Oral presentations

Revision strategies for persistent stifle lameness after tibial tuberosity advancement using the modified Maquet procedure (MMP)

Pádraig Egan, Russell Yeadon, Stephen Kalff, Joana Tabanez

Fitzpatrick Referrals, Surrey, UK

OBJECTIVES

To report the surgical management of patients with persistent lameness following tibial tuberosity advancement, using the modified Maquet procedure (MMP), for the management of cranial cruciate ligament rupture in dogs.

METHODS

Retrospective study of clinical records. Data collected included signalment, primary surgical technique, perceived cause of persistent lameness, revision surgical

technique, preoperative and postoperative radiographic findings, complications, owner assessment and veterinary assessment.

RESULTS

7 dogs, 8 stifles were included, with body weight ranging 8.7–65kg. All cases were initially operated elsewhere by MMP utilising a titanium foam wedge to achieve tibial tuberosity advancement and subsequently referred for assessment of persistent significant lameness. All stifles were considered clinically unstable, including on tibial compression test. Perceived cause of instability was under-advancement of the tibial tuberosity in 6/8 stifles and fracture of the tibial tuberosity in 2/8 stifles. 5/8 stifles underwent crescentic tibial plateau levelling osteotomy (TPLO) and 2/8 stifles underwent a cranial closing wedge osteotomy TPLO to achieve dynamic stifle stability. 1 stifle underwent arthrodesis as a salvage procedure. Complications included delayed osteotomy healing in 1/5 crescentic TPLO cases. 6/7 dogs returned to acceptable function. One dog that underwent arthrodesis and contralateral TPLO was euthanized due to poor function.

IMPACT/CLINICAL SIGNIFICANCE

Persistent instability is a putative cause of persistent lameness following MMP tibial tuberosity advancement. Surgical revision by TPLO, while technically challenging in this scenario, may be a potential revision strategy to improve limb function in this circumstance.

STATEMENT

No funding or declarations of interest to declare.

Elbow joint disease in dogs attending primary-care practices in the UK

Rebecca Hodge, Richard Meeson, David Brodbelt, David Church, Dan O'Neill

RVC, London, UK

OBJECTIVES

This study aimed to supplement the limited evidence-base for elbow joint disease (EJD) in dogs. Reported pain and restricted freedom to exercise give EJD substantial welfare importance.

METHODS

This retrospective cohort study used the VetCompass database of primary-care veterinary clinical data.

Candidate cases of EJD diagnosis during 2013 were identified using free-text searches of electronic patient records followed by manual verification of a random subset. Demographic and management data were extracted on confirmed cases.

RESULTS

- The study population was 455,557 dogs. Of 12,334 candidate cases, 2,888 were manually examined to confirm 628 cases. The overall EJD prevalence was 0.59% (95% CI: 0.57–0.61%)
- The most commonly affected breed was Labrador Retriever (31.4%). The most commonly affected Kennel Club breed group was Gundog (42.2%) and the least was Hound (2.2%)
- 64% of EJD was bilateral
- The most commonly reported clinical sign was lameness (58%)
- Distribution of ages at first diagnosis was bi-modal, with peaks at 1 year and 8 years. Of the 12.1% of cases diagnosed <1 year old, 56% were recorded with elbow dysplasia. Of the 28.7% of diagnoses in dogs >8 years, 80% had osteoarthritis
- Radiography assisted diagnosis in 53.2% cases. Diagnosis of 46.1% used clinical examination alone