

Femoral Head and Neck Excision

Femoral head and neck excision (FHNE) is a salvage procedure, which involves removing the ball and neck of the femur (thigh bone). Following removal, weight is transferred by the muscular attachments and a pseudo arthrosis (false joint) is formed over time.

Common reasons for performing FHNE include; non repairable fractures, slipped capital physeal fracture in cats, hip dislocation, and management of hip dysplasia in select patients.

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:

2 weeks strict rest in a crate or pen is useful to allow soft tissue healing and protect the wound. Thereafter, early activity is essential to promote formation of a false hip joint. Pain relief is essential to achieve this.



Physiotherapy:

Early and proactive guided physiotherapy is essential. Please see our website for further information.

Outcome:

Most patients have a persistent mechanical lameness. Comfort is usually acceptable, as is the long-term function, and exercise restriction is not usually necessary. Occasionally patients require ongoing anti-inflammatory medication to control pain and/or discomfort.

Risks and Complications:

All surgeries have potential complications. These are rare with femoral head and neck excision. Infection occurs in approximately 3% of cases and is usually managed medically. On-going pain and lameness should be reviewed with your surgeon.

