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Subtotal ostectomy of impinging dorsal spinous processes in 23 standing horses.

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Reasons for performing study
To minimise morbidity and eliminate cost and risk of total anaesthesia, published surgical techniques of subtotal ostectomy (SO) of impinging dorsal spinal processes (IDSPs) were further developed and tested in a group of clinical cases.

Objectives
To report the surgical treatment and outcomes of horses with IDSPs that underwent SO of caudal thoracic vertebrae while standing using a minimally invasive surgical technique.

Study Design
Retrospective study.

Animal
23 warmblood or thoroughbred horses of mixed sex, age, weight and athletic use.

Methods
Using local anaesthesia in the back and sedation/analgesia continuous drip, the surgery was performed with the horse standing in stocks. Through a dorsal midline incision, the involved DSPs were dissected free and resected in a zigzag fashion with a narrow oscillating saw with minimal trauma to the surrounding soft tissue, and the pointed aspect of the stump was rounded with bone rongeurs. The space left between the DSPs was about the width of a finger. The surgical site was controlled radiographically to confirm satisfactorily result before wound closure in 4 layers. Postoperative care was conducted in the horses’ home stall after discharged the same day as surgery, and a controlled rehabilitation program was followed for 14 weeks.

Results
No serious complications were experienced after surgery. The prognosis for athletic function was calculated based on follow-up data obtained from 22 of 23 horses. Short term (< 1 year): Full athletic function (19 horses) 86 %; better movement after surgery but failure to return to full function (2 horses) 9 %; and no improvement after surgery (1 horse) 5 %.

Long term (> 1 year)
Full athletic function (17 horses) 77 %; better movement after surgery but failure to return to full function (2 horses) 9 %; and no improvement after surgery (3 horses) 14 %. Additionally, 95 % of owners (in 21 of 22 horses) were satisfied with the surgery.

Conclusions and Clinical Relevance
Because of many advantages and good prognosis for athletic function, SOIDSP should be performed with the horse standing if allowed by the temperament of the horse, and the surgeon’s confidence of performing surgery in standing horses.