo, ad esempio addome gonfio
Respirazione accelerata (tachipnea)
Respirazione difficoltosa (iperpnea)
Respirazione molto difficoltosa (dispnea)



		Resp
	Assunzione di cibo/acqua	Aun
	Temperatura corporea	Iper
		(effe
		term
	Sensi	Inde
Ambiente	Ambiente di stabulazione, ivi compresi	Pres
	lettiere, materiale per i nidi, elementi	Giac
	utilizzati per l'arricchimento	Pres
	ambientale	Util
		l'arr
Comportamenti	Interazione sociale	Alte
		con
		nasc
		Isola
	Comportamenti indesiderabili	Con
		Tag
		Aun
	Postura e mobilità	Post
		And
		mov
		Mov
		Add
	Altro	Trer
		Cris
		Voc
		rodi

pirazione con ansimazione o emissione di altri suoni

mentata/ridotta

termia/ipotermia; misurazioni della temperatura corporea, se disponibili ettuate ad es. per mezzo di microchip o dispositivi telemetrici,

nometri a contatto o senza contatto); colore delle estremità nei roditori

bolimento della vista, dell'udito e dell'equilibrio

senza e consistenza delle feci

ciglio bagnato, ad esempio a causa di poliuria

senza di vomito o sangue

izzo o meno da parte dell'animale degli elementi forniti per icchimento ambientale, ad es. materiale per i nidi, blocchi da rosicchiare erazioni del temperamento normale: interazioni apprensive/aggressive altri animali; ansietà (ad esempio marcate reazioni di fuga, tendenza a condersi)

amento o ritiro dagli altri animali nel gruppo sociale

nportamento ripetitivo/ stereotipie

lio di pelo e vibrisse (barbering) nei roditori, tricotillomania

nento dell'aggressività verso gli esseri umani o altri animali

tura anormale

latura anormale; claudicazione; mancanza di vimento/letargia/riluttanza a muoversi se stimolato

vimenti non coordinati

lome retratto; testa reclinata

mori

si/convulsioni/spasmi

calizzazioni; spontanee o evocate (Nota: alcune specie, ad esempio i itori, vocalizzano di solito nella gamma ultrasonica e pertanto le alizzazioni udibili sono particolarmente preoccupanti. Anche le



Indicatori procedura-specifici	Vengono definiti in base al singolo progetto, ai suoi potenziali effetti avversi e ai relativi indicatori previsti.	
Osservazioni libere	Ogni piano di valutazione della gravità dovi a impatti negativi imprevisti sul benessere d	

vocalizzazioni dei conigli sono in genere inaudibili per l'orecchio umano, a meno che l'animale non sia in stato di distress).

In un modello EAE gli indicatori potrebbero essere, ad esempio: coda atonica, debolezza degli arti posteriori, debolezza degli arti anteriori, paralisi, incontinenza urinaria.

vrebbe comprendere una sezione per registrare qualsiasi osservazione relativa degli animali.





Animale n.				
Data	01/06	02/06	03/06	04/06
Aspetto				
Peso corporeo				
Stato del mantello				
Funzioni corporee				
Dispnea e/o				
tachipnea				
Assunzione di cibo				
Ambiente				
Feci molli o diarrea				
Diarrea con sangue				
Comportamenti				
Manipolazione				
Aggressione				
Locomozione				
anormale				
Postura anormale				
Riluttanza a muoversi				
Indicatori specifici re	lativi alla pr	ocedura		
Dimensioni tumore				
Ulcerazione del				
tumore				
Tumore che				
impedisce il				
movimento				
Punteggio totale				
Altre osservazioni				

• la scheda di valutazione giornaliera deve essere adeguata all'esperimento in corso e al tipo di modello animale coinvolto



Esempio di scheda di valutazione

Esempi di sistemi di valutazione clinica

Aspetto	Punteggio
Peso corporeo	
Calo ponderale 5-10%	1
Calo ponderale 11-15%	2
Calo ponderale 16-20%	3
Calo ponderale 20% +	HEP
Stato del mantello	
Mantello lievemente arruffato	1
Piloerezione lieve	2
Piloerezione marcata	3
Funzioni corporee	
Tachipnea (respirazione accelerata)	1
Dispnea (respirazione difficoltosa)	3
Ambiente	
Feci molli o diarrea	1
Diarrea con sangue	HEP
Comportamento	
Teso e nervoso alla manipolazione	1
Distress marcato alla manipolazione, ad es.	3
tremore, vocalizzazione, aggressività	
Locomozione	
Locomozione /postura lievemente anormali	1
Locomozione /postura marcatamente	2
anormali	
Significativi problemi di mobilità /Riluttanza a	3
muoversi	
Immobilita >24h	HEP

Interventi			
Punteggio 1	Rivedere la frequenza del monitoraggio		
2	Valutare la possibilità di somministrare cure supplementari, ad es. dose extra di liquidi		
4	Consultare il veterinario		
6	Attuare punto finale umanitario		

nterventi	
-----------	--

Intensificare la frequenz supplementari

Valutare l'andamento co

Punto finale umanitario

Dimensioni tumore >1.2cm	HFP
Ulcerazione del tumore	HEP
Tumore DeinBeigantio Amegela	HEP

	Punteg tota
za del monitoraggio; valutare la possibilità di somministrare liquidi/cure	≥4
on il veterinario	5-1
	≥16





identificazione dei segni di dolore

- valutazione generica
- utilizzo di scale specifiche per tipo di dolore e per specie

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- perdita appetito, ansioso, inattivo
- dolente
- perdita del sonno e della preparazione del "letto"
- alterazioni della postura e della camminata

• può reagire alle manipolazioni e urla se toccato nella zona



Grimace pain scale

Ear Position



Absent (0)



Moderately present (1)



Obviously present (2)

When the animal is in pain, the ears are drawn back from forward (baseline) position



Absent (0)

Cheek Tightening/Nose Bulge



Moderately present (1)



Obviously present (2)

When the animal is in pain, a bulge of skin is apparent on the snout in response to cheek tightening



Absent (0)



Present (1)

When the animal is in pain, the orbital area is narrowed as the eyelids are squeezed together (scored on a two-point scale)

Orbital Tightening

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RESEARCH ARTICLE

The creation of species-specific valid tools for pain assessment is essential to recognize Validation of the UNESP-Botucatu pig pain and determine the requirement and efficacy of analgesic treatments. This study aimed composite acute pain scale (UPAPS) to assess behaviour and investigate the validity and reliability of an acute pain scale in pigs undergoing orchiectomy. Forty-five pigs aged 38±3 days were castrated under local anaesthesia. Behaviour was video-recorded 30 minutes before and intermittently up to 24 hours Stelio Pacca Loureiro Luna¹[•]*, Ana Lucélia de Araújo²[•]^a, Pedro Isidro da Nóbrega Neto^{3‡}, Juliana Tabarelli Brondani^{1¤b‡}, Flávia Augusta de Oliveira^{2¤c‡}, Liliane Marinho dos after castration. Edited footage (before surgery, after surgery before and after rescue anal-Santos Azerêdo^{3‡}, Felipe Garcia Telles^{1‡}, Pedro Henrique Esteves Trindade^{1‡} gesia, and 24 hours postoperatively) was analysed twice (one month apart) by one observer who was present during video-recording (in-person researcher) and three blinded observers. Statistical analysis was performed using R software and differences were considered significant when p<0.05. Intra and inter-observer agreement, based on intra-class correlation coefficient, was good or very good between most observers (>0.60), except between observers 1 and 3 (moderate agreement 0.57). The scale was unidimensional according to principal component analysis. The scale showed acceptable item-total Spearman correlation, excellent predictive and concurrent criterion validity (Spearman correlation \geq 0.85 between the proposed scale *versus* visual analogue, numerical rating, and simple descriptive scales), internal consistency (Cronbach's α coefficient >0.80 for all items), responsiveness (the pain scores of all items of the scale increased after castration and decreased after intervention analgesia according to Friedman test), and specificity (> 95%). Sensitivity was good or excellent for most of the items. The optimal cut-off point for rescue analgesia was \geq 6 of 18. Discriminatory ability was excellent for all observers according to the area under the curve (>0.95). The proposed scale is a reliable and valid instrument and may be used

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scale del dolore composite





Item	Score/criterion	Links to videos
Posture	(0) normal (any position, apparent comfort, relaxed muscles)	https://youtu.be/- loODGUwmS0
	(1) changes posture, with discomfort	https://youtu.be/V5zEiuJnF_g
	(2) changes posture, with discomfort, and protects the affected area	https://youtu.be/ PAZplCKxuhk
	(3) quiet, tense, and back arched	https://youtu.be/qubgsQeoQ- 8
Interaction and interest in the surroundings	(0) interacts with other animals; interested in the surroundings	https://youtu.be/ OwbrMRogO-I
	(1) only interacts if stimulated by other animals; interested in the surroundings.	https://youtu.be/IPdIeVaeDlY
	(2) occasionally moves away from the other animals, but accepts approaches; shows little interest in the surroundings	https://youtu.be/ kQ0gZ4CF5Zk
	(3) moves or runs away from other animals and does not allow approaches; disinterested in the surroundings	https://youtu.be/ ZrHZZlLk7Q4
Activity	(0) moves normally	https://youtu.be/3_ Rt3MT1pHE
	(1) moves with less frequency	https://youtu.be/lJDfz7KqApY
	(2) moves constantly, restless	https://youtu.be/ cfET4CN4g0w
	(3) reluctant to move or does not move	https://youtu.be/X7_ uDln8ih0b

Table 3. The UNESP-Botucatu composite pain scale for assessing postoperative pain in pigs.

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Interaction: 3 - Moves or runs away from other animals; does not allow approaches; www.animalpain.com.br disinterested in the surroundings

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Unesp Botucatu pig pain scale ARAUJO AL & LUNA SPL







Activity:3 - Reluctant to move or does not move www.animalpain.com.br

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Appetite	(0) normorexia	https://youtu.be/ HWymAEgtaO4		
	(1) hyperexia	https://youtu.be/QJ4z- TqDnjw		
	(2) hyporexia	https://youtu.be/SNgFH5Yt- 1A		
	(3) anorexia	https://youtu.be/ pYWA1VwSHYo		
Attention to the affected area	A. elevates pelvic limb or alternates the support of the pelvic limb	https://youtu.be/ndrx0h_nc-Y		
	B. scratches or rubs the painful area	https://youtu.be/ qVkDWKdTjEk		
	C. moves and/or runs away and/or jumps after injury of the affected area	https://youtu.be/RV0c3bIFfdc		
	D. sits with difficulty	https://youtu.be/ Qq0e1CbRQYU		
	(0) all the above behaviours are absent			
	(1) presence of one of the above behaviours			
	(2) presence of two of the above behaviours			
	(3) presence of three or all the above behaviours			
Miscellaneous behaviours	A. wags tail continuously and intensely	https://youtu.be/ cfrD0bN5BK4		
	B. bites the bars or objects	https://youtu.be/ xyw9O14h9dg		
	C. the head is below the line of the spinal column.	https://youtu.be/ qKQRqY0hCY4		
	D. presents difficulty in overcoming obstacles (example: other animal)	https://youtu.be/ 6ucHv8245N4		
	(0) all the above behaviours are absent			
	(1) presence of one of the above behaviours			
	(2) presence of two of the above behaviours			
	(3) presence of three or all the above behaviours			

Complete play list: https://www.youtube.com/watch?v=-loODGUwmS0&list=PLTDt73d-ilJMHnzJdkzlA8h8Fl2iMeTSR

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- perdita appetito, cessazione della ruminazione
- aumento del movimento, dello stato di ansia
- digrignano i denti, cambiamenti frequenti della postura e appaiono agitate • inarcamento schiena, estensione del collo
- vocalizzazioni



Segni Clinici Ovini e Caprini



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scala composita pecora

Validation of the Unesp-Botucatu composite scale to assess acute postoperative abdominal pain in sheep (USAPS)

6

Nuno Emanuel Oliveira Figueiredo Silva^{1®}, Pedro Henrique Esteves Trindade^{1®}, Alice Rodrigues Oliveira^{1‡}, Marilda Onghero Taffarel^{2‡}, Maria Alice Pires Moreira^{3‡}, Renan Denadai^{1‡}, Paula Barreto Rocha^{1‡}, Stelio Pacca Loureiro Luna^{1®}*

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A scale with robust statistical validation is essential to diagnose pain and improve decision making for analgesia. This blind, randomised, prospective and opportunist study aimed to develop an ethogram to evaluate behaviour and validate a scale to assess acute ovine postoperative pain. Elective laparoscopy was performed in 48 healthy sheep, filmed at one preoperative and three postoperative moments, before and after rescue analgesia and 24 hours after. The videos were randomised and assessed twice by four evaluators, with a one-month interval between evaluations. Statistical analysis was performed using R software and differences were considered significant when p < 0.05. Based on the multiple association, a unidimensional scale was adopted. The intra- and inter-observer reliability ranged from moderate to very good (intraclass correlation coefficient \geq 0.53). The scale presented Spearman correlations > 0.80 with the numerical, simple descriptive, and visual analogue scales, and a correlation of 0.48 with the facial expression scale. According to the mixed linear model, the scale was responsive, due to the increase and decrease in pain scores of all items after surgery and analgesic intervention, respectively. All items on the scale demonstrated an acceptable Spearman item-total correlation (0.56–0.76), except for appetite (0.25). The internal consistency was excellent (Cronbach's $\alpha = 0.81$) and all items presented specificity > 0.72 and sensitivity between 0.61–0.90, except for appetite. According to the Youden index, the cut-off point was \geq 4 out of 12, with a diagnostic uncertainty zone of 4 to 5. The area under the curve > 0.95 demonstrated the excellent discriminatory capacity of the instrument. In conclusion, the Unesp-Botucatu pain scale in sheep submitted to laparoscopy is valid, reliable, specific, sensitive, with excellent internal consistency, accuracy, discriminatory capacity, and a defined cut-off point.



Item	Subitem (descriptors)	Score	Links to videos
Interaction	Active, attentive to the environment, interacts and/or follows other animals	0	https://www.youtube.com/watch?v=4fOJWD-uNbg&t=9s
	Apathetic: may remain close to other animals, but interacts little	1	https://www.youtube.com/watch?v=EEyMC_VIMpk
	Very apathetic: isolated or not interacting with other animals, not interested in the environment	2	https://www.youtube.com/watch?v=5NsthhKoEP4
Locomotion	Moves about freely, without altered locomotion; when stopped, the pelvic limbs are parallel to the thoracic limbs	0	https://www.youtube.com/watch?v=W0Hw2Ibqbyk
	Moves about with restriction and/or short steps and/or pauses and/or lameness; when stopped, the thoracic or pelvic limbs may be more open and further back than normal	1	https://www.youtube.com/watch?v=i8FxBj-yQhw
	Difficulty and/or reluctant to get up and/or not moving and/or walking abnormally and/or limping; may lean against a surface	2	https://www.youtube.com/watch?v=dPdT9VMJTi0
Head	Head above the withers or eating	0	https://www.youtube.com/watch?v=W8mi15I1dr8
Position	Head at the height of the withers	1	https://www.youtube.com/watch?v=8xSUmoXaiZY
	Head below the withers (except when eating)	2	https://www.youtube.com/watch?v=YRxpWSTsqpw
Posture	Arched back		https://www.youtube.com/watch?v=gloa-38gTW8
	Extends the head and neck		https://www.youtube.com/watch?v=rNh_aFePKAE
	Lying down with head resting on the ground or close to the ground		https://www.youtube.com/watch?v=LT6BJzhZO9E
	Moves the tail quickly (except when breastfeeding) and repeatedly and/or keeps the tail straight (except to defecate/urinate)		https://www.youtube.com/watch?v=91RbQMsa8Mg
	Absence of these behaviours	0	
	Presence of one of the related behaviours	1	
	Presence of two or more of the related behaviours	2	
Activity	Moves normally	0	https://www.youtube.com/watch?v=dDx9FesiA2M
	Restless, moves more than normal or lies down and gets up frequently	1	https://www.youtube.com/watch?v=3MjccV2yV74
	Moves less frequently or only when stimulated using a stick or does not move	2	https://www.youtube.com/watch?v=EvLDBJo93jo
Appetite	Normorexia and/or rumination present	0	https://www.youtube.com/watch?v=no1VeiFglUE
	Hyporexia	1	https://www.youtube.com/watch?v=aIEY1UkqQ-k
	Anorexia	2	https://www.youtube.com/watch?v=YV40N-OHuNI

 Table 3. Final validated Unesp-Botucatu sheep acute composite pain scale (USAPS).

Complete playlist: https://www.youtube.com/watch?v=4fOJWD-uNbg&list=PLTDt73d-ilJNkqldoGmxqMEwc9WzJN0MF

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testa abbassata: punteggio 2

Pain in sheep

Head position 2

Nuno Silva & Stelio Luna



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segni postura: schiena inarcata

Posture A

Nuno Silva & Stelio Luna



Botucatu - SP - Brazil

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sengi postura: collo esteso

Pain in sheep

Postura B

Nuno Silva & Stelio Luna



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- perdita appetito, cessazione della ruminazione
- aumento del movimento, dello stato di ansia
- riduzione del movimento
- arti sotto di se
- inarcamento schiena
- vocalizzazioni

Segni Clinici Bovini



RESEARCH ARTICLE



Open Access

Validation of the UNESP-Botucatu unidimensional composite pain scale for assessing postoperative pain in cattle

Flávia Augusta de Oliveira^{1†}, Stelio Pacca Loureiro Luna^{2*†}, Jackson Barros do Amaral³, Karoline Alves Rodrigues², Aline Cristina Sant'Anna⁴, Milena Daolio² and Juliana Tabarelli Brondani²

Abstract

Background: The recognition and measurement of pain in cattle are important in determining the necessity for and efficacy of analgesic intervention. The aim of this study was to record behaviour and determine the validity and reliability of an instrument to assess acute pain in 40 cattle subjected to orchiectomy after sedation with xylazine and local anaesthesia. The animals were filmed before and after orchiectomy to record behaviour. The pain scale was based on previous studies, on a pilot study and on analysis of the camera footage. Three blinded observers and a local observer assessed the edited films obtained during the preoperative and postoperative periods, before and after rescue analgesia and 24 hours after surgery. Re-evaluation was performed one month after the first analysis. Criterion validity (agreement) and item-total correlation using Spearman's coefficient were employed to refine the scale. Based on factor analysis, a unidimensional scale was adopted.

Results: The internal consistency of the data was excellent after refinement (Cronbach's α coefficient = 0.866). There was a high correlation (p < 0.001) between the proposed scale and the visual analogue, simple descriptive and numerical rating scales. The construct validity and responsiveness were confirmed by the increase and decrease in pain scores after surgery and rescue analgesia, respectively (p < 0.001). Inter- and intra-observer reliability ranged from moderate to very good. The optimal cut-off point for rescue analgesia was > 4, and analysis of the area under the curve (AUC = 0.963) showed excellent discriminatory ability.

Conclusion: The UNESP-Botucatu unidimensional pain scale for assessing acute postoperative pain in cattle is a valid, reliable and responsive instrument with excellent internal consistency and discriminatory ability. The cut-off point for rescue analgesia provides an additional tool for guiding analgesic therapy.

Keywords: Cattle, Castration, Orchiectomy, Reliability, Responsiveness, Validity

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Table 6 UNESP-Botucatu unidimensional pain scale for acute postoperative pain assessment in cattle

ltem	Score/Criterion
Locomotion	• (0) Walking with n
	 (1) Walking with re
	 (2) Reluctant to sta
Interactive behaviour	 (0) Active; attentio when near other an
	 (1) Apathetic: may
	 (2) Apathetic: may react to tactile, visua
Activity	 (0) Moves normally
	 (1) Restless, moves
	 (2) Moves less frec
Appetite	• (0) Normorexia and
	 (1) Hyporexia.
	 (2) Anorexia.
Miscellaneous behaviours	 Wagging the tail a
	 Licking the surgica
	 Moves and arches
	 Kicking/foot stamp
	 Hind limbs extend
	 Head below the line
	 Lying down in ver
	 Lying down with t
	 Extends the neck a
	(0) All of the above
	(1) Presence of 1 of
	(2) Procence of 2 or

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no obviously abnormal gait.

estriction, may be with hunched back and/or short steps.

and up, standing up with difficulty or not walking.

on to tactile and/or visual and/or audible environmental stimuli; nimals, can interact with and/or accompany the group.

[,] remain close to other animals, but interacts little when stimulated.

¹ be isolated or may not accompany the other animals; does not al and/or audible environmental stimuli.

У.

more than normal or lies down and stands up with frequency.

quently in the pasture or only when stimulated.

d/or rumination.

abruptly and repeatedly.

al wound.

the back when in standing posture.

ping.

ded caudally when in standing posture.

ine of spinal column.

ntral recumbency with full or partial extension of one or both hind limbs.

the head on/close to the ground.

and body forward when lying in ventral recumbency.

described behaviours are absent.

^t the behaviours described above.

(2) Presence of 2 or more of the behaviours described above.





Figure 1 Characteristic signs of pain in cattle after orchiectomy. A - Head below the line of spinal column; **B** - Hind limbs extended caudally when in standing posture; **C** - Moves and arches the back when in standing; **D** - Kicking/foot stamping; **E** - Licking the surgical wound; **F** - Lying down in ventral recumbency with full or partial extension of one or both hind limbs.

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Locomozione: punteggio 2



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- perdita appetito
- sudorazione
- movimenti della testa
- lambimento labbra e fianco
- guardarsi il fianco
- raspare, rotolarsi

Segni Clinici Equini



scale composite equini

TABLE 1: The applied equine CPS adapted from Gleerup and Lindegaard (2016). Eacl each item is combined to obtain the CPS score

Type of measurement	Score 0-4					
	0	1	2	3	4	
Pain face	No pain face	Pain face occasionally present	Pain face present	Intense pain face		
Gross pain behaviour	None		Occasional	Often	Continuous	
Activity levels	Exploring, attention to surroundings or resting	No movement		Restless	Depressed	
Location in stable	At the door	Standing in the middle facing the door	Standing in the middle facing the sides	Standing in the middle facing the back or at the back		
Posture	Normal posture and weightbearing	Foot intermittent off the ground/ occasional weight shift	Pinched/tucked up	Continuously taking foot off ground and trying to replace it	No weightbearing/abnormal weight distribution	
Head position	Foraging or high	Level of withers	Below withers			
Attention to area	Does not pay attention to painful area		Brief Attention to painful area		Continuous attention to painful area	
Interaction	Looks at observer and moves towards observer	Looks at observer but does not move	Does not look at observer or moves away	Does not move, not reacting/ introverted		
Response to food	Takes food with no hesitation	Takes food with hesitation	Looks at food	No response to food		
Breathing rate (breaths/min)	<20		20+		40+	
Heart rate (beats/min)	<40	40–43	44–47	48–52	52+	

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TABLE 1: The applied equine CPS adapted from Gleerup and Lindegaard (2016). Each measured item has a simple descriptive scale that is weighted numerically, and the score for



scale composite equini

RESEARCH ARTICLE

Refinement and partial validation of the UNESP-Botucatu multidimensional composite pain scale for assessing postoperative pain in horses

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specificity, relevance and criterion validity		
Variable	Criteria	
Positioning in the stall	The horse	
	The horse observing	
	The horse	
	The horse look intere	
Locomotion	The horse	
	The horse	
	The horse	
Locomotion when led by the evaluator	The horse	
	The horse	
	The horse	
Response to palpation of the painful area (approximately 3 cm besides the wound)	No respor response (
	Mild react	
	Violent rea	

Table 4 Refined acute pain scale in horses submitted to castration after the refinement of the data based on the specificity, relevance and criterion validity

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	Score
's head is at the outside door	0
is inside the stall, but looking at the outside door, the environment	1
is eating	0
is not close to the outside stall door and does not ested in the environment	2
moves freely alone	0
does not move, or is reluctant to move	1
is agitated, restless	2
moves freely when led	0
does not move, or is reluctant to move when led	1
is agitated, restless	2
nse or change in relation to pre-procedure palpation of the surgical wound	0
ion to palpation of the surgical wound	1
action to palpation of the surgical wound	2



Looking at the flank	The ho
	The ho
Kicking at the abdomen	The ho
	The ho
Lifting hind limbs	No lifti
	Lifting
	Lifting
Head movement	Head s
	Lateral
	Lateral
Pawing on the floor (fore limbs)	Quietly
	Pawing
Heart rate (compared to initial values)	25-50%
	>50%

orse does not look at the flank orse looks at the flank orse does not kick the abdomen orse kicks at the abdomen ing of hind limbs hind limbs hind limbs and extending the head straight ahead most of the time and/or vertical occasional head movements and/or vertical continuous head movements y standing, no pawing g % increase increase





State	Date		
Veterinary Medical Center Equine Comfort Asses This scale is designed to be used in the cor If you do not believe the pain scoring criter in the comments section below.	ssment Scale ntext of the clinical presentation of each animal ia to be accurate for this patient, please explain		
n Score	Behavior	Clinical Assessment	Postural Features
	 Responds with interest to gate opening, approach by observer Takes care in movements around people Head above withers Attentive Moving freely, calmly Resting comfortably 	 □ HR: (usually ≤ 40 bpm) □ Eyes: relaxed, normally responsive □ Normal muscle tension □ No focal areas of heat □ Palpation not aversive 	 No lameness perceptible, bear weight equally Moves with ease of stride
	 Head at or above withers Facing forward and watching Performs normal behaviors less frequently than expected Responds with quiet interest to gate opening, approach by observer Takes care in movements around people 	 □ HR: (may be ≤ 40 bpm) □ Mild muscle tension □ Mild focal areas of heat □ Slightly steps, leans or pulls away from palpation, +/- muscle twitching 	 Lameness difficult to observe, inconsistently apparent Mild injury or stiffness in movement
	 Head level with withers Moving slowly about with bedding undisturbed Mild but more frequent restlessness Responds to approach Less enthusiastic, less interested, less interactive Less careful about movements around people 	 □ HR: (may be ≥ 48 bpm) □ Tachypnea +/- RR: □ Moderate muscle tension □ Increasing areas of heat □ Palpation more aversive 	 Lameness apparent only unde certain circumstances, favo leg(s) occasionally Obvious stiffness in movement
	 Head level or below withers May face back or corner of stall More vigorous signs of restlessness Eyes distracted, far away, weary Minimally reacts to interaction Stands in one position Beginning to become internalized Less careful about movements around people 	 HR: (may be ≥ 60 bpm) Tachypnea +/- RR: Sweating Severe muscle tension Widespread areas of heat Vigorously aversive response to palpation 	 Moderate lameness, able to be weight but clearly favors on or more limbs Obvious discomfort, weight shifting Arched back Very stiff movements Abnormal standing posture
	 Head often below withers Stands in corner or faces wall Ears back, eyes weary Frequent signs of severe agitation Extremely uncomfortable, panicky OR Extremely internalized/withdrawn Unwilling to rise Careless about movements around people 	 HR: (may be ≥ 70 bpm) Tachypnea +/- RR: Profuse sweating Extreme muscle tension/rigidity +/- fasciculation Widespread areas of heat Extremely aversive response to palpation, possibly aggressive 	 Unable or unwilling to bear weight May not be able to move Constant shifting of weight Very abnormal standing postur OR In sternal or lateral recumbence
Current Pain Treatment(s):		

A

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Equine Comfort Assessment Scale List of Behavioral Descriptors

General

- Pawing
- Stamping
- Tail switching without insects or other stimulus
- Circling in stall
- Flaring nostrils frequently
- Frequent head shaking
- without obvious reason
 Repetitive behaviors: Examples can include
- rubbing, pacing
 Getting up and laying down frequently
- Rocking to and fro on limbs
- Grunting
- Difficult to get settled down

- Musculoskeletal-specific
- Frequent weight shifting
- Rocking to and fro on limbs
 Stemping
- Stamping
 "Grimacing" (associated
- with laminitis)
- Abdomen-specific
- Pawing
- Flank watching
- Flank biting
 Teeth grinding
- Kicking at abdomen
- Rolling on ground
- Grunting
- Thrashing

Palpation Reactions

- Aversive reaction to palpation may manifest as:
- Splinting
- Muscle twitching
- Hyperalgesia/Allodynia
- Biting
- Striking
- Kicking
- ing



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Grazie per l'attenzione

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