Post Surgical Care of Patella Luxation and Cruciate Ligament Rupture Repair

Home patient care after orthopedic surgery is critical to the success of the surgery. Allowing your pet too much activity may alter the anticipated outcome of the surgery. Remember, a ruptured ligament is a severe orthopedic injury and although surgery is necessary to reduce future arthritis and minimize pain and healing time, the joint will never be “good as new.” If your pet has a luxating patella on the opposite leg, you should have this repaired in the near future to prevent the anterior cruciate ligament from rupturing in that leg.

The following instructions will be your guide to home care.

**Week 1:**
1. Provide pain management with NSAID’s the first five days unless your pet was pretreated with Prednisolone (cortisone) in which case we need to use Tramadol or Hydrocodone for three days first
2. Apply an ice-pack to the stifle for 10 to 15 minutes two to four times a day for the first 24 to 36 hours after surgery if no bandage
3. If inflammation has resolved after 72 hours, apply a hot-pack to the stifle for 10 to 15 minutes two or three times a day if no bandage
4. Perform passive range of motion exercise (gently flex and extend the knee); 10 slow repetitions three times a day
5. Precede and follow the passive range of motion exercise with massage of the quadriceps muscles (large muscles above the kneecap)
6. Begin slow leash walks of less than 10 minutes three times a day

**Weeks 2 & 3:**
1. Apply a hot pack to the stifle for 10 to 15 minutes two or three times a day until the swelling has resolved
2. Stop passive range of motion exercise if your pet is using the leg correctly
3. Increase the slow leash walks to 10 to 20 minutes three times a day
4. Continue massage
5. Schedule a recheck with your doctor 2 weeks after surgery to remove any sutures and evaluate range of motion, limb girth, and percent weight bearing
6. Most patients begin to bear some weight by week 3, but every pet is different and some may take longer

**Weeks 4 & 5:**
1. Increase the slow leash walks to 20 to 30 minutes two or three times daily
2. Have your pet perform 10 repetitions of sit-stand exercises three times a day
3. Have your pet perform 10 to 15 repetitions of figure-of-eight walks two or three times a day, circling to the right and left
4. Have your pet sit against a wall for 10 to 15 repetitions two or three times a day, keeping the affected knee next to the wall
5. If available, swimming exercises for one to three minutes twice a day is helpful

**Weeks 6 - 8:**
1. Schedule another recheck with your doctor six weeks after surgery to evaluate your pet’s progress
2. Take your pet on leash walks for 30 to 40 minutes once a day, slow enough to ensure that your pet is weight bearing on the affected limb
3. Take your pet on incline walks or hills or ramps for 5 to 10 minutes once or twice a day
4. Take your pet up a flight of stairs, if available, 5 to 10 times slowly twice a day
5. Continue swimming if possible

**Weeks 9 - 12:**
At this point, your pet’s healing should be complete and should gradually return to full activity by the end of 12 weeks.
1. Take your pet on faster 30 to 40 minute walks once or twice a day
2. Take your pet for a run-straight only, no turns-for 10 to 15 minutes twice a day

**Additional Instructions:**

1. Licking at the incision should be discouraged because it may lead to chewing at the sutures or staples causing a wound infection. It may be necessary to bandage the leg or use an Elizabethan collar to prevent licking.
2. Bandages, if used, should always be kept dry and clean. Any odors and/or persistent licking are indicators that there may be a potential problem and **should be checked by your veterinarian immediately.** Bandages and splints should be checked weekly by your veterinarian or veterinary technician.
3. Feed your pet its regular diet but reduce it by 10% to allow for reduced activity.
4. Mild swelling may occur near incision or low on limbs. Your veterinarian should check moderate or severe swelling immediately.
5. Use of a joint protective supplement with glucosamine and chondroitin is highly recommended for at least six months if your pet does not have arthritis. If your pet does have arthritis, it is recommended to use this supplement for the life of your pet. Although there are over twenty brands of this nutraceutical, Dasuquin is the best supplement you can use. Cosequin is the next best.

**Complications**

As with any surgical procedure, complications can occur. Unlike human patients who can use a sling or crutches, our patients do not know enough to stay off a
healing ligament so restricted activity is a major responsibility of you, the pet owner. Failure to follow these instructions carefully can lead to delayed healing or even rupture of the new artificial ligament.

The most common complication is delayed healing, where, despite our best efforts to stabilize the joint, individual patients respond slower than others. Since we sometimes place two sutures in large breeds for security against premature rupture, some patients will have an audible “clicking” or “snapping” noise from the sutures rubbing against each other. This noise will stop over time in most cases as scar tissue builds up. Occasionally, your pet may develop a small pocket of fluid called a seroma, around the knot we tie in the Fiberwire suture on the outside of the patella bone. See your veterinarian if this swelling is larger than a grape. On rare occasions, especially in large muscled patients or patients with injuries several months old with severe swelling, the peroneal nerve which provides sensation to the top of the paw and controls the muscles that flex the paw can be inadvertently injured. If your pet seems to have serious leg pain or loss of sensation with foot dragging immediately after surgery, please notify me right away. Occasionally, your pet may also develop a seroma around the metal pin we use to secure the transposed bone if this was done in your pet. See your veterinarian if this swelling is larger than a grape. Lastly, although the patella repair has a ninety percent success rate, some patients will still have a lower grade patella luxation than before surgery. Fortunately, most will have no discomfort and not need additional surgery. If you have any questions, please feel free to ask your veterinarian or call me at the number above.

Your pet had the following procedure(s) done:

- Cleaned out torn ligament remnants, inspected the cartilage (meniscus) and flushed out the joint
- Examined synovial lining of the joint for evidence of autoimmune (immune system attacks it’s own tissue) inflammatory disease. Biopsy recommended: yes / no / hold
- Performed a meniscal release procedure to prevent future tearing of the cartilage
- Removed torn or damaged medial/lateral meniscus cartilage
- Debrided and removed osteophytes around joint surfaces
- Placed a single / double lateral / medial Fiberwire Nylon suture to replace the torn ligament and stabilize the joint
- Injected Marcaine (local anesthetic) in the joint
- Injected Adequan (joint protectant) subcutaneously or in the joint
- Imbrication of soft tissues lateral to the knee cap was done to tighten the stretched joint capsule and keep the patella from luxating.
Deepening of the femoral groove so that the knee cap can seat deeply in its normal position was performed with high speed specialized surgical saws and drills

Transposing the tibial crest, the bony prominence onto which the tendon of the patella attaches below the knee was done to help realign the quadriceps, the patella and its tendon. This involves cutting a small piece of bone with a surgical saw and holding it in its new location with one or two small surgical pins

Fabellar/patellar large gauge suture placed to anchor the patella in the femoral groove and prevent it from luxating.

Medial desmotomy to release the shortened and thickened tissues on the medial side of the patella to allow the knee cap to move back to a normal position

Correction of abnormally shaped femur was repaired by cutting the bone, correcting its deformation and immobilizing it with a bone plate

Follow Up Instructions:

Support/pressure bandage placed post-operatively to be removed in 5 days

Recheck in ten days: Sutures / Staples removal / Dissolving sutures

Recheck every two to three weeks to evaluate progress

Tegaderm clear bandage can be left on until it falls off or at suture removal

Start antibiotic and pain medication tomorrow

Start essential fatty acid supplement, ie. Derm Caps to reduce joint inflammation ASAP

Start Cosequin, Glycoflex or Dasuquin (joint supplement) tomorrow

Call Rod Newman, MS, CCRP to schedule your initial physical therapy consultation at 615-414-4867 or email him at rnewman@caninerehabnashville.com (cost included in surgery fee)