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“Dakota” - THR and TPLO



“Dakota”

“Dakota” is a spayed female Akita that first came to us in June of 1994. She had a “rabbit-hop” gait, a “cow-hocked” stance and refused to jump. Her right hip joint was not forming correctly (coxa valga) and had excess laxity on palpation (distraction index of 0.40). Her right patella (knee cap) was starting to dislocate. Her angle of the left femoral neck was 128 degrees but was 138 degrees in the right femoral neck...too straight!

We performed a right femoral neck lengthening procedure which had the effect of decreasing the femoral neck angle tightening the

hip joint. Two months later, radiographs showed that the right hip joint looked good, but there was a decrease in the bone of both femoral necks (an “apple core” appearance probably due to a disruption of blood supply of unknown cause). Both hip joints looked congruent at that time however.

In April of 1995, radiographs showed that the right hip looked great, but the left hip was showing signs of early degenerative arthritis. Pain in the left hip got progressively worse. Then in September of 1995, Dakota suddenly became lame in the right rear leg due to a rupture of the anterior cruciate ligament in the right knee joint. Surgery was performed utilizing heavy nylon sutures and muscle advancements to stabilize the knee joint.

In September of 1997 Dakota was presented for stiffness and slowness in getting up, decreased exercise tolerance. Radiographs of her hips revealed a good right hip joint but a very severely degenerated, arthritic left hip joint and a moderately arthritic right knee joint. In October of 1997 a prosthetic total hip joint replacement was performed in the left hip joint utilizing the BioMedtrix prosthesis (<http://www.biomedtrix.com/>).

In September of 1998 Dakota’s hip radiographs looked great, but she was still favoring the right rear leg due to the arthritic right knee joint, even though it had been operated and stabilized. In December of 1998 a Tibial Plateau Leveling Osteotomy (TPLO) was performed on the right knee joint to level the slope of the tibial plateau from 27 degrees to almost level. This will reduce the forces on the joint and thus slow the progression of degenerative changes.