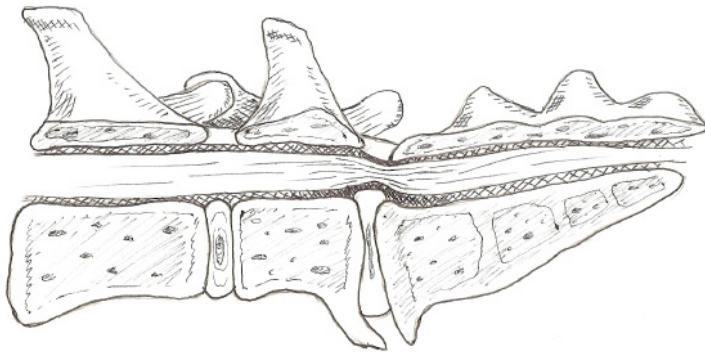


# Cauda Equina Syndrome

Cauda Equina Syndrome is also known as degenerative lumbosacral stenosis, or lower back pain. It is a condition where the nerve roots in the lower back become compressed or entrapped and cause severe, sharp pains. It is usually seen in older, medium to large breed, athletic dogs and is a progressive condition.

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Cauda Equina Syndrome manifests itself in sharp pains in the lower back. In addition, dogs may exhibit lameness, weakness, or stiffness of gait in one or both rear limbs, a reluctance to jump, and difficulty rising. Dogs may whimper or cry out if touched around the tail and rear end or if they move wrong during exercise or normal activity. Strenuous exercise can potentially exacerbate these symptoms. As the condition progresses, dogs may chew at their tail and rear feet. In extreme cases urinary and bowel control is lost and complete paralysis results.

The first step in diagnosing Cauda Equina Syndrome is a neurologic examination. The doctor will observe the dog's gait for any lameness and/or stiffness. A physical examination will include palpation over the spine to determine the site where the dog is most painful. Manipulation of the hips and tail will elicit a pain

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response in most dogs suffering from cauda equina. The doctor will also test reflexes, proprioception (foot placement), and anal tone. Radiographs are taken to confirm certain conditions such as spinal arthritis, infection, or tumors. In addition, an MRI (magnetic resonance image) or myelogram will be necessary to determine the spatial relationship between the entrapped nerve roots and any ruptured disc.

The treatment directly correlates to the degree of the symptoms. Dogs who are exhibiting mild pain and have never had an episode of back pain before are usually treated with strict rest and pain medications. In cases where the dog is not responding to conservative, medical therapy or exhibiting neurologic symptoms, surgical intervention is necessary. The procedure is called a dorsal laminectomy and involves removing the 'roof' of the spinal canal to release the entrapped nerve roots and remove the associated ruptured intervertebral disc. If necessary, a foraminotomy is performed to open the nerve root canals and relieve the entrapped nerve roots.

If surgery is performed, it is VERY important to keep the patient quiet during recovery. Activity will be gradually increased after at least six weeks of convalescence. Obese patients must be put on a strict diet to reduce their weight.

As with many neurologic conditions, a dog's prognosis is dependant on their pre-operative condition. Dogs that were mildly affected will often make a dramatic recovery, while those who were severely or chronically affected will take longer to improve. In some cases, dogs will not return to normal neurologic function, but the surgery will alleviate their painful symptoms.



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