

Post-operative care after PAUL procedure (**P**roximal **A**bducting **U**lna osteotomy) in dogs

In elbow dysplasia, common in dogs like Labradors and retrievers, there is usually damage to the cartilage of the medial (inside) part of the elbow joint. These cases will have been diagnosed and investigated with radiography, arthroscopy and sometimes CT scans. The PAUL procedure involves changing the dynamics and loading of the elbow joint to shift weight bearing away from the damaged medial side to the lateral (outside) part of the joint. An osteotomy (bone cut) is made in the ulna, one of the bones in the antebrachium (forearm) and then fixing this bone cut in a modified position with a bone plate.

More information can be found at <http://www.kyon.ch/current-products/proximal-abducting-ulnar-osteotomy-paul>.

Medication:	Antibiotics:	Antibiotics like claviseptin are usually given for a few days (usually tablets given twice daily).
	Anti-inflammatories:	Non-steroidal anti-inflammatory drugs usually start/resume the morning after surgery. These are tablets (eg carprofen, Onsior or Previcox), or liquid (meloxicam). They should be given with food. If vomiting or diarrhoea is noted, stop this medication and seek prompt advice.
	Analgesics:	We sometimes dispense tramadol (tablets given twice daily).

A soft bandage will be used protect the wound for a few days, and this period may be extended for up to four weeks. The dressing must be kept dry at all times **and** should not be interfered with. An Elizabethan collar helps prevent this. If the dressing slips or gets wet, please seek advice promptly. We usually cover the wound itself with a thin white Primapore dressing, secured with a spray glue. The Primapore will be visible once the main dressing is removed and the Primapore is left to fall off in anything from a few days to a couple of weeks. It is very unlikely that you will be able to get a replacement Primapore to stick so please leave ours in place as long as possible! A few drops of dried discharge may be evident on the Primapore, but if there is any on-going discharge please gently blot it with kitchen towel and seek advice promptly. Please do not bathe the wound.

Strict lead restriction is **essential** anywhere outside of the house including the garden until x-rays confirm adequate healing.

Running/jumping/climbing (into cars, upstairs, onto furniture) **must** be prevented. Keep doors closed. Consider using stair gates, ramps, or a cage. If activity is not strictly restricted, then disruption of our fixation, and further fracture of the tibia are all very real possibilities. Between days 1 and 10 postoperatively, 5 minutes of lead restricted exercise is typically allowed, three times a day. This is often increased by 5 minutes of lead exercise onto each of the three daily periods of exercise, but the exact regime will likely vary from case to case so please seek advice.

Immediately post op

Your pet can eat and drink on the evening after surgery. Eating, drinking and urination should have been seen on the morning after surgery, and at least once daily thereafter – if not, please call us without delay. Defaecation sometimes isn't seen for several days post-op.

Rechecks are recommended at 2-3 weeks and 8 weeks post-op. Rechecks at 3-5 days are advised if there are issues. Check-ups with us at Barton under Needwood are free of further charge and only take a few minutes. Check ups at your home practice are chargeable. For rechecks at Barton under Needwood, please contact us to book an appointment. For rechecks at your home practice, please ring your own vets to book these. Where travelling is an issue, and/or for pets that get very anxious at the vets, a simple phone conversation with us and/or a text/email photo of the wound may well suffice in lieu of the 3-5 day check. **By 3-5 days there should be significant weight-bearing on the operated leg. There may well be significant bruising evident. There may be swelling lower down the leg at this time as inflammation "drops" down the leg. Swelling and bruising should disappear with a few days.** At the 2-3 week check, sutures may be removed or left to slough.

Physiotherapy and hydrotherapy, and weight control

Encouraging gentle walking is helpful. Hydrotherapy helps maintain the range of joint motion and muscle mass but this is delayed until 3-4 weeks post-operatively when the wound can stand immersion. Ask your own vet for their recommendation for a hydrotherapy centre in your area. Avoid weight gain during restricted activity post-op.

Follow up radiography, to confirm adequate bone healing before free exercise is allowed, can be done conscious at the 8 week post-operative check with us for no extra charge. This only takes a few minutes with our hand-held X-ray generator. Please don't feed your pet beforehand in case we need to sedate. Any X-rays at your own vets will be chargeable and will likely require sedation or anaesthesia.

What does the future hold?

Modest lameness is common up to 10 weeks post-operatively, and lameness may persist long term. Full healing of the osteotomy often takes 3-4 months. Many dogs will have problems with the opposite leg's elbow too. Degenerative joint disease (DJD), often called "arthritis", is usually evident in the operated joint even at the time of surgery. This will inevitably progress and many cases require future medical management. Your own vet will advise you what is required. General advice for DJD is detailed in another information sheets. Fixation failure and/or infection are uncommon, but occasionally occur and may necessitate implant removal and/or revision surgery.

Our fixed prices include any follow up consults and x-rays done with us, but don't include further medication, revision surgery or implant removal surgery. For further details please see www.wm-referrals.com, "about us", "FAQs". Consults, dressings, x-rays and drugs from your usual vet will be chargeable. For further advice please contact us on 07944 105501 or at enquiries@wm-referrals.com. Consider texting/emailing pictures.