

# **Brown Surgery Referral**

## **Client Handout: Femoral Head Osteotomy**

### **Better Understanding Your Pets FHO Surgery**

The FHO can be a surgery that causes a lot of initial anxiety with the pet's owner. That is very understandable since the mechanics don't translate well with any human surgery. There are many reasons why a pet might benefit from removing the femoral head and neck. Femoral head Osteotomy (FHO) can be performed in dogs and cats with dislocated hips, broken femoral head, hips that are very arthritic and Legg-Perthes disease (a developmental hip degeneration).

The goal for this surgery is to create a false hip joint that will be more comfortable and yield better mobility than the patient had before. In essence, it relies on the surrounding tissues and muscles to hold the leg in place just like in the front limbs. Since results are generally so good with surgery, often simply removing the femoral head is the least invasive, least costly, and fastest route to a pain-free mobile hip.

### **Surgery**

The hip joint is a ball and socket type joint that attaches the rear leg to the trunk of the body. The ball part is the head of the first long bone of the rear leg, called the femur, and the socket is the part of the pelvis known as the acetabulum. Also keeping the bones in their proper location are the muscles of the hip. When the femoral head is cut off, there is no more ball and socket, just basically an empty socket. The femur is kept in place by the leg muscles and eventually a fibrous connection forms what is called a false joint around the acetabulum and the area where the femur used to be.

As seen in the diagram to the right, you will see a normal hip joint on the left side compared to the right side that shows after surgery was performed.

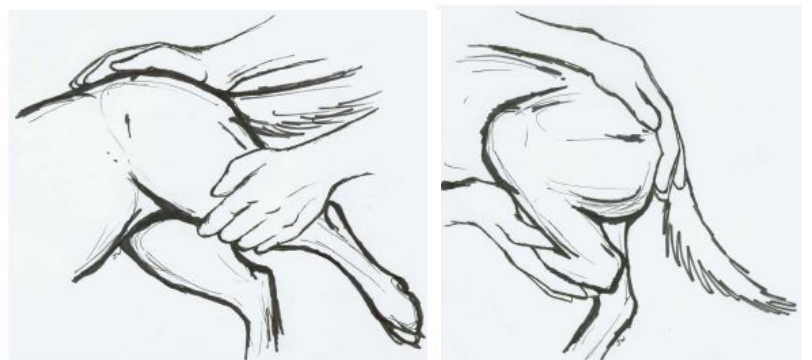


### **What To Expect After Surgery**

The focus is on pain management and rest since the tissues are healing from having been cut and manipulated during surgery. Your pet will be on pain management medication and will go home mobile on three legs. The leg on the side of the surgery will be held off the ground. There may or may not be visible stitches. The pet should be confined indoors to one room during the first 14 days of recovery, during this period no running or jumping onto furniture. Dogs should be walked on a leash outside to go to the bathroom and right back in with no further walks outside.

### **Rehabilitation After Surgery**

Two weeks after surgery the foot should be touching down. If your patient is not touching down then (Passive Range of motion or PROM) should be performed. This consist of moving the hip forward and back will help keep the muscles from becoming stiff or scarred. The hip should receive flexion -extension movement as seen in diagram below.



Do not perform PROM if your dog is too painful. Try to keep the movements to a range that does not evoke pain. If you think your dog is in too much pain for any of this, notify your veterinarian so that the pain management regimen can be revised. If the false joint forms too tightly, normal range of motion will not be regained so exercise is very important during this time.

The goal is to strengthen muscle and prevent atrophy from disuse. Walking (especially up stairs or uphill), and “dancing” (holding the pet up by his front legs and walking him on his hind legs). These exercises should be easily performed. Healing is generally complete after six weeks. This may be prolonged by arthritis, the size/weight of the patient, or long-standing scarring or atrophy of muscles. More formal rehabilitation programs can be designed for patients with these situations or who are behind schedule on their recovery for unknown reasons.