

April 2021

Cataract Surgery at Rowe Referrals

Cataracts are a common cause of vision problems in both humans and animals, successful treatment can make a huge difference to vision and an animal's quality of life. There are many causes of cataracts and as with anything in medicine we need to understand the cause of the cataract to successfully manage them.

As a general rule, cataracts are a surgical problem, if they are progressive or showing even subtle signs of likely progression on assessment early surgery carries the best results – surgery is often more predictable, and complications associated with the cataract such as lens induced uveitis or lens capsule rupture are less likely to be present.

We routinely perform detailed screening including electroretinography to ensure there is good retinal function, gonioscopy, ocular ultrasonography and biochemistry, haematology and urinalysis prior to surgery. Following assessment, we usually arrange a mutually convenient time for surgery and start pre-surgical treatments. If appropriate we may suggest some problems are managed prior to surgery, for example if there is dental disease we may suggest a scale and polish prior to surgery, as well as being a source of bacteria, the disease teeth and gingiva may act as an inflammatory focus that could fuel post-operative uveitis. Some rapidly developing cataracts such as those associated with diabetes are however best treated as an emergency as lens capsule rupture can occur extremely rapidly following their development.

More so than following cataract surgery in humans, the care in the post-operative period is vital for success. There are numerous potential complications such as glaucoma,

uncontrolled uveitis, retinal detachment, suture failure that can commonly occur. Sadly, in some instances complications can be sight or eye threatening, we hospitalise our cataract patients post-operatively with 24/7 care to enable early identification of problems and swift management. Whilst complications most commonly happen soon after surgery, long term complications do happen and again early identification is the key to success, we therefore advise twice yearly check-ups of our patients following surgery.

We are proud that we always try to go the extra mile to ensure success and to help clients navigate through all the decisions and care required. As well as being stressful, complications can also have potential financial implications that can be a worry to owners, to help once we have assessed a case, we are able to offer a fixed price promise where we are able to manage complications free of charge for the first six months post-operatively (excluding medications) to give extra peace of mind.



What we do

- Ophthalmology
- Orthopaedics
- Soft Tissue & Spinal Surgery
- Dentistry
- Laparoscopy
- CT Scanning
- MRI
- Ultrasound
- Internal Medicine
- Radioactive Iodine
- Neuro Diagnostics
- Acupuncture

CPD Events – online and on demand

As we are unable to hold our usual in-house events or invite you over to spend time with us and a referred case, we have moved our CPD online and are hosting regular events. If you would like to register for our next online session or be notified of future events please email us at referrals@rowevetgroup.com or follow us on Facebook.

Online CPD
Events now
available.

Meet the team spotlight on...

Andrea Garcia Gramser Resident in Veterinary Dentistry at Rowe Referrals

Andrea grew up in Spain, graduating from the Complutense University of Madrid in 2000. She moved to the UK in 2011 where she worked at a first opinion practice in Frome, and 3 years later she moved to Rowe Vets where she developed an interest in all things dental. She will be completing her European Certificate in Veterinary Dentistry within the next few months, and she is also a second year resident at the EVDC college where she is training to become a diplomate of Veterinary Dentistry and Oral Surgery. She is a self confessed crazy cat lady having achieved her GP Cert in Feline practice, and her particular clinical interests are in both feline and geriatric surgery. Outside of work Andrea enjoys cooking and walking her whippet crossbreed Nutmeg.

Case Study: A tale of two parathyroids...

In the last month our referrals team have managed two patients with primary hyperparathyroidism, which presented differently. Read on to see how the different teams all got involved in these cases.

Jake, a 9-year-old Beagle (pictured), had a fantastic investigation performed by his referring vet. Originally presenting with an increase in urination, it didn't take long for Jake's hypercalcaemia (4.0 mmol/L [2.36 - 2.84]) and isosthenuria (USG 1.008) to be detected.

Further investigation with the referring vet included a specialist ultrasound to screen for malignancy, and measurement of plasma Parathyroid Hormone (PTH) concentration. These investigations revealed enlargement of a single parathyroid gland (5.0mm) and an elevated PTH concentration (42pg/ml [3.0-30]). There was focal mineralisation in both kidneys, and a sand-like sediment in the urinary bladder with large numbers calcium oxalate crystals. Fortunately for Jake though, there was no sign of malignancy; no significant concerns on his abdominal ultrasound, and the PTHrP was low (<0.1pmol/L [<0.5]). Jake was referred directly to the Soft Tissue Surgery service at Rowe Veterinary Referrals for a parathyroidectomy, to remove the enlarged parathyroid gland.



Mollie, an 8-year-old female neutered WHWT, originally presented to the Ophthalmology service at Rowe Veterinary Referrals for assessment of her diabetic cataracts. Her diabetes mellitus was well-controlled, with no sign of excessive thirst or urination, and a stable body-weight. Pre-anaesthetic bloods showed a moderate hypercalcaemia (3.7mmol/L [2.00-3.00]). It was elected to proceed with Mollie's cataract surgery and monitor the calcium levels and she made a successful recovery. In the following weeks, however, her calcium levels remained elevated and she began to develop calcium deposits in her cornea. Referral to the Internal Medicine team at Rowe Veterinary Referrals was recommended. Mollie's investigations and findings were similar to Jake - she had enlargement of a single parathyroid gland (4.2mm) and elevated PTH (87pg/ml [3.0-30]).

Mollie and Jake both underwent surgical parathyroidectomy of the affected gland, and made excellent recoveries from their surgeries. In both cases, the abnormal parathyroid glands were confirmed to be parathyroid adenomas, which are benign.

Both dogs also had very high ionised calcium concentrations >1.9mmol/L at the time of surgery. After surgery, there is a risk that blood calcium levels can drop rapidly - particularly when the pre-operative ionised calcium is so high. Both dogs were started perioperatively on a vitamin D (calcitriol) supplement. The internal medicine team were responsible for monitoring both patients to ensure they made a gradual return to normal calcium levels. A graph of Mollie's ionised calcium is shown here.

