HOME CARE INSTRUCTIONS: PATELLA LUXATION SURGERY

Your pet has been diagnosed with patella luxation. This means that the patella was able to pop out of its groove and slip to the side of the stifle, causing pain and lameness. In order to restore normal patella position:

- The injured support structures have been strengthened
- The attachment of the patella onto the tibia has been moved to allow the patella to track normally within the groove
- The groove was very shallow, allowing the patella to slide off easily, so it has been deepened
- Internal rotation of the tibia has been reduced by releasing muscular attachments

Healing should progress well over the next 8-12 weeks. Most dogs will be putting some weight on the leg within ten days post-surgery. There should be a progressive increase in weight-bearing over the following weeks. There is a chance of surgery failure, cruciate ligament rupture and/or meniscal injury occurring, which usually manifests as severe lameness. In order to reduce the chance of these complications, which may necessitate repeat surgery, please keep your pet strictly confined and quiet until the surgery heals.

Very occasionally a surgery wound will dehisce (break down) or become infected. Please be aware that if the wound dehisc or becomes infected after hours, care is available at emergency centres; however, you will be charged for this after hours care. After hours care for a wound dehiscence or infection can cost a lot more than the original procedure. To avoid incurring this expense, please care for your pet as directed and please return to see us any time during your pet’s recovery if you are at all concerned about the wound healing.

Re-examination

Re-examination is advised in 4 days to remove the dressing and examine the wound, but sooner if you are concerned. There is often some bruising and swelling around the surgery site, this is normal and should resolve uneventfully. Please make appointments for Cartrofen injections (1 injection once a week for 4 weeks, starting in about 10 days); at the last injection we will assess the degree of recovery and discuss the rehabilitation exercise program.

Medications

- Anti-inflammatory: _______________
  Label instructions on the packet should be followed.
- Analgesic patch (fentanyl). This will be removed at the 4 day recheck.
- Tramadol tablets - Label instructions on the packet should be followed.

Post-operative exercise

Strict rest (no free exercise allowed) for the next 6-8 weeks is necessary to allow healing of the fracture and stabilisation of the joint. This means your pet should be confined to a small room or run for the duration of this period. The only exercise allowed is short-duration (10 minutes maximum), slow walks on a leash for toileting purposes. This includes no jumping (including into and out of cars) and definitely no stairs! Please try to keep your pet on flat surfaces only, and preferably not on slippery surfaces e.g. tiles and polished floors. If this is unavoidable, then consider putting rugs down or non-slip matting (which can be purchased by the metre from hardware stores). An old towel can be rolled up and used as a hind-quarter sling by placing it underneath the abdomen. By
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Doing this you can provide support and security in the early post-operative period. After the recovery period, a progressively increasing lead exercise and hydrotherapy (or swimming) program is required to strengthen the muscles and improve joint mobility. During the rehabilitation period, daily food intake should be reduced by approximately one-third to prevent your pet putting on more weight while not exercising. This is VERY important for the long-term success of the surgery and to help reduce the strain placed on the other stifle. Free exercise off the lead is not advised until after the rehabilitation program has finished.

Physiotherapy
After the first 2 to 3 weeks postoperatively, physiotherapy in the form of passive range-of-motion exercises can be performed. Ideally, all joints of the affected limb should receive physiotherapy 2 to 3 times a day but you should concentrate mainly on the stifle joint if time is short. During each session, a minimum of 10 flexions and extensions should be performed on each joint. After flexion and extension of the individual joints, the entire limb should be cycled through its full, pain-free range-of-motion 10 times, as if your pet were riding a bicycle. It is very important never to force the joints or cause pain, but gently manoeuvre the limb through a range-of-motion that is well tolerated.

Longer-term follow-up and care
At around 5-6 weeks post-operatively, we will assess the degree of recovery. All going well, controlled exercise on a leash may begin at this time. Leash walks should be minimal at first (10-15 minutes twice daily), and then gradually increased after 8 weeks post-operatively. Sit-to-stand exercises should also begin around 6 weeks post-operatively. This can be achieved during leash walking when the patient is commanded to “sit” and just before assuming the sitting position, the command to “walk-on” is given. This routine is repeated 10 or more times every walk and has the effect of building the quadriceps muscle mass, which is very important in rehabilitation following stifle surgery. There should be no unsupervised exercise, and running and jumping should be avoided during the 12 week post-operative period. Between 8 and 12 weeks, exercise can be increased slowly to 30 to 40 minutes twice daily. Deep-water swimming for 10 to 15 minutes several times a week, if possible, is excellent therapy at this stage. This should be performed in a controlled situation e.g. The Canine Fitness Centre (www.caninefitnesscentre.com.au; 3385 6090; 583 Oakey Flat Rd Morayfield, 4506) or a swimming pool. Beaches can be used, however it is important to avoid uncontrolled activity, so keep your pet on a leash (preferably with a harness), and avoid times when there might be other dogs around. By 12 to 16 weeks, your pet should have returned to near normal activity. However, there is a large variation in how quickly individuals return to full function following stifle surgery. If there is not near normal activity by 12 to 16 weeks post-operatively, then please make an appointment for reassessment.

Prognosis
Your pet has a good chance of improvement in lameness. Most patients make an excellent recovery within three to six months of surgery. Osteoarthritis (OA) is likely to progress, regardless of treatment; this does not necessarily influence a satisfactory outcome. The progression of OA can be slowed by using nutraceuticals (e.g. Glyde®, 4Cyte®). It is most important not to
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allow your pet to become overweight and to maintain a reasonable level of fitness. If you have any questions or concerns, please don’t hesitate to contact us.

**Rehabilitation program**

While the surgery is important to alleviate pain and restore adequate function to your pet’s stifle, of more importance is the rehabilitation. Patients with little to no active rehabilitation invariably take much longer to return to function, or fail to return to full function. Here is a guide to what can be done to help return your pet to function as quickly as possible. There are also several excellent rehabilitation consultants and veterinary physiotherapists in South-East Queensland that can help with your pet’s recovery. If you would like more information, please ask.

**Week 1**

- For the first 48 hours, if your pet will tolerate it, please try to apply an icepack (gel ones are better as they don’t freeze solid, or you can use a bag of frozen peas) to the stifle for 10 minutes on/10 minutes off for 40 minutes every 4 hours
- Strict rest and confinement
- Short leash walks (10 min max) in backyard only for toileting purposes only
- NO running, jumping or stairs!
- Anti-inflammatory (eg Metacam®, Carprofen/Rimadyl®, Previcox®)
- Analgesic (eg. Tramadol tablets, Fentanyl patch)
- Should be toe touching the ground intermittently

**Week 2**

- DMOAA injection #1
- Strict rest and confinement

- Short leash walks (10min max) in backyard only for toileting purposes only
- Should be taking a little more weight on the leg, but mainly toe touching

- Week 3
- DMOAA injection #2
- Start physiotherapy
- Let your pet guide you as to duration and intensity
- This should be started gently and slowly, using the resistance in the leg as an indicator of comfort level, i.e. if you start to feel resistance or any vocalising, then that is the limit for that day. Use this a guide for the next day.
- Imagine your pet riding a bicycle; this is the movement you want to replicate.
- Try to put the whole leg through a full cycle between 20-30 repetitions 2-4 times daily
- Alternate backwards and forwards
- Short leash walks (5 min max) in backyard only for toileting purposes only
- Should be taking a little weight on the leg, may be 3 legged lame when walking outside

**Week 4**

- DMOAA injection #3
- Continue physiotherapy daily
- Should notice increase in range of motion and comfort levels
- Should be taking weight on the leg most of the time, but still noticeably lame

**Week 5**

- DMOAA injection #4 and review. Please make an appointment for this
- Continue physiotherapy daily
- Should notice increase in range of motion and comfort levels
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- Should be taking weight on the leg most of the time, with moderate lameness

Week 6
- If your pet had made a good recovery, then start sit to stand exercises to increase muscle mass of quadriceps and hamstrings:
  - Command your pet to sit
  - Just as your pet is about to put bottom on the ground, walk them forward a step or two
  - Repeat this several times over the course of the day (liver treats help!)  
  - Provided your pet is comfortable with this exercise and the lameness isn’t worsening, continue this exercise each day, and gradually increase the daily frequency

Week 7
- Continue physiotherapy and sit-stand exercises as often as possible each day.
- Provided your pets’ lameness has continued to improve, and your vet was happy with your pets’ progress at the last visit, you can start some CONTROLLED activity:
  - Hydrotherapy and/or swimming is the best form of controlled exercise, as it is supportive/buoyant and non-concussive on the knee joint
  - Alternatively, you can start short CONTROLLED leash walks. It is VERY important that this is performed under very controlled settings, as any uncontrolled activity may result in implant failure or prolonged recovery.
  - The easiest way to do this is provide an environment where there are no distractions or potential for interactions with dogs, cats, birds, possums etc., so definitely NOT at the dog park, or in other areas where these distractions may occur. The backyard or local park/oval at off-peak times would be best.
- Ensure your pet is on a leash AT ALL TIMES, and cannot get off the leash/collar. A head Halter or harness may provide more control.
- Start with some physiotherapy and sit-stand exercises at home to warm up, then go to a grassed area (backyard, oval) and ON A LEASH, start slow paced walking.
- Use your pets’ comfort levels as a guide to how far or fast to walk. Most dogs by this time should be able to cope with 5 to 10 minutes walking once to twice daily. Do so for a week, then gradually increase the duration by 5 minutes per week. If there is any noticeable increase in lameness, then decrease the duration to the previous level, and maintain that level for an extra week before increasing the duration.

Weeks 8-12
- Continue physiotherapy and sit-stand exercises as often as possible each day.
- Hydrotherapy/swimming
- CONTROLLED LEASH walking – increase duration by about 5 minutes once to twice daily.
- If at any stage the lameness worsens or you are concerned, please contact us.

Small Animal Surgery Consulting
smallanimalsurgery.com.au