

Post-operative Discharge Instructions following Shoulder Arthroscopy for Management of Osteochondritis Dessicans (Shoulder OCD)

Surgery today involved shoulder arthroscopy using a 2.3mm scope and camera for the assessment of the intra-articular cartilage and ligaments, examination of secondary joint and inflammatory changes and excision of the cartilage flap from the joint.

Recovery and rehabilitation should be straight forward with monitoring of the wound for infection and rest to allow the joint to heal and recover with minimal inflammation. Skin stitches have been placed in the incisions on the inside of the elbow and will require removal in 10-14 days time.

There will be swelling of the soft tissues around the shoulder for 2-5 days following the arthroscopy and the wounds may discharge slightly for 24-48 hours following the procedure, but this should resolve without intervention. Swelling of the shoulder and forearm should resolve in the next 1-2 weeks. Please monitor the wounds daily for redness, increased swelling, or increased discharge and contact your regular veterinarian for advice and an examination, as it is important to identify any problems early. An increase in the level of limping will be noted initially but this should improve gradually in the coming weeks.

The long-term prognosis will be good to excellent for 95% of patients, despite the progression of osteoarthritis down the track. Long-term management is focused on weight control (ideal body condition), joint supplementation (fish oils, glucosamine/chondroitin, pentosanpolysulfate injections), and anti-inflammatories as required.

Re-examination

Several routine examinations are advised in the early post-operative period to monitor for any signs of infection or complication.

DAY 5-7: Routine wound examination and fentanyl patch removal.

DAY 10-14: Wound examination, and suture removal.

WEEK 6: Routine examination and progress assessment as required.

Please fast your pet prior to these appointments in case sedation is required.

Medication

A course of anti-inflammatory medication will be dispensed. Please follow the label instructions carefully and contact your veterinarian should you have any queries. Should there be any gastrointestinal signs (vomiting, diarrhoea) please stop the medication and contact your veterinarian for further advice.

A fentanyl patch was placed on the skin for pain relief and will be covered by an adhesive bandage. The patch will provide analgesia for 3-5 days. This may be removed after 5 days and disposed of in the household waste. Occasionally side effects may be observed and vary widely between patients, with the main effect being dysphoria (appearing high, overly quiet or over excitable) and loss of appetite. Should you notice any of these signs at home, please remove the patch and dispose of in the general waste. Patients have been known to eat the patches and currently I have not observed any signs of over-dosage, but please avoid this and monitor your patient carefully at home. Should you have any concerns contact your regular veterinarian or an emergency afterhours service if needed.

Rehabilitation

WEEK 1-2

Should be walking well and improving, gradually, weekly.

There may be a worsening of the limp in the early post-surgery period.

Strict Rest and Confinement or Strict Supervision for 2-4 weeks

Short walks on a lead out to the backyard for toileting purposes only 2-6 times daily.

On-lead at all times/ No Stairs No jumping No swimming No baths

Ice Packs (24-48 hours) may be applied to the elbow, 2-4 times daily for 20 minutes to minimise early post-operative swelling and help with pain relief. Do not apply the ice directly to the skin but use a cloth between.

Heat packs (after 48 hours) may be applied to the elbow 2-4 times daily for 20 minutes to aid resolution of the swelling and promote circulation and healing. Ensure the heat pack is not too hot as to burn the skin but should be comfortably warm.

WEEK 3-6

Improving weight bearing on the leg, with a possible mild to moderate limp.

Strict Rest or Strict Supervision.

Gradually increase the length of lead controlled walks by 5minute increments, starting at 5 minutes, up to 2-6 times daily.

If your pet limps more towards the end of the walk reduce the length of walk to a point which is well tolerated.

Use anti-inflammatories as required if limping.

On-lead at all times/ No Stairs No jumping. Allowed baths after suture removal.

May commence swimming/wading in chest deep water / Hydrotherapy may commence. Wading in water generally only 5 minutes daily, increasing in 2 minute increments weekly.

Heat packs continued and applied to the elbow 2-4 times daily for 20 minutes to aid resolution of the swelling and promote circulation and healing. Ensure the heat pack is not too hot as to burn the skin but should be comfortably warm.

WEEK 6+

Good weight bearing. Gradual reintroduction to some gentle off lead walks and increasing on-lead walks.

Lead controlled walks, 20-30 minutes, up to 2-4 times daily.

Gradual reintroduction to short periods of gentle off-lead activity 5 minutes.

Gradual reintroduction to steps and stairs 12 weeks, especially going down steps.

Every patient is different and each recovery will and outcome will vary.

Take your time and try not to rush back to normal as there is a lot of healing required by the joint.

LONGER TERM

The prognosis is good to excellent in over 90% of patients, with the majority patients returning to normal athletic activity, depending on their condition and degree of osteoarthritis already present at the time of the injury.

Osteoarthritis is expected in all patients that have a joint injury, however this may be managed with maintaining a lean body condition, use of joint supplementation (fish oils, glucosamine/chondroitin, pentosan polysulphate injections), use of anti-inflammatories, and moderation of exercise (the mind may be willing, but the body not able).

Should need any further advice on longer term management or assistance with weight loss, please contact your regular veterinarian.