

Editorial

Dear Readers,

Welcome to the first of its kind *JAVMA* Supplemental Issue. While you can enjoy this “Surgery in Your Practice” special edition now in a digital format, you will also receive it in print, delivered with your January 15, 2021 issue of *JAVMA*. We have selected articles to address the continuum of care for your patients requiring surgery. These articles were chosen to enhance your preoperative communications with owners, with new knowledge about survival times and procedure choices, decreased perioperative morbidity in your patients through drug selection, and optimization of postoperative recovery. My goal in this editorial is to highlight why we chose these articles; I hope that you will find them informative for your practice.

New information for preoperative communications with your clients

When presented with a dog with nontraumatic hemoabdomen due to splenic disease, how do you advise your client on the cost of surgery versus the benefit of survival time postsplenectomy? The study by Millar et al¹ suggests that even in those dogs with nonmalignant histopathology findings, unexpected death can occur due to malignancies, with a median postoperative survival time of only 49 days.

What is your treatment paradigm for treating aural hematomas? Do you start with a less invasive corticosteroid injection or go straight to surgical drainage? In the study by Itoh et al,² both treatments had good long-term outcomes, but recurrence after local corticosteroids was 8-times higher than for dogs treated with multiple drainage holes. This might be important information for you to consider for difficult to treat patients, or clients who desire a more assertive approach to treatment.

For cats with appendicular or scapular osteosarcoma treated with limb amputation, Nakano et al³ reveal that osteosarcoma of the humerus has a significantly higher incidence of distant metastasis than appendicular osteosarcoma at other sites, which should be conveyed to owners in your preoperative discussions.

What is the long-term prognosis for a dog with multiple acquired portosystemic shunts? The study by Anglin et al⁴ indicates that survival time is not affected by previous portosystemic shunt attenuation. This is important to alleviate potential hindsight regret of performing portosystemic shunt attenuation surgery.



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Decreasing nausea and emesis in the perioperative periods

Preventing or reducing the incidence and severity of perioperative nausea and emesis in dogs begins before preoperative sedation with drug selection. In this Supplemental Issue, Burke et al⁵ show that maropitant is superior to other drugs in reducing the incidence and severity of preoperative nausea and emesis in healthy dogs premedicated with hydromorphone. In a very different population of animals and while studying post-operative emesis, Moyer et al⁶ support the use of maropitant in addition to famotidine

in geriatric dogs for reducing postoperative nausea and emesis.

Surgical techniques

The article by Santoro et al,⁷ which inspired the cover art by Linden Pederson, describes a technique for performing a thoracic paravertebral block that results in superior nociception and pain control and improved recovery in bitches undergoing radical mastectomy. This technique can be readily performed in all practices to decrease postoperative patient morbidity.

Chen et al⁸ describe a modified approach to closed anal saccullectomy in dogs with anal sac neoplasia treatment. This approach removes the anal sac duct to mitigate neoplasia recurrence, allows for improved tissue handling compared with the traditional closed approach, and requires no advanced surgical equipment.

Carabalona et al⁹ describe a new surgical technique that combines H-pharyngoplasty, which includes tonsillectomy plus pharyngoplasty, with ala-vestibuloplasty as part of a standardized multi-level approach for the treatment of dogs with brachycephalic obstructive airway syndrome. While this new technique might be beyond the surgical scope of primary care practices, it is important to recognize that the procedure was also successful as a revision surgery for those animals previously treated with conventional surgery, suggesting that owners be referred to practices performing the new procedure.

To improve early detection of lymph node metastasis, Rossanese et al¹⁰ build on their previous work and describe two techniques that were equally successful in localization of normal-sized and non-palpable lymph nodes and decreased surgery time and patient morbidity compared with unassisted lymphadenectomy. Both techniques require an experienced ultrasonographer, but can be performed in a practice setting allowing for early tumor staging, which should lead to a survival benefit.

Postoperative care

Adherence to postoperative care instructions including return for follow-up visits can be problematic in veterinary and human medicine. The study by Moya et al¹¹ evaluated follow-up adherence for dogs and cats following orthopedic surgery. Their findings suggest that additional efforts should be made by veterinary practices to improve follow-up for cats and animals with single owners.

In our final article in “Surgery in Your Practice,” a study by Iodence et al¹² suggests that chemotherapy should be used with caution \leq 30 days after surgery for dogs with mast cell tumors, but that perioperative corticosteroid administration is not associated with incisional complications.

I hope you enjoy reading these articles as much as I have. As an added AVMA membership benefit, we will be bringing Supplemental Issues to you twice yearly. We have several topics lined up, but please let us know your thoughts; we are here to listen to you.

In closing, I would like to thank my colleague Dr. Jim Moore for embarking on a new collaboration with *JAVMA* in the generation of custom cover-art for our Supplemental Issues. Dr. Moore serves as Director of Educational Resources in the University of Georgia’s College of Veterinary Medicine to make educational materials for use in the veterinary curriculum. Educational Resources also has a one-year Certificate program for newly graduated medical illustrators, one of whom, Linden Pederson, created the illustration for the cover of this issue to begin this collaboration with *JAVMA*. This alliance will provide similar opportunities for new graduate students in the Certificate program in the coming years.

I look forward to your valuable feedback.

Kind Regards,

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Division Director of Publications, AVMA

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