



Wheat Ridge Veterinary Specialists

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Laryngeal Paralysis – postoperative care

Laryngeal Paralysis is a condition seen most commonly in older dogs (and rarely in cats). The condition is associated with loss of nerve function to the muscles that control opening and closing of the airway — the LARYNX. The larynx normally opens and closes like elevator doors — OPENS to allow air in and out of the lungs; CLOSES to allow food and water to go past the larynx down the esophagus into the stomach. Continuing with the “elevator door” analogy, laryngeal paralysis would be similar to a power outage — the doors will not open; therefore, air can not move in and out of the airway or lungs. This condition occurs to various degrees — sometimes the doors do not open at all, sometimes the doors open partially. SURGERY to correct this condition involves opening one of the elevator doors in a permanent manner — lateralization or “tie-back” of one side of the larynx.

After surgery, patients experience an immediate improvement in their ability to breathe and pant.

POSTOPERATIVE CARE — the patient must be kept quiet for three (3) weeks following surgery to allow for proper healing. **Activity is limited to short walks on a leash and harness — no running, playing, or excitement is allowed.** Some coughing or gagging may occur with eating or drinking, this usually resolves during the postoperative period. Patients should be offered food and water from an **elevated** surface. Please feed and adjust your pet’s diet according to your surgeon’s recommendations. Some surgeons advise that only moist food made into meat balls be fed, while other surgeons recommend that dry food be fed — please discuss this with your surgeon. Many patients lose the ability to bark — this can be a partial or permanent loss. Some patients are sent home with a short course of antibiotics, or other medication, for the immediate postoperative period.

Once healing has occurred (three weeks postoperatively) the patient can return to normal activity on a scheduled basis. Patients are allowed a 15% to 20% increase in their activity level each week for a four week period. At the end of this four week rehabilitation period, patients should be back to their full prior level of activity. Almost all patients experience a significant improvement in their exercise tolerance and endurance.

POTENTIAL COMPLICATIONS — because one of the elevator doors is now permanently open (the larynx is now half open) there is an increased risk that the patient may aspirate (inhale) some food or water when eating or drinking. Aspiration (inhalation) of food or water may result in pneumonia. Symptoms of pneumonia include persistent coughing, loss of appetite, and lethargy. Swimming is associated with a higher risk for aspiration; therefore, swimming is discouraged but not forbidden (many older hunting dogs have returned to active hunting and water retrieving following surgery for laryngeal paralysis).

IF YOU HAVE QUESTIONS OR CONCERNS, PLEASE CALL.

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