



BRANDYWINE VALLEY

Veterinary Hospital & Surgical Referral Service

Compassionate Pet Care through Client Communication

www.brandywinevalleyvethospital.com

John T. Moss VMD
2580 Strasburg Road
Coatesville, PA. 19320

610-384-0731
610-384-3906 fax
bvvh@verizon.net

Cruciate Surgery Options

Tibial Tuberosity Advancement (TTA)

This is a new, less invasive option to the TPLO surgery and may be becoming the gold standard for cranial cruciate ligament surgery. Since this surgical option is less invasive, it allows for a quicker recovery time. Arthroscopic surgery (minimally invasive surgery inside the stifle joint) using a rigid scope allows excellent visualization of the torn CCL and the meniscus. Like for TPLO, the TTA also puts a cut in the tibial bone; however it shaves off the front of the bone and extends it with a spacer. This technique may also lessen degenerative arthritis around the stifle joint. Its low complication rate and early return to function makes this procedure the preferred method to deal with cranial cruciate disease.

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. Chronicity of cranial cruciate rupture prior to repair has been reported not to affect clinical results after repair with this technique.

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.

Tibial Plateau Leveling Osteotomy (TPLO)

The TPLO CCL repair technique is generally recommended for larger breeds of dogs, as well as active dogs, such as agility dogs. Key things to note about the TPLO surgery are a quicker recovery time, better range of motion, and a return to athletic (working) activity level. TPLO surgery involves cutting the bone, slightly rotating it and reattaching it with a plate. By rotating the top of the bone, less pressure is put on the joint. Because of its high complication rate this procedure is not offered here.

*The Tightrope procedure for CCL repair is no longer offered here at Brandywine Valley Veterinary Hospital.

**The post-operative care instructions for all of these procedures are the same. Patients are to be walked on a three foot leash held in a human's hand or may be in a cage with the door latched for eight weeks. There will be a slow and gradual return to normal activity. **