

Patella luxation grade 3 & 4

Hopping and skipping lameness is often seen with patella (knee cap) luxation. During these episodes, the knee cap (patella) is out of joint and results in the knee “locking”. In more severe cases, the knee cap is more frequently or permanently out of joint, resulting in cartilage wear and arthritis.

Surgical correction

Several procedures are often combined to achieve correct alignment and tracking of the knee cap.

1. Sulcoplasty:

This involves deepening the groove which the knee cap runs in so that there is an adequate ridge on both sides to keep it in place.

2. Tibial Crest Transposition:

The insertion of the patella tendon is repositioned to correct alignment. This is held in place with either metal pins and/or, a wire

3. Imbrication with potential release of the joint capsule:

The soft tissues around the joint are often relatively stretched. Tightening these with sutures helps to maintain patella stability.

4. Distal Femoral Osteotomy:

In very severe cases (grade 4 out of 4), there is often a femoral (thigh bone) deformity present. A cut is made in the femur and the bone properly aligned before being stabilised with a metal bone plate and screw,s or an interlocking rod. Correct alignment then allows the knee cap to track properly.

Post-Operative Care:

- Wound Care

Your pet will have a wound on the outside of their leg. Please check this area twice daily, there should not be any pain, swelling, redness or discharge from the wound. A buster collar should be used to prevent interference for the first 10-14 days after surgery.

- Exercise Plan

During the first 6 weeks, strict rest is vital to reduce the risk of complications. During this time, your pet should be confined to a crate or pen. Cats should be provided with a shallow litter tray to toilet. Dogs should only be allowed out to toilet via short walks on the lead and only in the garden. Running, jumping and use of stairs are strictly NOT permitted



Dog exercise plan:

Week number	On lead exercise	Number of times daily	Off lead exercise
1-6	For toileting only	As needed	None
7	5-10 minutes	Up to 3 times daily	None
8	10-15 minutes	Up to 3 times daily	None
9	15-20 minutes	Up to 3 times daily	None
10	20-25 minutes	Up to 3 times daily	None
11	25-30 minutes	Up to 3 times daily	None
12	30 minutes or more	Up to 3 times daily	Start to re-introduce off lead exercise.

Cat exercise plan:

Week number	
1-6	Strict cage rest
7-8	Allow access to a small room in the house
9-10	Allow access around the house, no outside exercise
11-12	Normally at this point, outdoor exercise can be re-introduced

Outcome

Most patients return to normal exercise. Re-luxation is rare and may require further surgery. A minority of patients, especially those with pre-existing arthritis, may require anti-inflammatory medication.

Risks and Complications

All surgeries have potential complications. Approximately 3-5% of patients develop a post-operative infection and may require removal of implants. Major complications such as fractures and broken implants (plates and screws) occur rarely.

