

Aspirin (Acetylsalicylic acid)

(Aspirin BP* and component of many others) P

- **Client Information Leaflet:** [Aspirin](#)
- **Formulations**

Oral: 75 mg, 300 mg tablets.

- **Action**

Produces irreversible inhibition of cyclo-oxygenase (COX-1, prostaglandin synthetase) by acetylation, thereby preventing the production of both prostaglandins and thromboxanes from membrane phospholipids.

- **Use**

- Prevention of arterial thromboembolism. Recent evidence suggests that clopidogrel may be superior to aspirin in cats for prevention of recurrence of cardiogenic thromboembolic events if used as a single agent.
- Can be used to control mild to moderate pain, although NSAIDs that are more selective for the COX-2 enzyme have a better safety profile; not an NSAID of choice for analgesia in dogs or cats.
- In one study, the use of ultra low dose aspirin (0.5 mg/kg q12h) may have improved short-term and long-term survival in dogs with immune-mediated haemolytic anaemia (IMHA) when combined with glucocorticoid and azathioprine therapy.

Administration of aspirin to animals with renal disease must be carefully evaluated. It is advisable to stop aspirin before surgery (at least 2 weeks) to allow recovery of normal platelet function and prevent excessive bleeding.

- **DOSES**

- **Dogs** Doses are anecdotal and the ideal doses are unknown.
 - Reduction of platelet aggregation (e.g. IMHA): 0.5–1 mg/kg p.o. q24h or 0.5 mg/kg p.o. q12h.
 - Analgesia, pyrexia, inflammation: 10–20 mg/kg p.o. q12h; the safety and efficacy of this dose has not been established.
- **Cats** Reduction of platelet aggregation: 18.75 mg/cat p.o. 3 days a week (low dose) or 75 mg/cat p.o. 3 days a week (high dose); this dose may be associated with a higher risk of GI side effects. Some authors suggest a very low dose (0.5 mg/kg p.o. q24h) to inhibit platelet COX without preventing the beneficial effects of prostacyclin production. The safety and efficacy of these doses have not been evaluated in clinical or experimental studies.