FIBULAR HEAD TRANSPOSITION

Fibular head transposition is an extra-articular repair technique that uses the lateral collateral ligament to stabilize the stifle joint. The lateral collateral ligament runs from the lateral epicondyle of the femur to the fibular head. After cranial transposition of the fibular head, the orientation of the lateral collateral ligament is redirected to approximate that of the cranial cruciate ligament. Cranial drawer motion and excessive internal rotation of the joint are prevented by this orientation of the lateral collateral ligament. This procedure can be used for smaller dogs (less than 25lbs.) with either acute or chronic ruptures of the cranial cruciate ligament. Fibular head transposition is particularly suited for dogs with osteoarthritis of the stifle where an intra-articular technique is not desirable. Chronicity of cranial cruciate rupture prior to repair has been reported not to affect clinical results after repair with this technique. Another benefit of fibular head transposition is the shorter recovery time compared to intra-articular techniques.

The surgical procedure involves cutting the ligamentous attachments of the fibular head to the tibia so that the fibular head can be transposed cranially. The fibular head is moved forward to a point that the drawer sign has been eliminated. The fibular head is then secured to the tibia with K-wires and a tension band wire.

Postoperatively, the leg is placed in a soft-padded bandage for 24 hours. The dog's activity is limited for the first month and then slowly increased over the second month. Long-term clinical evaluation of this procedure indicated that 90% of the dogs had an excellent or good result. The low complication rate and a minimally invasive procedure make it a very desirable technique in small dogs.