



Surgical Treatment of Compressive Hydrated Nucleus Pulpous Extrusion in Dogs

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Results and Discussion

Treatment

Surgery was advised due to the severity of the spinal cord compression and the heterogeneous appearance of the herniated material, which indicated at least partially hard disc material. The canine was positioned in a sternal recumbency while a right-sided hemilaminectomy (L2-3) was carried out utilising a dorsal technique. Surgery results supported the IVDE diagnosis. The material was recognised as a mixture of white gelatinous and partially hard material (cartilaginous look). The cord appeared to be sufficiently decompressed over the length of the hemilaminectomy, and all visible material had been removed. The collection of specimens was done for histopathologic and cytologic analysis. A urinary catheter was inserted after the wound was usually stitched up. Regardless of the breed, MRI provides more information than CT contrast for the examination of intervertebral disc extrusion. Several stages of hydrated nucleus pulposus extrusion (HNPE), with varied quantities of hydrated nucleus pulposus and spinal cord compression, may take place. Compressive HNPE may require surgical intervention.

Achievement and follow-up

The dog underwent successful surgery, and postoperative care included the administration of fentanyl-ketamine-lidocaine CRI solution (2 ml/kg/day intravenous (IV)), a fentanyl transdermal skin