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Pet Care

by Peter Segall, DVM

Surgery

Surgery, medicine and preventive care constitute the main duties of veterinarians.

Preventive care includes vaccinating for common diseases of dogs and cats, such as distemper, parvovirus, rabies, Lyme disease and cat upper respiratory disease. Routine blood work to evaluate liver and kidney function, check for diabetes, look for infection or anemia, etc. are now being done to identify the beginning of diseases and treat them before they become serious.

Medicine involves diagnosing and treating disease conditions of all body systems, including the skin, nervous system, urinary and gynecological, ophthalmological and musculo-skeletal systems.

Surgery is one of the most exciting and interesting aspects of veterinary medicine. It is a discipline that requires the use of the mind as well as the dexterous use of the hands. All veterinarians can handle the routine surgeries such as spay and neuters, skin mass removals, dentistries and common surgery of the internal organs. There are instances when your veterinarian may not want to perform a particular surgery. Anesthetic risk is a very serious consideration when deciding whether or not to do a surgery. There are certain breeds that are anesthetic risks. English bulldogs, for example, are notorious for dying under anesthesia. The majority of these deaths are related to the cardio-pulmonary system. Its pushed-in face, swelling of the pharynx and throat make breathing difficult. Other short-faced breeds share these same issues. Thin-skinned, short-haired dogs easily lose body heat in spite of new methods to keep them warm. Heat loss can cause breathing and cardiac abnormalities by affecting parts of the brain controlling these functions. Older animals, with decreased kidney and liver function, cardiac disease, high or low blood pressure, need special skilled monitoring and adjustments to medications and IV fluids to get through lengthy anesthesia.

The surgery to be performed may determine if a surgical specialist is needed. The advances in veterinary medicine are similar to those in human surgery. Availability of technically superior instruments and

materials allows us to do procedures which were not possible ten years ago. The result is the proliferation of surgical specialists. Some veterinarians have advanced training and board-certification. Others are general surgeons, some specializing in one particular aspect such as orthopedics, neurology, ophthalmology, or gastroenterological procedures. The costs of specialized instrumentation would not make sense to the general practitioner who might be called upon to do a procedure only two or three times a year. In addition, many of these procedures are complex. You need someone who does them frequently and has the experience to deal with complications. I remember the days before specialization when I would be called upon to do whatever surgical procedure was presented. I enjoyed and was adept at surgery and always felt good putting everything back together in fine shape. People in this day and age, however, expect and deserve a specialist in a difficult case. In my next column I'll write about some specific surgeries I think you will find interesting.

We had a bit of excitement this week with Oliver. Oliver is not an outside cat (our decision, not his). His successful attempts to escape the confines of our humble abode causes us much consternation. Usually he hides under the back deck and we eventually capture him.

Last week around 9 pm, the door did not completely close after I let Annie out. I looked up to see an open door and a cat tail trailing down the back steps. I figured that he'd go to his usual haunts and we'd have him within the hour. I went out to search, but no Oliver. We walked the yard, peering under everything with a flash-light but no sign of him. I went out throughout the night in my bathrobe. No Oliver. The next day Laura printed up signs with his cute picture and nailed them to telephone poles. That night Laura went out of the house for an hour and came back saying that the flashlight picked up a pair of green eyes in our neighbor's yard but got no response when she called him. Then I went to the neighbor's yard and saw green eyes under a car. I called, but got no answer. I went home and called his name every 10 minutes. At bedtime (28 hours missing), we decided to go out for one last search.

I opened the back door and Oliver, standing on the railing, jumped inside. Tears of joy were shed in the Segall household. Even Annie gave him her best I'm glad to see you routine.

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