Mar. 2019

Newsletter

Dentistry and OMFS Team Expands

Specialists Peter Southerden, Andrew Perry and resident Ingrid Tundo have been joined by a second resident. Dr Alix Freeman MRCVS graduated from Bristol Vet school in 2008 and worked in first opinion practice in the South West and Warwickshire



before joining the Eastcott Referral team. The team is very happy to see all types of dentistry and OMFS cases and are particularly interested in developing new techniques for jaw reconstruction following tumour resection and for the fixation of jaw fractures using patient specific 3D printed plates.

2018 JFMS Open Reports Practitioner Best Paper Award Winners

Congratulations to Peter Southerden and co-author Duncan Barnes on winning the 2018 JFMS Open Reports Practitioner Best Paper Award, a fantastic achievement. The paper was entitled 'Caudal mandibular fracture repair using three-dimensional printing, presurgical plate contouring and a preformed template to aid anatomical fracture reduction'

The paper describes the first reported cases of mini-plate fixation of caudal mandibular fractures in cats using 3D models, pre-contouring of bone plates and the use of a template to facilitate accurate plate positioning.

Peter and Duncan conclude that this may provide an alternative technique suitable for fixing caudal mandible fractures in cats.

The judges commented that this paper is an 'interesting report in a new area that is getting more attention', and that it describes 'an excellent approach to reducing the morbidity during recovery for mandibular fracture patients that has the potential to improve the welfare of many cats'.

The paper can be read at: bit.ly/2Dg6wMV

Caudal Mandibular Fractures

with Peter Southerden

We have been collaborating with James Sage and Dan Jones from Fusion Implants and Ben Walton from ChesterGates Veterinary Specialists to design a range of 3D printed custom Titanium plates for caudal mandibular fractures in cats.

Data was taken from a number of CT scans of un-fractured mandibles and used to design a range of custom plates that should fit most cats and be suitable for the common fracture patterns in this area.

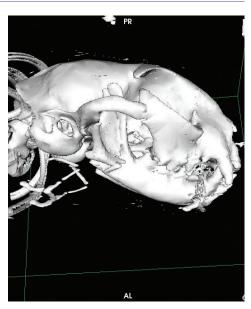
Caudal mandibular fractures in cats are challenging because the ramus is usually less than 2.5cm tall, in some areas only 1.5mm thick and access to the surgical site is limited.

We used a plate for the first case last week on a vertical fracture of the right mandibular ramus. The plate adapted to the mandible and helped to reduce the fracture very well and our patient was eating the day after surgery. Where applicable we believe that internal rigid fixation has considerable advantages over other commonly used techniques such as maxillo-mandibular fixation (MMF). The plates were printed by Fusion Implants and James led the design project. Thanks guys for your hard work.

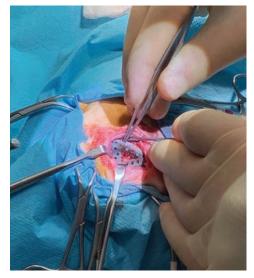


Axial image from a post-operative CT scan showing excellent reduction of the fracture.





3D reconstruction of CT scan showing fracture of the right mandibular ramus.



Picture showing surgical approach and application of the custom 3D printed Titanium plate to the fractured right mandibular ramus.



with Domenico Sainato

Safe and minimally invasive treatment for superficially located plant awns in dogs

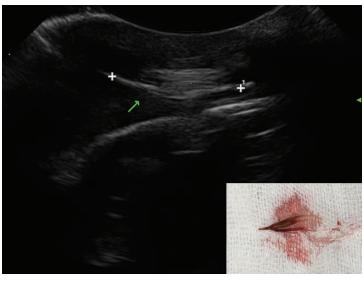
Subcutaneous or subfascial abscesses or granulomas due to migrating vegetal foreign bodies are common in dogs and surgical removal of the grass seed may be challenging. Non-image-guided surgical exploration can be time-consuming, traumatic, challenging and sometimes unsuccessful even when a foreign body is known to be present.

The inability to localise the foreign body for retrieval and the partial retrieval of the awn are the most common complications. The potential inability to localise the foreign body during surgery could lead to abscess recurrence.

The use of ultrasound for the detection of such foreign bodies is well known and their ultrasonographic features have been widely discussed. Grass awns 'appear as linear spindle-shaped hyperechoic structures of variable length, with two or three parallel reflecting interfaces corresponding to the seeds and seed covers. Often an anechoic halo due to the accumulation of fluid is present around the foreign body, which sometimes improves interface visualisation'.

Four dogs referred for recurrent abscess in the lumbar region have been seen at the hospital between October 2018 to January 2019. A migrating vegetal foreign body was identified in each dog with the use of ultrasonography. All retrieval procedures were performed in the sonography suite with the patient under general anaesthesia. The region of interest was aseptically prepared and a small stab incision with a #11 scalpel was performed approximatively 2cm cranial to the foreign body, with the plant awn imaged in sagittal section.

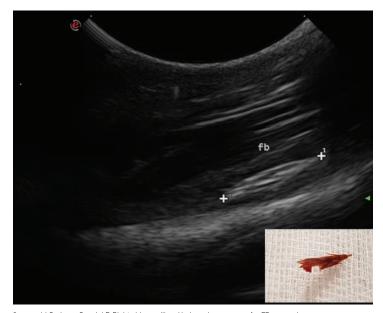
A Hartmann forceps was inserted through the skin incision and directed toward the tip of the foreign body under ultrasonographic guidance. The forceps were opened and the foreign body grasped and withdrawn. The shape of the foreign body was compared with the sonographic images and the site of the abscess was rescanned to determine potential residual foreign bodies or fragments. In all dogs, the abscess was flushed with saline and oral antibiotic therapy was administered for 7–10 days. The duration of the procedure ranged from 20 to 40 minutes. Suture of the skin incision was not necessary



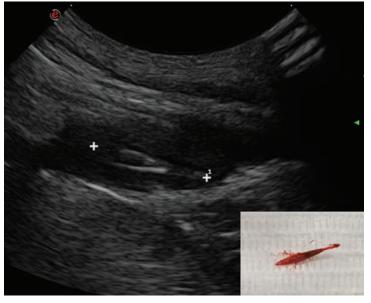
5-year-old Labrador FN with an abscess in the left flank. Had previous exploratory surgery and FB was found but another abscess occurred 1 month later.



 $\hbox{3-year-old Cocker Spaniel MN with swelling L flank for 4 months. Had received antibiotic treatment.}$



 $\hbox{2-year-old Springer Spaniel F. Right side swelling. Had previous surgery for FB research}\\$



7-year-old Cocker Spaniel FN. November 2018 abscess formed and treated with antibiotics, December 2018 surgical exploration - nothing found. Abscess reoccurred within a few weeks and antibiotics prescribed until late January. Referred in February 2019



Advantages of Computed Tomographic in the visualisation of deep vegetal foreign bodies

with Domenico Sainato

Otto a 5-year-old Cocker Spaniel was referred to us following a persistent cough of 3 months duration.

Antibiotics and anti-inflammatory treatment had been prescribed by the referring vet and when there had been no improvement after 2 weeks of treatment, a possible deep bronchial foreign body was suspected.

Chest x-rays had been taken and radiographic findings were consistent with a focal area of increased radiopacity in the right caudal pulmonary lobe.

An endoscopy had then been performed and two grass seeds were found in the main right caudal bronchus, 2 cm distally from the tracheal bifurcation.

The presence of another large foreign body in the deeper portion of the affected bronchus was suspected. However, due to the inaccessibility of the area, Otto was referred to us for a thoracic CT scan in order to clearly assess the suspicious lobe.

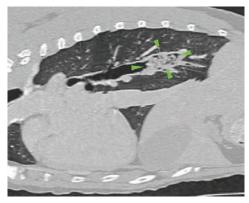
Computed tomography multi-planar reconstruction (MPR) and 3D reconstruction of the lungs highlighted the presence of a 3 cm foreign body in the main right bronchus of the caudal pulmonary lobe, approximatively 8 cm beyond the tracheal bifurcation.

An endoscopy was subsequently performed and the team was able to remove an ear of corn, along with numerous detached seeds and associated debris that had trapped in the lung for many weeks.

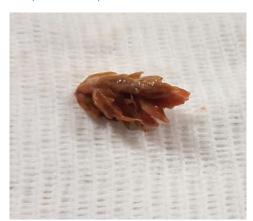
Otto was discharged the following day and no further signs of coughing have been reported by the owner.

If you would like to refer a case for investigation, please refer via the Soft Tissue Referral Service

CT sagittal view of the chest. The main right caudal bronchus is partially occluded by a foreign body with soft tissue density (green arrowheads). There is a mild amount of gas bubbles trapped by the foreign body.



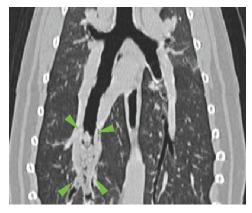
The foreign body (grass awn) retrieved from the affected bronchus with the help of the bronchoscope.

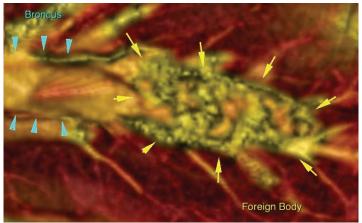


CT transverse view of the chest. The main right caudal bronchus is partially occluded by a foreign body with soft tissue density (green arrowheads). There is a mild amount of gas bubbles trapped by the foreign body.



CT dorsal view of the chest. The main right caudal bronchus is partially occluded by a foreign body with soft tissue density (green arrowheads). There is a mild amount of gas bubbles trapped by the foreign body.





3D reconstruction of the lumen of the main right caudal bronchus (light blue arrowheads), with the foreign body trapped in it (yellow arrows).

Current Soft Tissue Referral Packages

We always strive to deliver gold standard care at competitive prices. We firmly believe that our current pricing structure represents good value for money for clients without cutting corners that may compromise patient care. Whilst we endeavour to provide accurate estimates for individual cases (and will continue to do so), the estimates we give are often wide to allow for the possibility of unexpected developments/complications during or after surgery.

We understand that owners may have concerns about ongoing costs potentially increasing over their budget and therefore, we are now offering some Soft Tissue packages that are capped. The final costs may be lower than those stated but we guarantee your clients that the costs will not exceed the capped fee.

Extrahepatic Portosystemic Shunts (PSS)

Initial workup/diagnostics (if required) capped at £1000

Includes:

- Consultation with our internal medicine service
- Full serum biochemistry, haematology, bile acids and clotting time
- Diagnostic imaging (ultrasound or CT angiography).

Surgery for ligation/attenuation of Extrahepatic PSS

capped at £3000

Includes:

- Consultation with Soft Tissue Surgeon
- Anaesthesia, surgery (including intraoperative portovenography)
- All perioperative medications and 3 days postoperative hospitalisation.

Laryngeal Paralysis (LP)

"Tieback Surgery" (arytenoid lateralization) capped at £2200

Includes:

- Initial consultation
- Assessment (laryngoscopy) and thoracic radiographs
- Anaesthesia and surgery plus all perioperative medication
- Overnight hospitalisation/monitoring if required.

PDA

Surgical Ligation (if PDA already diagnosed) capped at £2100

Specialist Echocardiography + PDA ligation capped at £2500

Includes:

- Initial consultation
- Anaesthesia and surgery
- All perioperative medication and hospitalisation until discharge.

Building Update

Duilding work is progressing well. The new Ophthalmology suite will be finished in April following the arrival of trolleys, teaching screen and other small pieces of new equipment.

Work is well underway in other areas. When fully completed, the extension will provide: 3 additional operating theatres, additional consulting rooms, new improved Cat Friendly Cat ward, dedicated Cat Friendly examination room, 2 new dog wards, dedicated canine friendly examination room, 3 new procedure rooms, larger intensive care and recovery suite, additional x-ray and ultrasound rooms, larger specialist dentistry suite, provision for MRI Unit and improved staff facilities.

Sign up to Our Newsletter

You may have signed up for previous mailings, but new GDPR regulations require us to ask you to re-subscribe.

Please visit our website to re-subscribe or email news@eastcottvets.co.uk

FREE CPD Evenings 6th June 2019

Medial Patellar Luxation Assessment and Surgical Options. My patient has a medial patellar luxation, now what?

In this evening CPD we will discuss the assessment and treatment of small animals with medial patellar luxation. This will include the assessment of whether cases need to be treated surgically. If surgery is needed what are the best surgical options to maximise the chances of a successful outcome and reduce the possibility of complications.

We will also look at the options for more complicated cases including dogs with femoral and tibial deformities and patellar groove replacement for dogs with a worn out or absent femoral trochlear groove.

With Duncan Barnes and Fabio Frazzica.

CPD COURSES RUN FROM 7.30PM - 9PM WITH REFRESHMENTS FROM 7PM
For more information or to book a place on one of our courses, please visit our website

Disciplines at Eastcott Referrals

Soft Tissue Surgery including Laparoscopy and Thoracosopy	Oral and Maxilofacial Surgery
Dentistry	Cardiology
Ophthalmology including Cataract Surgery	Internal Medicine
CT & Imaging	Orthopaedics including Total Hip Replacements
Anaesthesia & Analgesia	CPD



Eastcott Referrals

Eastcott Veterinary Hospital Edison Park, Dorcan Way, Swindon, Wiltshire SN3 3FR (sat nav postcode SN3 3RB)

Tel: 01793 528341 Fax: 01793 401888 Email: referrals@eastcottvets.co.uk

www.eastcottreferrals.co.uk

Opening Hours

Monday to Friday: 7am - 8pm Saturday and Sunday: 8.30am - 8pm



