

Informed Consent

Luxating Patella Repair Medial Patella Luxation (MPL) Repair Lateral Patella Luxation (LPL) Repair

Your pet has been diagnosed with a luxating kneecap/ sliding kneecap/patella luxation. Most often, we deal with medially luxating patellas (MPL), but treating laterally luxating patellas (LPL) is very similar. You have elected surgical repair suture to treat this condition. The surgery includes a few procedures we use (as needed) to keep the patella stable. These procedures may include the wedge recession trochleoplasty (making the home for the patella deeper, less likely for the patella to be able to move), a tibial crest transposition (TTT; used to alter the attachment of the patella tendon and direct the pull on the patella opposite to the direction it luxates), lateral imbrication (tightening of the joint capsule on one side), and/or a medial release (loosening of the joint capsule on the other side). The prognosis is excellent with surgery, however, we need to make you aware of a few of the common complications that could arise after this surgery. If you have any questions or concerns, please let us know.

The risks of complications after patella luxation repair is low, about 5-10% of cases. Here are some potential risks:

Recurrent luxation- the repair utilizes a variety of surgical techniques to keep your pet's patella stable. In addition, the impact of scar tissue and healing may affect the repair. There is the risk of recurrent luxation in the same direction (under-correction) or luxation in the opposite direction (over-correction) as was present prior to surgery. The risk of recurrent luxation increases with the higher grade of patella luxation (those dogs with worse patella luxations are at higher risk of recurrence). Generally, we recommend revision in cases of recurrent luxation.

Implant problems- including loosening/migration, breakage, infection, or failure. In some cases surgery may need to be revised or implants may need to be removed.

Infection- this is a risk with any surgery and is usually treatable with oral antibiotic therapy and in some cases may require removal of any pins or wire. Specifically, infection of the joint (septic arthritis) is rare. Aggressive treatment of joint infections is necessary, if present.

Arthritis (osteoarthritis or OA)/degenerative joint disease (DJD)-despite our goal of stabilizing the patella, there may have been damage to the joint because of the luxation and this often leads to arthritis. Arthritis will progress, despite therapy, and although the surgery will allow your pet to compensate for this much better than without surgery, its

possible the arthritis may progress enough over time to affect your pet. Medical therapies can be discussed at that time.

Other rare complications include fracture of the tibial crest, patella tendon rupture, damage to the long digital extensor tendon, fracture of the trochlear ridge, loss or migration of the wedge fragment, fracture of the femur.