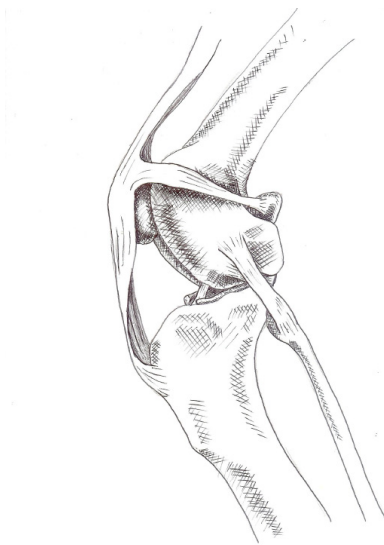


Standard Repair of CCL Injury

The cranial cruciate ligament (CCL) in the dog is one of the major stabilizers of the stifle (knee). It serves the same function as the anterior cruciate ligament in people, preventing internal rotation of the stifle, forward displacement of the tibia (the shin bone), and hyperextension.

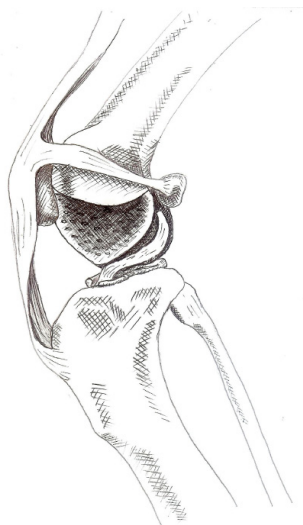
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anterior cruciate ligament in people, preventing internal rotation of the stifle, forward displacement of the tibia (the shin bone), and hyperextension. It can tear during a sudden trauma, or more commonly it slowly deteriorates over weeks or months. Following a CCL tear, the limp is usually severe. While some improvement can occur with time, surgery is the best method to resolve the lameness and to minimize future osteoarthritis.

Following a CCL tear in dogs, it is possible for the other stifle to develop a CCL tear as well within the near future.

There have been numerous surgical techniques developed over the past 30 years. The standard cruciate ligament repair is commonly performed in cats and small dogs with excellent results. It is also occasionally performed in medium to large breed dogs, although the results may not be as desirable as with the osteotomy (bone cutting) techniques, which include tibial plateau leveling osteotomy (TPLO) and tibial tuberosity advancement (TTA). Following removal of the torn CCL, a synthetic ligament is created.



Stability of the stifle is immediate following surgery; but most pets

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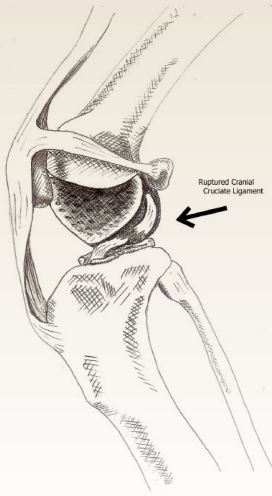
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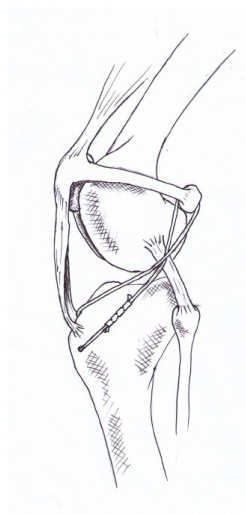


will not fully use the leg for several weeks. A combination of strict rest and physical therapy will benefit in the recovery period and in the ultimate use of the leg. Especially in the larger dogs, future degenerative joint disease (arthritis) is expected even following surgical repair.

Strict rest is required following surgery to allow for proper healing. Initially, there should be no running, jumping, playing, stairs, or use of furniture. After the first month of strict rest, a gradual introduction of controlled activity is

performed until 3 months following surgery. Physical therapy is also performed to improve the speed of healing.

Most complications following a standard repair are minor in nature. With some minor complications, additional medications or other forms of physical therapy may be required. Major complications, such as those requiring additional surgery, are not common. As long as the activity restrictions we provide are adhered to, the chance that additional surgery will be needed is low. After the healing is complete, it is rare for problems to develop.



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