



## Gross! "Veterinary English" Part I

This past week I removed a ruptured, bleeding splenic mass from a 10 year old yellow Labrador retriever named Rocket. Rocket belonged to a young family, and all family members (mom, dad, brother, sister and at least one grandparent) waited in one of our examination rooms while we performed Rocket's surgery. After we finished with the surgery, and Rocket was safely in recovery and extubated, I went into the exam room to explain my findings to Rocket's family members. We discussed common questions regarding the length of the incision, the number of 'stitches', as well as some of the important post-operative milestones that Rocket would have to meet before we felt safe discharging him from the hospital. In addition, I remember being asked by one of the adult pet owners whether I thought the mass I removed from Rocket was 'cancer'.

At this point, I fell into a discussion that I have had many, many times before, and I'm certain to have many times into the future. In essence, I found myself explaining to Rocket's entire contingent that: "it is rare, and only occasionally possible, upon visual inspection of the gross tissues, to determine whether we are removing cancerous masses or a benign process known as hematoma. Both of these processes can look similar and amazingly alike, and we are often left wondering about the results until the report is returned from the pathologist". Naturally, there were several questions and discussions generated from this, that took place over the subsequent few minutes, and when I felt as though our conversation was winding down, I indicated that Rocket could receive visitors in a few hours. Then, just as we were wrapping up, the 9 year old little boy in the room said, "Hey mister, you said the tissues were gross, if the tissues are really gross, I wanna see them". This

exchange certainly brought an obvious measure of levity to the circumstances and reminded me that there are many 'words' we use every day in our practice that can have more than one meaning!

Two years ago, when we first brought our new born daughter Emery home from the hospital, our first daughter Eva, 3y old at the time, asked quietly and sweetly "Mama and Papa, when will Emery be able to speak English?" After my wife and I stopped laughing, we gently explained to Eva that, "Emery does, in fact, communicate with us in her own way, it is just up to us to determine what she's saying, speaking the way we do will take some time. Her version of English is just a little bit different than ours."

What seems to be true, whether for Eva who wanted Emery to 'speak English', or for a 9 year old little boy who wants to see 'gross tissues' is that we all have everyday words that we use that may have more meaning and more nuance depending on who's ears are on the receiving end of our discussion. It really, then, comes as no surprise that the everyday language of veterinary medicine and our dialogues on the clinic floor are chalk full of words with many meanings, many versions, and, without doubt, many whimsical stories attached.

This year VSC will dedicate the newsletter series to "Veterinary English", and maybe we can see, by year's end, that we are all in for a heavy chuckle!

Sincerely,

**John J. Haburjak, DVM Diplomate ACVS**

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## CONTINUE TO EXPECT...

Direct contact with a VSC surgeon 7 days a week for consultation, case support and for scheduling referral and mobile surgery.  
(925-201-3400 or 510-595-4600)

Electronic case and radiographic case consultation 7 days a week.  
info@vscdsurgerycenters.com

24 hour/day surgery by a completely trained veterinary surgeon. Residents will not be performing surgery on your referrals.

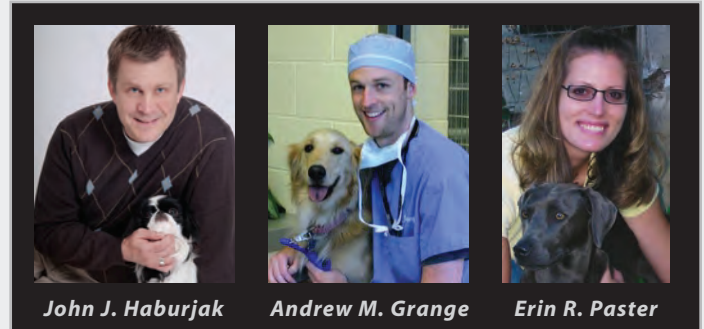
Mobile veterinary surgical services by a skilled and experienced surgeon with 'low-impact' on your daily staff and procedural operations.  
Most surgeries (including TPLO) are performed in less than 2 hours.

## SUMMARY OF SERVICE OFFERINGS

### WHAT CAN VSCD OFFER YOUR FACILITY?

- Board-certified surgical expertise
- Receiving referrals for advanced consultation, diagnostic and surgical services
- Providing surgical services at your facility with minimal impact on your daily operations and resources
- Offering telephone or electronic (email) consultations
- Giving on-site continuing education lectures personalized to the needs of your staff
- Providing complimentary informational brochures and pamphlets for use internally and for clients

## THE SURGEONS OF VSC



## FEATURED MEDICAL CASE

### GASTRIC ULCERATION

With a great deal of frequency, when a patient is referred to our practice for evaluation of conditions that are perceived to cause pain (lameness, neoplasia, trauma) – they are regularly on prescriptions for pain relief and control. By far, the most ubiquitous medication family that are prescribed are NSAIDs. Non-steroidal anti-inflammatory agents (NSAIDs) are a class of drugs used both in the home by the pet owners themselves, and in veterinary medicine for treatment of a wide range of painful conditions. NSAIDs are consistently a cost-effective and convenient strategy for analgesia in painful acute and chronic disease states and for mitigation of discomfort associated with procedures. These characteristics have increased the use of NSAIDs for pain control in our animals. However, the judicious use of NSAIDs must include a balance between relief of symptoms and side effects. The most common NSAID-associated toxicities in companion animals are renal toxicity and gastrointestinal ulceration. Other less common but potentially life-threatening side effects include hepatotoxicity, platelet dysfunction and bleeding, and aplastic anemia.

### PATHOPHYSIOLOGY OF COMMON SIDE EFFECTS

NSAIDs provide their effect by inhibiting enzymes that produce prostaglandin pro-inflammatory mediators. There are two major classes of NSAIDs commonly used in veterinary medicine: COXIBS (which selectively inhibit COX-2 isoform while ideally sparing the "cytoprotective" COX-1 isoform) and traditional NSAIDs which inhibit both the COX-1 and COX-2 enzymes. Examples of NSAIDs which inhibit both include: ketoprofen, carprofen, and etodolac. Examples of COXIBs are: celecoxib, deracoxib, meloxicam, and previcoxib.

Both the COX-1 and COX-2 enzymes serve important homeostatic roles in many body systems. The inhibition of these enzymes produces both the therapeutic benefits as well as the toxicities. COX-1 is a constitutive enzyme

...Featured Medical Case continued

that plays an important role in maintaining renal and gastrointestinal blood flow as well as ensuring platelet integrity. COX-2 has traditionally been thought to be an inducible enzyme that is upregulated in inflammatory disease. By far, the most common toxicity we experience in our practice are GI related.

### GASTROINTESTINAL SIDE EFFECTS

All NSAIDs have the potential to cause GI side effects. Animals at an increased risk of having gastrointestinal side effects include geriatrics, animals receiving multiple NSAIDs, as well as animals receiving concurrent glucocorticoid therapy. It is contraindicated for animals to receive multiple NSAIDs or glucocorticoids in addition to NSAIDs.

Sandy, an 11y old female Irish Setter presented in a collapsed condition after a 4d history of intermittent vomiting and anorexia. Sandy had been on chronic NSAID therapy for multi-joint DJD. Initially the vomitus appeared to be food and phlegm, but more recently began to take on the appearance of granulated brown sugar and coffee grounds. Upon presentation, she was in hypovolemic shock, had free abdominal hemorrhagic ascites and was anemic (PCV: 16%).

Her work-up included abdominal radiographs (Fig. 1) which showed large volume ascites and free peritoneal air. Her abdominal ultrasound demonstrated a large centric thickening in the lesser curvature of the ventral aspect of the gastric lumen, wide spread peritonitis and generalized intestinal ileus.

Upon abdominal exploratory we found two ulcers (Fig. 2) – one a chronic, healed ulcer and one large, perforating, bleeding ulcer. These ulcers were surgically removed, and abdominal sump drains were placed. She had a prolonged hospitalization, after which she was successfully discharged from the hospital.

NSAIDs are effective medications that provide a significant amount of relief from pain associated with both chronic and acute inflammatory events. However, before initiating NSAID therapy, it is recommended to educate clients on signs of toxicity and exercise prudent patient selection based on physical examination findings, concurrent drug therapy and preexisting diseases. Adjunctive methods such as weight loss and chondroprotective agents may help reduce untoward side effects of NSAIDs. During therapy, early recognition of signs of toxicity, both through routine monitoring and client based observations, are essential for safe NSAID therapy.

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continually removed and humidity can be increased or decreased. Ports allow access for IV lines and probes for monitoring devices, and portholes allow the practitioner to reach in without opening the main doors. The animals under treatment are easy to view.

## NEWSROOM FEATURES

### EQUIPMENT UPGRADE!

We are continually committed to providing cutting edge equipment in order to provide the best care for our patients, and our newest addition, a Snyder Mfg. Co. self-contained Intensive Care Unit (ICU) for small animals is no exception. It accommodates one or more animals requiring extraordinary life support. The patient compartment is oxygen enriched with precise controls. Carbon dioxide is

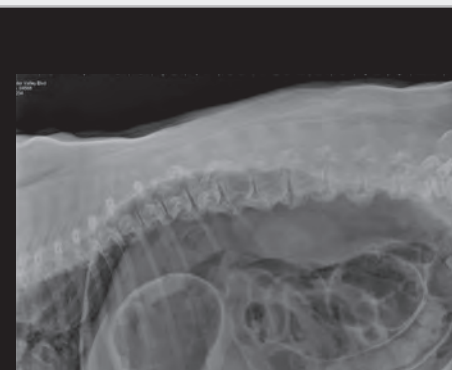


Figure 1: Lateral abdominal radiograph demonstrating free peritoneal air (note multiple spondylitis)

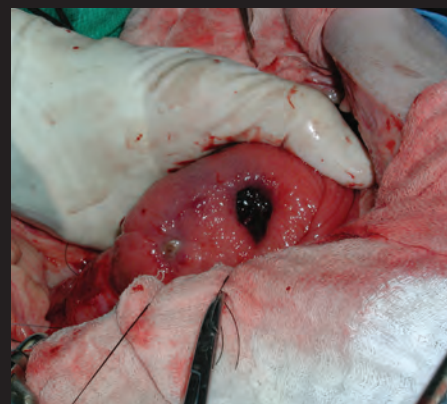


Figure 2: Intra-operative photo of perforated (acute) and healed (chronic) gastric ulcer

## NOTABLE NEWS

### *Pets Referral Center & Veterinary Surgical Centers Proudly Present...*

We'd like to extend a big thanks to everyone who attended our continuing education event this last year in November and helped to make it a smashing success. We had a packed house, the event went off without a hitch, and everyone had a great time. The event included reception, dinner, and lecture featuring "Under Attack: IMHA Updates and Treatment Dilemmas" presented by Andrea Sotirakopoulos, BVSc, MS, DACVIM, and "Surgical Management of Lipomas" presented by Veterinary Surgical Center's very own big cheese, John Haburjak, DVM, DACVS. We'd also like to extend a thanks to HS Lordships in Berkeley for a wonderful meal and venue, and to Abaxis and Animal Health International for their generous contributions. If you did not receive notification of this event, but would like to be included on the guest list for future events, we'd love to have you, so please contact us at:

**[info@vscdsurgerycenters.com](mailto:info@vscdsurgerycenters.com)**



Know that things will be different – for a while at least. Exercise restriction lasts for an average of eight weeks following most orthopedic procedures. Some dogs can be confined in a crate if they are small, as can large dogs who have been previously crate trained. Otherwise, a small separate area away from other pets and small children is ideal. The area should be large enough for a bed, food and water bowls, and should be a non-slip surface. As long as your dog cannot run, jump, or slip in this confined space, it should be fine. In addition to the "special" room, any areas they might walk in or through should also have a non-slip surface. Runners, yoga mats, or bath mats can be used for this. Free access to slippery floors, stairs, and off-leash activities are not permitted. Outside activity will include short leash walks (short in both leash length and length of walking time). Walks will most likely be limited to every 6 to 8 hours for 5-10 minutes each.

## PROFESSIONAL INTEREST ARTICLE

### *CANINE POST-OPERATIVE ORTHOPEDIC CARE Made Simple for Everyone*

While many clinical professionals play a big role in a dog's orthopedic procedure, believe it or not, the most important job may lie at home with the owner. Owners are often unaware of the crucial role they play in their pet's post-op recovery. In fact, even though I have worked in the veterinary field for many years, I was surprised by the amount of time and care my dog needed following his TPLO surgery. My 9 1/2 year old Pit Bull went "under the knife" twice last year for a common CCL rupture injury in his knees. He had his first TPLO March 2011 and his second that August, both with Dr. John Haburjak. In this article, I wish to share my experiences through the eyes of an owner, and to offer my professional and personal insight to help make your pets post-op care go smoothly.

Some examples of VSC's orthopedic surgeries include cruciate ligament ruptures, luxating patellas, spinal surgery, total hip and elbow replacements, dislocations, fusions, angular limb correction, and fractures. All of these surgeries are very different, but each requires similar aftercare. In virtually every case, a dog will go home and need weeks to months of exercise restriction, pain control, general assessment and care, medication administration, and quite possibly some physical therapy. The recovery period is a stressful time for all involved. It is a lot of work!

The first step is to prepare – both yourself and your home.

Preparing for your pet to come home into a modified environment takes creativity, space, time, patience, and in some cases money. Preparation is one of the keys to a successful recovery. For most owners (myself included), the first thing to deal with is the emotional trauma of knowing that your pet is in pain and needs surgery. Everyone wants to do what is best for their pets, but it can be a stressful and tough decision for the family. Once the decision is made however, it is critical that the preparation also begin. Though you will be worried and nervous while your dog is away, it is wise to use this time to set up your home for the arrival of your very special post op critter.



...Professional Interest Article continued



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Know that your schedule will change. The first week or two are the hardest, as the whole family is trying to become used to the new routine. Most at-home "treatments" are on a six to eight hour schedule. Pain medications are likely the most important scheduled medication and will usually need to be administered every eight hours, and most medications need to be given with food. Eight hours is just enough time to sleep, work, or run errands, so be prepared to have to adjust your schedule accordingly (if possible). I like to tell people, "Do the best you can and always do what is best for the entire family."

Know that it gets better. As time goes on and your pet begins to recover, don't be surprised if he/she begins to look like a pup again. While this is obviously a sign of improvement, don't let the wagging tail and puppy-dog eyes fool you: it is still important to wait the full recovery period before resuming normal activity. Watch how your dog responds as you begin to increase activity, and don't hesitate to call your vet if you feel something is wrong.

Remember, no two recoveries are alike! Even my dog's knees were different. Some dogs have a rocky recovery and some are smooth. Some are extraordinary and some are uneventful. The bottom line is that seeing them recover and feel "normal" again is an amazing feeling, especially when you know that you played a significant role in it all. Looking back, eight weeks of recovery seemed like an eternity to my husband and I when we committed to our boy's first TPLO. But after it was over and we saw that he was doing so well, we could just celebrate our success and our decision to have Dr. Haburjak operate. When he tore his other knee, we did not even hesitate and embraced his continued recovery for the months to come. He now enjoys running around like the young pup that he used to be. Needless to say, it was totally worth it!

**Renee Leo, RVT**

## RESOURCE CORNER



[www.toppetwebsites.com](http://www.toppetwebsites.com)

This website is a good place to start for just about anything pet related. Find resources for pet products, services, charities, blogs, educational resources, and more. You can check out their featured sites, or search by popularity, category, or by specific search. If you don't know exactly what you're looking for, or just want to see what's out there, this is the site for you.



[www.globalanimal.org](http://www.globalanimal.org)

This site is an online daily news magazine focused on pets and wildlife. It's features range from headline news and current events involving animals, to pet care advice columns, to little bits of fun, such as cute animal videos and picture galleries. If you're looking for something specific the site has pull down menus to make it easy, or you can check out their front page for a dash of it all.



[www.pedigree.com/oralcare/denture-your-dog.aspx](http://www.pedigree.com/oralcare/denture-your-dog.aspx)

Looking for something silly to pass the time? Then look no further! On this site you can upload a picture of your own dog, or use one of the preloaded options. Then choose between the sets of ridiculous "doggie dentures" and even give your pooch something to say through their new chompers. There is also a gallery where you can see what masterpieces other folks have created.

FEATURED BROCHURE



*HOW TO PREPARE YOUR DOG FOR ORTHOPEDIC SURGERY*

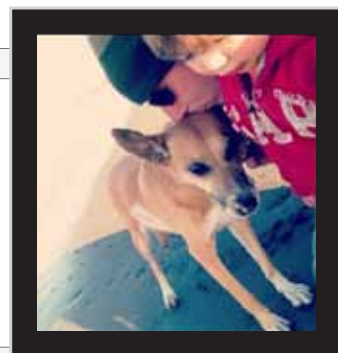
This winter's highlighted pamphlet features advice for preparing dog owners for their pets orthopedic surgery. The information is broken down into an easy to follow question and answer format, covering the most pertinent and commonly asked questions that arise prior to a canine orthopedic surgery.

This is an excellent tool, in conjunction with a doctor's specific post-op care instructions, to help supplement an owner's preparedness for their dog's surgery and recovery time back at home. The simple language and format of this particular pamphlet also make it a valuable resource for any staff and clientele who want to develop a foundational understanding of canine pre-surgery preparedness.

This and other brochures can be found at and downloaded from our website at [www.vscdsurgerycenters.com](http://www.vscdsurgerycenters.com). For complimentary copies of any of our brochures or business cards email us any time at [info@vscdsurgerycenters.com](mailto:info@vscdsurgerycenters.com).

This newsletter is dedicated to "IO" Shepherd (11/30/2002 - 1/18/2012). IO the dog was a beloved family member of our facility architect, who is a friend of everyone here at VSC Berkeley and Pets Referral

Center. IO passed on after battling with cancer, but led a full life of bringing cherished memories to her family who will always have a fond place for her in their hearts.



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