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*Location:* Queen's University

# **Responsibility:** Principal Investigators, Research Staff, Veterinary Staff

Purpose:The purpose of this Standard Operating Procedure (SOP) is to describe<br/>the method of oral gavage in rats.

1. Introduction and Definitions: Gavage is used to administer precise amounts of liquid diet, drugs or test compounds by mouth directly to the stomach of the mice. To minimize stress to the animal, the person performing gavage must be skilled before starting the study.

The choice of whether to use a rigid or flexible gavage needle or to use a straight or curved gavage needle is according to operator preference and the needs of the study. Gavage needles are available in disposable plastic or reusable stainless steel. All gavage needles have a ball or pear-shaped smooth rounded tip to prevent injury to the esophagus and other tissues.

## Abbreviations: Animal Care Services ACS, Principal Investigator PI, subcutaneous SC, intravenous IV, intraperitoneal IP, intramuscular IM, per os PO, per rectum PR

### 2. Materials:

- Appropriate feeding needles (also known as gavage needles or feeding tubes)
- 1 mL sterile syringe
- Weight scale
- Marker



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### **Rat Gavage Needle Sizes:**

Weight range (g)	Gauge	Length (inches)	Ball diameter (mm)	Shape
50-75g	20	1", 1 ½"	2 ¼ mm	Straight, curved
75-100g	18	1", 1 ½"	2 ¼ mm	Straight, curved
100-200g	18	2", 3"	2 ¼ mm	Straight, curved
200-300g	16	2", 3"	3 mm	Straight, curved
<300g	16	3", 4"	3 mm	Straight, curved

## 3. Procedures:

- Weigh the animal and determine the maximum volume that can be administered. The maximum volume will depend on the weight of the animal. The volume should not exceed 1% (10ml/kg) of the animal's body weight (e.g. 500g = 5ml).
- Set up work surface with the above materials.
- With the feeding needle in place, draw the desired amount of liquid compound into the syringe.
- Identify the rat and pick up. Depending on the size, pick it up with one hand and restrain the rat against your body using the "v-hold" ensuring that its head and neck are stabilized. Smaller animals can be held using standard scruff technique. Take care that the rat is not being restrained so tightly that its breathing is impaired.
- Prior to performing the procedure, measure the distance from the oral cavity to the tip of the xyphoid process. This is where the stomach lies. Mark this distance on the feeding needle with the marker. Do not advance the needle further than this point to avoid perforation of the stomach. When gavaging, the tip of the needle is to be positioned just below the stomach's cardiac sphincter.
- With the rat's head moderately extended in vertical alignment, gently insert the ball of the needle into the lateral side of the mouth, behind the teeth.
- The needle is then advanced gently along the upper palate towards the back of the throat. Slight pivoting of curved needles will help feed the needle past the epiglottis and fall into its correct midline placement (esophagus).
- The rat may exhibit a swallowing reflex at this point.
- Once the esophagus is reached, gravity should be used to help guide the needle as it slips down into the esophageal tract.
- Forcing the needle can cause damage to the esophageal wall or force the needle into the trachea. If the animal is struggling, it may not be inserted properly and



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should be carefully removed. Allow the animal to rest before trying the procedure again. No more than three attempts are allowed.

- Once in position, inject the fluid slowly to prevent it from coming back up into the oral cavity or rupturing the esophagus. If the animal starts to cough or choke, stop injecting (do not attempt again for a minimum of 24 hours). Remove the needle and allow the animal to recover in its cage. Monitor closely for the next hour, if there is any respiratory distress euthanize the animal (see section 5 below).
- Once administered, remove the needle gently, following the same angle as insertion.
- Place animal back in cage and monitor for 10 minutes.
- Frequency of gavage to be determined by the UACC.





Photo Credit: UBC Animal Care Guidelines



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# 4. Complications

Improper gavage technique can lead to several complications, acute or delayed. These may include:

- Esophagitis (inflammation of the esophagus)
- Perforation of the esophagus, trachea or lungs
- Damage to the cardiac sphincter (upper stomach sphincter)
- Insertion of needle and solution into the lungs/inadvertent tracheal administration
- Lung perforation
- Damage to the oral cavity
- Aspiration of solution into the lungs from regurgitation (needle is too short)
- Traumatic injuries related to improper restraint
- Gastric rupture
- Esophageal impaction
- Aspiration pneumonia

# 5. Clinical Signs of Complications

Requiring close monitoring and possible euthanasia if not resolved, or at the recommendation of the Veterinarian team:

- Respiratory distress/dyspnea (increased respiratory rate and effort/rapid abdominal breathing)
- Blood on the needle
- "Noisy" breathing or clicking when breathing
- Cyanosis (pale or blue extremities)
- Hunched appearance
- Squinted eyes
- Piloerection
- Blood at nose or mouth
- Swelling of neck or under front legs (due to air or fluid escaping from damaged esophagus)
- Loss of weight due to inability to swallow



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### **References:**

- 1) <u>https://www.kentscientific.com/products/productView.asp?productID=6224&Mouse\_Rat=Surgical&Products=Feeding+Needles</u>
- 2) https://iacuc.wsu.edu/documents/2016/06/wsu\_sop\_10.pdf/
- 3) Vol 55, No 6 Journal of the American Association for Laboratory Animal Science November 2016, Carissa P Jones,\* Kelli L Boyd, and Jeanne M Wallace, Evaluation of Mice Undergoing Serial Oral Gavage While Awake or Anesthetized

#### SOP Revision History:

Date	New Version
July 11 <sup>th</sup> , 2013	SOP Created
February 28 <sup>th</sup> , 2019	Triennial Review
February 28 <sup>th</sup> , 2022	Triennial Review
June 10 <sup>th</sup> , 2024	Triennial Review – Update format, update wording, check links,