Post-operative Information: Laryngeal Tieback

Your pet has had a unilateral cricoarytenoid lateralization, or “Tieback” performed to treat laryngeal paralysis. This surgery involves changing the anatomy of the larynx (the opening to the windpipe) and permanently fixing it in a semi-open position (with a suture prosthesis) to improve airflow to the lungs.

ACTIVITY RESTRICTIONS
- Please keep your pet in a safe location with no free access to stairs for the initial 24 hours following the procedure.
- Keep your pet cool and quiet for the next 6 weeks. Try to prevent situations that create excitement and especially barking. You may take your pet for 5 minute walks in cool weather during this restricted period.
- Do not use a collar for the next 2 weeks, to avoid irritation to the incision and surrounding area.

INCISION CARE & MONITORING
Please monitor the incision area daily for the following signs:
- Gapping or drainage
- Swelling—Warm compresses applied to the area will encourage the fluid to reabsorb more quickly (3-7 days). If the swelling progressively enlarges, please have your veterinarian assess the problem.

RECOVERY MONITORING & COMPLICATIONS
- When your pet initially comes home, please note his/her breathing rate and quality. This will be your baseline for comparison as you monitor your pet's recovery.
- Aspirating fluid or food into the lungs is a common complication, with 25% of all animals developing aspiration pneumonia at some time following surgery. If aspiration occurs, the early signs are increased breathing rate and effort, lethargy and fever; you may also hear and see a deeper, moister sounding cough.
  
  Please call and return immediately for a progress exam if you notice these changes. The earlier we diagnose aspiration pneumonia, the easier it is to treat, as this can be a life-threatening complication.
- You may expect some light coughing with drinking and eating after surgery. This will usually diminish with time.
- Your pet’s voice will always remain hoarse and raspy. You will hear a louder than normal breathing sound when panting, but it should be quieter than his/her pre-operative status. A potential complication of this procedure is the breakdown of the suture prosthesis; this can occur immediately or over months/years. If you notice a return of the loud panting and breathing difficulty with excitement and heat, please return to your veterinarian for re-evaluation.

PROGRESS EXAMS
- Please return for progress appointment with your veterinarian in 10-14 days. They will assess your pet's healing and recovery, remove the skin sutures, and address any questions you may have at that time.

FEEDING
- To prevent stomach upset, feed your pet their normal food. If it is dry kibble, soak it until soft to make it easier to swallow. Some pets will require assistance eating initially after surgery. You can form the food into meatballs and feed one at a time. Have them standing up when you feed and encourage them to walk around during and after eating.
- Elevate your pet's food and water dishes to a height such that they do not need to bend over to eat and drink. Pet stores and online sites sell dish holders of various heights that work well.
- Some dogs are very fast eaters; this behavior may predispose to food getting caught in the throat. Slow down their eating with simple changes, such as feeding smaller amounts in multiple bowls and locations.

LONG TERM LIFESTYLE
- Even with this airway correction, you should consider your dog to have a compromised airway. Avoid strenuous activities, especially during hot weather, for the rest of his/her life.
- Dogs with laryngeal paralysis and a surgical tieback may not be able to tolerate swimming. Their airway is now fixed in an open position, so water can be aspirated into the lungs easily. Use caution and monitor closely any swimming or retrieving of bulbs in the water.
- Over the long term, you should use only a chest harness or head halter for restraint when walking your pet.
- Some dogs will develop esophagus problems over time. This is likely related to the initial disease process that caused the larynx to be paralyzed. If you notice your dog “burping up” liquid or swallowing and smacking lips frequently, he/she may need medications to stimulate esophageal motility and reduce stomach acids to prevent regurgitation and aspiration pneumonia. Additionally, there is an association between laryngeal paralysis and limb weakness. The exact cause of both conditions is not known, but presumed to be part of the same disease process. If you notice weakness problems, please have your pet evaluated to determine if this is related to an underlying disease process.

The majority of owners are very pleased with the outcome of surgery for laryngeal paralysis. Your dog will need to be monitored for signs of aspiration pneumonia for the rest of it’s life and some modifications in activity may be necessary. Most importantly, your pet should now be able to breathe more easily and live a more comfortable lifestyle.

Twin Cities Veterinary Surgery