

The Cutting Edge

Annapolis

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News & Notes

- Dr. Keats spoke at the annual **MVMA** conference this past May on Advances in Surgical Management in Canine Elbow Dysplasia
- Dr. Weeren was honored to join Dr. Joe Bojrab and Dr. Don Waldron in teaching the "Clinical Procedures Wet Lab" & was the lead instructor for the Bandaging Wet lab at the **CVC East Conference** held in Baltimore this past April.
- Dr. Keats spoke on the treatment of laryngeal paralysis and hiatal hernias in dogs at the **Society for Veterinary Soft Tissue Surgery's 8th Annual Meeting** held in Boston earlier this month.

Cruciate Decision Making

What influences your technique recommendation for CCL repair?

Currently at CVSS, we offer several different repair techniques for treating a ruptured cranial cruciate ligament. As with any joint repair technique, none of these surgeries are perfect; there are advantages and disadvantages for each patient. Factors we consider when evaluating a patient for cruciate repair include size/breed, age of the patient, desired activity level- working dogs, field trial dogs, hunters, etc., body condition, conformation, concurrent orthopedic issues, degree of existing osteoarthritis in the affected and other joints, previous surgery or surgeries, other health problems, recovery environment, owner compliance, and economic considerations.

By consensus, our surgeons feel that we get consistently better results with Tibial Tuberosity Advancement (TTA) and Tibial Plateau Leveling Osteotomy (TPLO) than with the various extracapsular repairs—an opinion shared by most ACVS surgeons. In general, this difference in results is typically less pronounced in smaller patients (5 to 15 lbs) and becomes quite dramatic in the large and giant breeds. For most dogs, our recommendation would be TTA or TPLO, excluding cost considerations. Obviously it is up to the owner to factor this into his or her decision-making.

Why would you choose TTA over TPLO, and vice versa?

When we discuss the procedures with the owner, the single most important consideration, is that we must "make the surgery fit the dog, not make the dog fit the surgery". Our experience with thousands of TPLO's performed at CVSS over the past 12 years has been very favorable. In general, dogs with TPLO have a faster, more complete recovery, and less arthritic progression than dogs with typical static stabilization techniques. This difference in outcome is particularly evident as the size and expected activity level of the patient increase.

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Board certified surgical specialists providing the very latest in surgical care including:

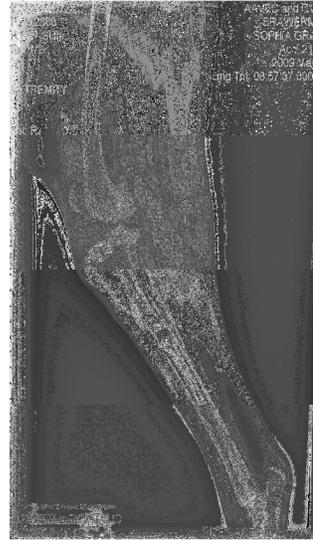
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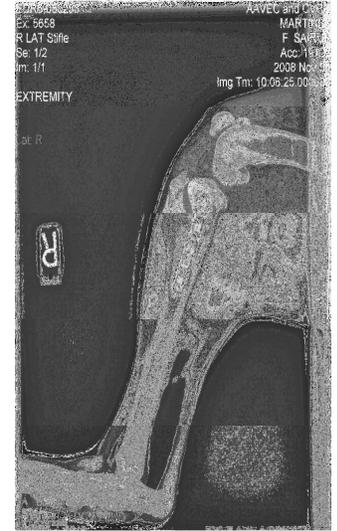
In the past 1.5 years, we have performed hundreds of TTA's, and have been impressed with the results. The TTA appears to yield similar results to the TPLO in allowing for a more complete recovery and continued high-level activity. This observation is consistent with the experiences observed in over 35,000 cases performed worldwide.

The main advantage of TTA over TPLO is that return to off-leash activity is often quicker due to the healing characteristics of the surgery, and the dogs seem to progress in comfort and weight-bearing slightly more quickly. The main disadvantage is that it is not as versatile a technique as TPLO. With TPLO, there are more degrees of freedom to correct concurrent abnormalities such as tibial torsion, varus or valgus, and patella luxation. Additionally, TPLO can be performed on almost any size dog (or cat), while the TTA implants do not currently allow us to adequately stabilize many giant breeds.

The incidence of serious complications for both procedures is very low, and the costs are identical. Therefore, we work with owners to decide on the best procedure for that individual dog, based on history, physical examination, and radiographic anatomy. If you have any questions regarding any of these procedures, or if you have a case you feel may benefit from this surgery, please feel free to call us and speak to one of our surgeons.



TTA



TPLO



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