

Do I have to bring my dog back to MedVet for a check up?

A 6 and 10-week postoperative reevaluation is required. If it is not convenient for you to return to MedVet, we ask that you have your veterinarian x-ray your dog 6 weeks after surgery and send the x-rays to us for evaluation.

Will arthritis develop over time?

Arthritis can be a cause of and/or a result of a torn CrCL. Arthritis will progress but surgical intervention is the best way to limit the progression of arthritis with time.

What happens if surgery is not performed?

- Permanent lameness
- Progressive severe arthritis
- Decreased activity level
- Chronic knee pain
- Diminished quality of life

Both of my dog's knees have torn CrCLs; can both be operated on at the same time?

Yes. This can actually cut recovery time in half and reduce the cost of two staged procedures.

Do the plate and screws need to be removed?

Once the bone has healed, the plate and screws are unnecessary. However, because the implants rarely cause problems routine removal is not recommended.

Can a TTA or TPLO be done on any size dog?

We typically do not perform the procedure on dogs weighing less than 25 pounds. There are no upper limitation on patient size. Many large breed dogs (>150 lbs) have been operated on with excellent success.

What are the chances this will happen to the opposite knee?

Approximately 20-40% of dogs will rupture the opposite CrCL in their lifetime.

How can I prevent CrCL injury in my dog?

The only factor you, as an owner, can control is body weight. Overweight dogs have a higher risk of CrCL injury.

Is a TTA or TPLO the only treatment available for my pet?

No, other surgical options do exist. Many combinations of factors are considered in technique selection including;

- Body weight
- Body size
- Age
- Current health status
- Pre-injury activity levels.

Our Mission

MedVet is committed to delivering the highest quality, most compassionate specialty and emergency veterinary care available, to enhancing the health and well being of our patients and providing support for our clients as well as their family veterinarians.

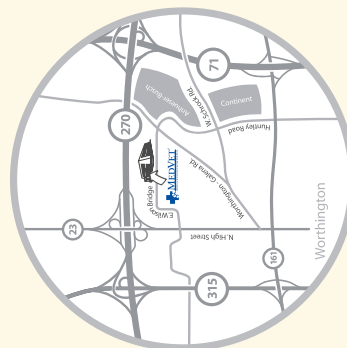
Our Values

TLC

Teamwork, Leadership and Compassion

Our Specialties

Anesthesiology	Neurology
Cardiology	Ophthalmology
Dentistry	Radiology
Dermatology	Radiation Oncology
Emergency Medicine	Rehabilitation
Internal Medicine	Surgery
Medical Oncology	



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Ruptured Cranial Cruciate Ligament Repair

Frequently Asked Questions



What is the Cranial Cruciate Ligament (CrCL) and what are the important points regarding its injury?

- The CrCL or anterior cruciate ligament (ACL) is one of four ligaments within the knee and is the most important joint stabilizer.
- It connects the femur (thigh bone) to the tibia (shin bone) and prevents the tibia from sliding forward during normal leg use.
- CrCL rupture is a common orthopedic injury and the most common source of knee problems in all sizes and breeds of dogs.
- CrCL injury occurs in the young and old, in athletic dogs and “couch potatoes” alike, and usually happens during normal activities.
- The ligament, once damaged, cannot heal itself.
- CrCL injury produces knee pain that causes lameness. Only surgery can restore proper limb stability and function.

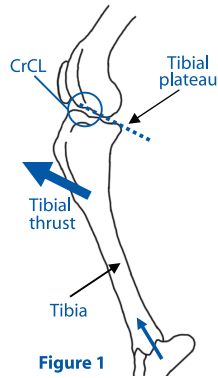


Figure 1

What are the preferred ways to “fix” a torn CrCL?

Two popular and effective surgical procedures that provide stability to the canine knee as a result of a torn CrCL include Tibial Plateau Leveling Osteotomy (TPLO) and Tibial Tuberosity Advancement (TTA) surgery.

How do the TPLO and TTA work?

Both surgeries work by eliminating tibial thrust (figure 1). Tibial thrust is the transmission of weight up the tibia (shin bone) and across the knee which causes the tibia to thrust forward relative to the femur (thigh bone).

- **TTA** works by advancing part of the tibia to a 90° degree angle with the tibial plateau. This allows the quadriceps (thigh) muscles to keep the knee balanced and stable even with a ruptured CrCL (figure 2).
- **TPLO** neutralizes tibia thrust by turning it into tibial compression. This produces a more level plateau that no longer allows thrust to occur (figure 3).

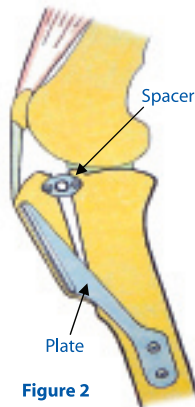


Figure 2

What is the success rate of these surgeries?

>90% of surgeries are successful in:

- Dramatic improvement in limb function
- Resolution of pain
- Returning to normal and/or near normal activity

What can I expect from surgery?

The goal of surgery is to return your pet to pain-free and improved knee function, including:

- Increase in muscle mass
- Improved knee range-of-motion
- Improved activity levels are observed in patients.

What decides whether a TTA or TPLO surgery is recommended?

Factors include:

- Patient's preoperative tibial plateau angle
- Tibia shape/size
- Patient size and age
- Degree of CrCL rupture

*Which surgery is considered best for your dog and why will be discussed in detail during the initial consultation.

What are the complications with these surgeries?

The complication rate for these procedures is low but infections can develop and when they do, usually resolve completely with proper treatment. Rare complications include bone cracks and implant failure. Anesthesia itself carries only a small risk of complications. At MedVet we have a staff anesthesiologist who oversees anesthesia in your pet.

Is surgery performed the day of my appointment?

No. Your dog must be evaluated before surgery. This entails:

- A complete medical history
- Physical examination
- Detailed discussion of the procedure.
- Preoperative bloodwork may also be performed depending on your dog's age and health.

How long will my pet be hospitalized?

Your dog will most often go home the day following surgery.

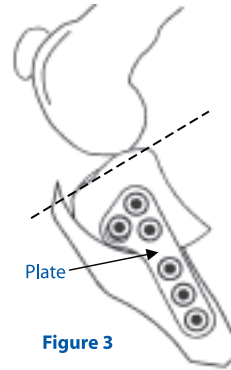


Figure 3

If my dog is on medication, should I stop giving this before surgery?

- Medications for health conditions such as diabetes or low thyroid function should not be stopped.
- Medications for knee pain can be continued up until the day of surgery.
- Oral steroids should ideally be stopped one week prior to surgery.

What are the costs involved?

The cost of a TTA or TPLO varies depending on your dog's size, age, weight, etc. There is no difference in price between a TPLO and TTA surgery.

What is the aftercare following surgery like?

The majority of postoperative care involves restriction of your dog's activity. For the first six weeks following surgery:

- Leash walks are progressively increased.
- No off-leash activities are allowed.
- Inside the house your pet should avoid flights of stairs and slippery floors.
- Absolutely no running, jumping or playing is allowed for the first 6 weeks after surgery.
- When your dog is not under your direct control, he/she should be kept confined to a small space.

Detailed instructions will be discussed at the time of your dog's discharge from MedVet.

Is postoperative physical rehabilitation important?

While the TTA or TPLO will make your dog's knee comfortable and functional again, proper postoperative rehabilitation is essential. Physical rehabilitation helps to return the leg back to pre-injury function. When your dog is discharged from MedVet some basic rehabilitation exercises will be illustrated for you. Please refer to the Veterinary Rehabilitation of Ohio brochure and visit www.vetrehabio.com for more details.

