Femoral head and neck ostectomy

The procedure

A femoral head and neck ostectomy is a salvage procedure, indicated for the treatment of conditions of the hip and femur, such as: fractures of the head or neck of the femur, chronic hip luxation, complex hip joint fractures and certain genetically predisposed conditions (Legg-Calve-Perthes disease).

In this procedure, the head and neck of the femur (which make up the ball, of this ball-and-socket joint) are excised, thus eliminating the previously painful joint. Instead, during the weeks following this procedure, the body creates a false joint made up of fibrous tissue.

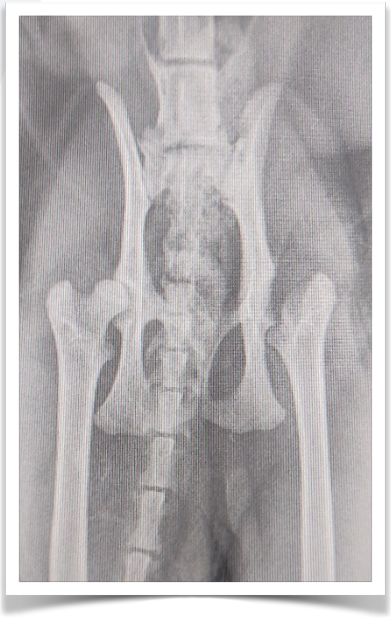
Wound care - If stitches are present, these should be removed 10-14 days after the operation. Monitor the surgical site twice daily, and contact your vet if you notice any discharge or swelling.

Follow-up care - It is important that your pet is allowed exercise and physiotherapy following this procedure. Fibrous tissue will fill the area of the previous hip joint, and reduced activity may contribute to tightening in this area, leading to reduced range of motion of the operated leg.

Medication - Your pet will be discharged with a combination of anti-inflammatory and antibiotics. It is important to follow the instructions. Any vomiting, diarrhoea or other changes should be reported to your vet immediately.

Diet - It is advised to reduce the calorie intake by about 20% during the initial 6 weeks after the operation. Drastic changes in the type of food offered should be avoided.

Cold and warm therapy - In the first 3 days after the operation, an ice pack wrapped in a towel can be applied to the surgical site, for 15 minutes, 2-3 times daily. This reduces the level of inflammation and discomfort. Some swelling in the area of operation is normal. After the initial 3 days, switch to a warm pack (not too hot!) for 4 weeks. This stimulates the blood flow to the surgical site, and stimulates healing of the tissues.



* The information sheet provided is your guide for post-operative care following FHNO. Please read and follow the instructions for the most optimal outcome.

Outcome - In most patients, the rate of limb function return is both acceptable and predictable, particularly in small cats and dogs. Long-term outcome can be significantly improved when adequate physiotherapy is provided after the procedure.

Physiotherapy

1-4 weeks post-operatively

Sit – stand
Sit and stand for 5 repetitions, increasing weekly.

Elevated sit-stand
Place an elevated surface (e.g. a small box) behind your dog's back legs, and ask to sit on this surface, up to 5 times a day.

Alternate weight-bearing
Stand behind your dog, and using a treat encourage them to turn to one, and then to the other side. In this position, you can also bring the same treat between their front legs, encouraging them to put their head between the front legs.

4-6 weeks post-operatively

Unstable surface weight bearing
This exercise is done in the same manner as with alternate weight-bearing, but on a soft surface such as a soft padded mat or foam roll.

Weaving
Create an obstacle line, made of 6 objects. The distance between the objects should be the length of a dog. Walk your pet slowly between the obstacles. The exercise is done 5 times daily, on a short lead.

Pole exercise
Place poles or objects close to the ground, in such way that your dog needs to step over them. Ensure they walk slowly, and do not jump over the obstacles. Repeat 3 times twice daily.

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IF YOUR PET DEVELOPS A SUDDEN ONSET OF LAMENESS AFTER THE INITIAL IMPROVEMENT, PLEASE CONTACT YOUR VETS IMMEDIATELY.

Following this advice should help your pet recover quickly however if you have any questions please contact your veterinary practice.