

VET LESSONS



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HOW TO CARE FOR A CAT RECOVERING FROM ORTHOPAEDIC SURGERY

HOW IMPORTANT IS EXERCISE RESTRICTION? If surgery is necessary, our primary goal is to return your cat to their normal lifestyle as quickly as possible. This means our top priority is to avoid a setback which triggers a second operation. We call this a *major complication*. The images below show two examples of major complications.

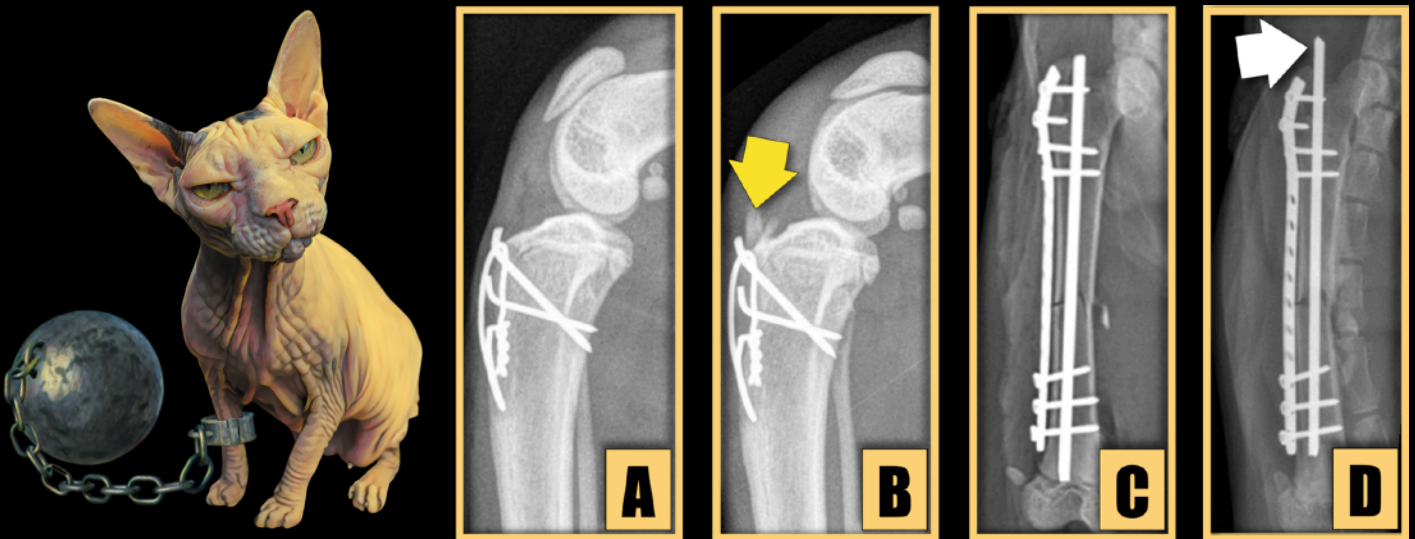


Image A shows a cat's knee joint immediately after surgery for a dislocating kneecap (also known as patellar luxation). In **image B**, taken a few weeks after surgery, the metal implants are unchanged, but a fragment of bone has cracked off the tibia (shin). This complication isn't caused by a surgical error. The implants are the correct size, but a cat's bones are so slender that a single jump can cause the bone around a metal implant to break. This complication can be fixed, but the second operation is more complex than the first, and the 'recovery clock' resets to zero. **Image C** shows a high-quality surgical repair of a young cat's broken femur (thigh bone). In this example, the metal pin has 'pistoned' out of the bone - **image D** (white arrow). This complication probably occurred gradually; i.e. too many steps were taken in the first few weeks of recovery. This mode of failure is called 'cyclical fatigue'.

WHAT TYPE OF EXERCISE IS SAFE? Orthopaedic implants are able to tolerate the forces applied by a walking or trotting cat. Slow-moving cats are 'front-wheel drive' and light on their feet. When a cat runs or jumps, they switch to 'rear-wheel drive' and generate huge propulsive forces which implant systems rarely tolerate. The commonest feline bone and joint surgeries involve the hindlimbs. For example, hip surgery, knee surgery and pelvic or hindlimb fracture repair are common orthopaedic operations. Veterinary surgeons recommend

cage rest or small room confinement to prevent the harmful forces generated by running and jumping. As walking and trotting are typically well tolerated, most surgeons are happy for cats to be harness-walked after bone and joint surgery.



CONFINEMENT: Solitary confinement of people is a human rights violation which causes extreme anxiety and depression. If we're not careful, our confined cats could suffer similar avoidable stresses. Protecting them from harm means striking the perfect balance. In effect, we must simultaneously safeguard their physical and mental health.

There's no single recovery programme to suit the vast array of feline injuries, operations, and personality types, so the following guidelines cannot replace the specific instructions supplied by your veterinary team.

FELINE FENG SHUI: This image shows an example of a safe cat recovery space.



A - RECOVERY AREA: If you're using a crate, the minimum surface area is 1.25m x 1.25m, and at least half of the cage should be covered by a curtain. If you use a small room instead of a crate, there must be no furniture taller than 30cm (e.g. the height of the hide-box in this image). The room's surface area should not exceed 3m x 3m, and there must be no opportunity for your cat to escape when you enter the room.

B - HIDE BOX: Shelter cat studies found hide-boxes are regularly used by 8/10 confined cats. As some cats prefer to 'survey their kingdom' from the roof of their hide-box, I recommend placing an obstacle on the hide-box's roof (e.g. another closed box).

C - FOOD AND WATER: Many cats require up to 3-days to return to their routine habits, including eating. Reduced appetite on the first day after returning home is typical. Studies of confined cats showed recovery of appetite was better for individuals in an undisturbed environment with a predictable schedule. On average, tuna was their preferred food. Heating food increases palatability and kills food-borne bacteria. As cats become more stressed with random disturbances or an unpredictable schedule, food and water should only be replaced at scheduled visiting times.



D - AROMATHERAPY: A synthetic analogue of the feline facial pheromone (FFP) is available as a **plug-in diffuser** or **spray**. If you want to include play during visiting times, note that anxious cats prefer moving toys which contain catnip, but please remember that running and jumping aren't safe. When you change your cat's bedding, try to leave at least one item behind that smells familiar.



E - LITTER TRAY: Keep a litter tray on the opposite side to food and water bowls. Note that confined cats often refuse to 'go to the toilet' for a remarkably long time. One shelter cat study found that 1 in 4 cats urinate on day one, and only 1 in 5 defaecate. It can take several days before cats attempt to defaecate after surgery because general anaesthesia dramatically increases gut transit time. A good rule-of-thumb is to contact your veterinary team if your cat is straining unproductively to urinate or defaecate. You might need to switch the standard litter tray for a shallow kitchen tray to make it easier for your cat to climb in and out.

VISITING TIMES AND 'HOUSE CLEANING': A recovery space includes the immediate outside environment. Lack of a predictable routine, excessive noise, and other disruptions may adversely affect your cat's psychological wellbeing. Whether you play, pet or motivate your cat with their favourite food, daily interaction is essential. Including feline housemates at visiting time could reduce stress. Visiting times should incorporate your daily cleaning routine. Try not to remove everything from the crate daily, rather spot clean. If your cat misses the outdoors, you can move their crate or build a **secure single-storey "catio"**.

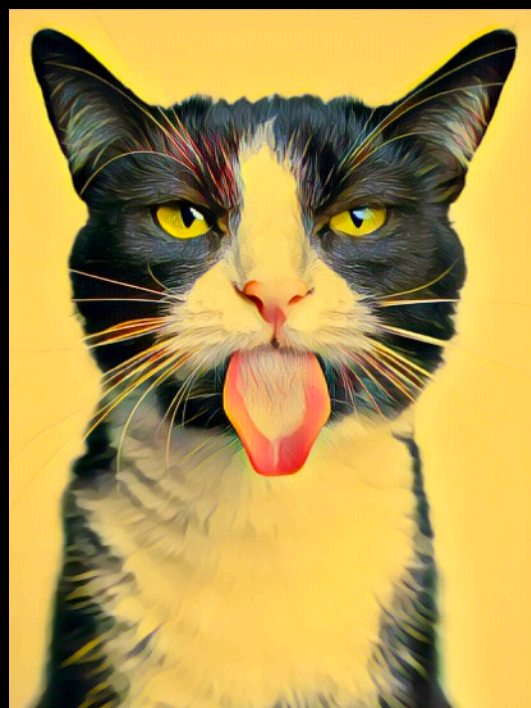
MUSIC - Here's a **15-hour playlist** created for anxious cats. Remember a cat recovering from surgery needs more rest than normal, so avoid music after dark.



PAIN CONTROL: Your cat's orthopaedic surgery team will have used a combination of very powerful painkillers for their operation. Nerve blocks and epidural injections are used routinely. This image shows an epidural injection being given to a cat before their broken pelvis was repaired. Injectable painkillers include methadone, buprenorphine and ketamine. Veterinary teams use feline-specific pain scales to determine when to stop injectable painkillers or when to give extra painkillers to hospitalised cats. You can find two of these scales [here](#) and [here](#). Your cat won't return home until their pain can be controlled using oral painkillers.

Always follow the instructions printed on the label and remember the full data-sheets for all prescription painkillers are available online. If you're worried about giving tablets, ask your cat's nurse to show you how it's done or [watch this video](#).

THE SURGICAL WOUND: Surgical incisions are closed in multiple layers. The exposed skin layer has buried (absorbable) or visible (non-absorbable) sutures. The knots used to secure buried sutures normally produce a visible bump at either end of the incision. These bumps are a favoured target for compulsive groomers. A cat who isn't wearing a protective collar can easily use their abrasive tongue to unpick their surgical incision. If you find your cat has removed their own collar, please check their wound carefully. This is especially important for cats with metal implants in the lower part of the leg because implants can become exposed if your cat opens their wound. Ask your cat's nurse which collar design (rigid-plastic or flexible-cotton) is best for them.



'TYPICAL' RECOVERY: Your surgeon will provide information about the typical recovery rate based on cats with similar injuries to yours. Remember your cat is unique, which means their surgical recovery is also unique. A graph charting improvement won't follow a straight line. In many common scenarios, the most accurate forecast your surgeon can make is that good days should gradually outnumber bad days.

REASSESSMENT: Your cat's veterinary team will supply a recovery schedule which includes essential checks. Here are three ways to avoid the stress of additional visits:

1. Request your cat's discharge instructions before you collect them. You can prepare their recovery space and send photos for your cat's surgery team to check.

2. Spend at least 10-minutes reading your cat's discharge instructions. If possible, read them to a family member and invite them to ask you questions. As discharge instructions contain far too many important facts for you to remember after a single read, you'll need to refer to them several times over a 6-8-week recovery period.
3. Keep a video recovery diary. If you're concerned about your cat's recovery, share it with your team to help them decide if an urgent recheck is required.

ABOUT THE AUTHOR

Mike Farrell is a cat lover who graduated from the Royal Veterinary College in 1997. He's published over 50 peer-reviewed papers and book chapters, holds the ECVS diploma in small animal surgery, and is an EBVS and RCVS board-certified specialist.



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