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Etofenamate and anastomoses of the colon in rats

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Abstract: Aim: Non-steroidal anti-inflammatory drugs have been used for many years due to their analgesic and anti-inflammatory properties. They have also been used for postoperative analgesia. We aimed to study the effects of etofenamate, a non-steroidal anti-inflammatory drug, on the healing of colonic anastomoses in rats. Materials and methods: Sprague-Dawley rats were used in this study. Resection and anastomosis were performed on the distal colon. The etofenamate group received 30 mg/kg etofenamate and the control group received 0.1 mL of 0.9% NaCl intramuscularly daily. Bursting pressures of anastomoses and hydroxyproline levels of perianastomotic tissues were determined on days 3 and 7. Results: Four deaths were observed in each group. Mean bursting pressures (etofenamate group, day 3: 50.50 ± 7.27 mmHg, day 7: 187.37 ± 12.20 mmHg; control group, day 3: 55.13 ± 5.94 mmHg, day 7: 202.12 ± 18.64 mmHg) and mean hydroxyproline levels (etofenamate group, day 3: 2.18 ± 0.17 µg/mg tissue, day 7: 4.34 ± 0.79 µg/mg tissue; control group, day 3: 2.20 ± 0.12 µg/mg tissue, day 7: 5.07 ± 0.65 µg/mg tissue) in the etofenamate group were lower than those in the control group on both days 3 and 7. This finding was not statistically significant. Conclusion: According to our findings, etofenamate treatment during the postoperative period does not alter the healing of colonic anastomoses in rats.

Key words: Non-steroidal anti-inflammatory drugs, etofenamate, colon, anastomosis, healing, rat

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