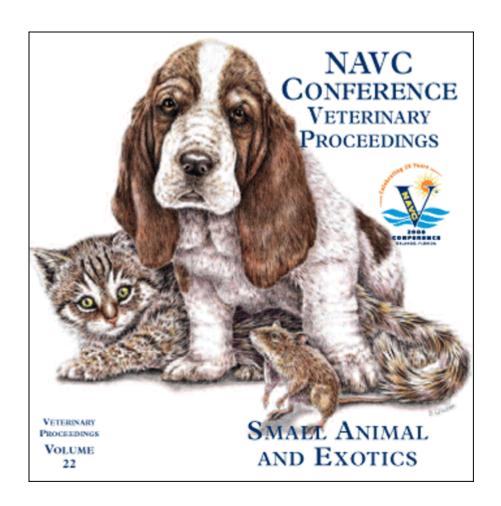
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AMPUTATION IN THE CANCER PATIENT: HELPING OWNERS DECIDE

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Amputation is often required for control of certain diseases or severe trauma. Owners almost uniformly have a negative reaction to the concept of amputation in dogs and cats. Many owners believe that amputation is a cruel and mutilating procedure. As health care professionals, veterinary technicians are often called upon to answer questions regarding amputation and are intimately involved with the postoperative management and discharge of these patients. Therefore, it is important for veterinarians and technicians to inform owners and dispel common myths associated with amputation in pets. In addition, appropriate client education prior to discharge can greatly add to the client's level of satisfaction in the first few days or weeks after a pet's amputation. Below are some common myths, questions and comments to which veterinarians and technicians may be asked to respond. Facts and specific helpful information for pet owners follow.

Myth: Amputee pets have a poor quality of life.

Fact: Most animals require an amputation to achieve long-term quality of life that would not be possible without an amputation. Dogs and cats with amputations are able to run and play, swim, exercise with their owners, work and enjoy life. It is helpful to keep a photo album or videotapes of amputees performing normal activities or playing and running. Owners will also be able to have an idea of how the patient will look after the hair returns and the incision is healed.

Myth: If I concede to amputate my animal's limb, the other pets in the house will "pick on" or act aggressively toward the amputee.

Fact: Although aggressive behavior on the part of another house pet is not unheard of, the change in appearance associated with amputation rarely causes aggression in and of itself. Thus, if the pets in the household were not normally aggressive toward one another, it would be rare for the amputee to suffer any extra aggression simply because of a missing limb.

Myth: Large dogs do poorly with amputation.

Fact: While smaller dogs and cats uniformly do extremely well with amputation, larger dogs also do very well as a rule. At our institution, the vast majority of amputations are performed on large breed dogs for treatment of osteosarcoma. It is the exception, and not the rule, that a large or giant breed dog will have significant difficulty after amputation. Most large breed dogs are able to negotiate stairs and so forth with no problem. Occasionally a dog will require help going down the stairs. Severely obese large breed dogs may need support with a towel until a reasonable amount of weight loss is achieved. Obviously severe generalized

neurological deficits would be a contraindication for amputation. In many cases, dogs are already walking on three legs immediately prior to amputation because of the pain or dysfunction associated with the disease. This is helpful to point out to owners, if present.

Myth: The pain associated with amputation is excessive and a pet animal will suffer severely in the immediate postoperative period.

Fact: Amputation performed without management in the postoperative period would certainly be painful. However, with appropriate pain management, patients can be kept very comfortable. Suggestions for pain management in the immediate effective postoperative period would include preemptive analgesia with fentanyl transdermal patches and opioids in the preanesthetic medications, continuous rate intravenous infusion of opioids with or without the addition of ketamine postoperatively, the use of epidural analgesia and so on. These techniques are very effective and can be continued for 48 hours or more. The addition of nonsteroidal anti-inflammatory agents such as carprofen in the postoperative period is often sufficient after the second postoperative day.

SUGGESTED DISCHARGE PROTOCOL FOR AMPUTEES

Owners are often very apprehensive about seeing their pet after amputation. Below are some ideas that have worked very well in our institution and have improved client satisfaction with the procedure.

- Before the client comes to pick up the pet, ask the owner to bring a clean, large (old) t-shirt.
- Bring the client into an exam room away from the traffic flow and speak with them before bringing in the pet.
- For some reason, owners commonly seem to be shocked at the amount of hair that has been clipped for an amputation. Remind owners that a large area of the body has been clipped for surgery.
- Remind owners that the incision will appear large and bruised. Bruising usually gets worse over the 3 to 4 days following surgery and then begins to get better. This is normal.
- Inform owners that mild swelling is also normal but liquid discharge of any kind or large fluctuant swellings should be checked by the veterinarian.
- Cold compresses using ice packs covered with towels in the first 2 to 3 days after returning home is helpful to reduce swelling and discomfort. After this time, warm compresses are better.
- Larger dogs may have initial trouble on slick floors.
 Keep the pet on non-slip surfaces and use a towel to "sling" and support the animal going up and down stairs until the pet learns to negotiate these on his/her own.
- Large dogs may prefer to eat standing up from an elevated food dish at first (this is especially true for front limb amputations).

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- Inform the owners that the animals will require time
 to recover fully. For the first 2 weeks following
 amputation, it is common for the pet to sleep and be
 less active. This is normal and should be
 encouraged; however, there should be steady
 improvement. Any setback should generate a phone
 conversation.
- Prior to reuniting the owner with the pet, place the T-shirt (from the owner) on the pet so that it covers the incision. Some technicians use a stockingette "sweater" which also works nicely. This allows the owner to have a moment to greet the pet before reacting to the incision. When the owner is ready, show them the surgery site explaining the bruising again and the sutures. Often owners will comment that it looks better than they thought it would look. Indicate that they should check it daily for signs of infection, etc.
- We find that owners greatly appreciate a phone call in the first 48 hours after discharge and usually have many questions or concerns that can be addressed by the technician.

The above information represents an overview of a protocol that we have used successfully for the last 15 years. Technicians are a key part of the case management team at our hospital and can ensure quality interactions with the client simply by keeping them informed and using good communication skills. Although the initial response to the need for an amputation is often negative, most clients indicate a high level of satisfaction with the procedure when owner education and communication is well managed.