

Range Animal Hospital**E6116 US Highway 2
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Atlanto-axial Subluxation

- An uncommon cervical spinal lesion mostly in small breed young dogs: miniature Poodles, Chihuahua, Pekingese, and other small breeds.
- It is the result of the agenesis, lack of ossification, or fracture of the odontal process of the axis [the dens], causing loss of the dorsal atlanto-axial ligament. The resultant instability causes subluxation and spinal cord compression.
- Clinical signs vary and can include slight cervical pain to complete paralysis.
- Sometimes difficult to diagnose, it should be the primary rule-out for cervical pain, paresis, or paralysis in small young dogs.
- Plain radiographs are generally diagnostic; the widening of the dorsal atlanto-axial space being obvious. Extreme care must be taken if a flexed lateral image is desired. Sometimes imaging the dens is helpful. We find the open mouth view of the ventral atlanto-axial area to be the most rewarding. Myelography is rarely needed.
- If spinal cord compression is minimal and clinical signs are not dramatic, conservative care should suffice initially. Since most cases progress, sometimes with catastrophic results, surgical intervention should be scheduled with minimal delay. A neck brace is appropriate.
- With severe paresis or paralysis, a neck brace must be placed and surgical intervention taken with out delay.
- While this is a potentially life threatening disease, patients without spinal cord destruction often quickly return to function.
- We will coordinate postoperative care with your hospital. Typical care includes:
 - A 4-5 day postoperative incision check.
 - A 10-12 day suture removal.
- If the need is due to acute paresis or paralysis, call ASAP with your request for referral. It is appropriate to call Dr. Martinson after hours to aid in coordinating his schedule.
- Surgery is done daily as needed. If it is indicated for non-life threatening disease, surgery will generally be scheduled for Monday, Tuesday, or Thursday. The patient typically has a 2 to 3 night hospitalization.
- Please send any preoperative laboratory tests and radiographs.
- Uncomplicated cases are \$2200 to \$2400 [January 2011]. Difficult cases with protracted post-operative recoveries and in hospital physical therapy will be representatively more. Ask for an estimate.