

EAR DISEASE:

True or False - Ear surgery in dogs and cats is usually performed in geriatric patients.

False! Unfortunately, ear surgery is often performed in dogs and cats after prolonged disease. Chronic otitis externa is particularly aggravating for clients, referring veterinarians, and especially the patient. In Cocker Spaniel dogs, chronic otitis externa is marked by ceruminous gland hyperplasia and obstructive disease of the ear canal (*Fig. 10*). The



Fig. 10 Ear canal obstruction in a Cocker Spaniel dog.

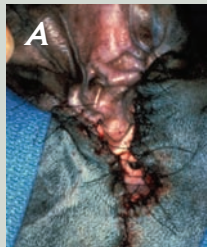


Fig. 11 The decision to perform lateral ear canal resection (A), TECA (B), or vertical ear canal resection (C) depends on the severity of ear disease.



writing is on the wall in such cases that the ear is not going to respond to medical management as noted by the bag of medicine carried by the owner. Total ear canal ablation (TECA) is the surgery of choice for refractory cases, and why not sooner than later? The procedure provides a pain-free result and it has been shown that dogs have bony conduction of sound to hear high-pitched sounds after bilateral TECA. By performing the procedure relatively early, the pain-free interval for the patient is maximized (*Fig. 11*)!

In cats, nasopharyngeal polyps originate in the middle ear and may extend to the pharynx, external ear, or both (*Fig. 12*). Simple avulsion of the polyp by traction is associated with an approximate 50% recurrence rate. Ventral bulla osteotomy to remove the source of the polyp should be considered as a rule-out especially in younger cats with refractory clinical signs of either otitis externa or rhinitis. Upper airway disease marked by rhinitis is due to the obstructive effect of the pharyngeal location of the polyp. Young cats are often misdiagnosed as having viral rhinitis with a

secondary bacterial component, whereas chronic otitis in young cats is often mistaken for parasite infestation. The key diagnostic tests include comprehensive otic and pharyngeal examinations, and a bulla radiographic series.

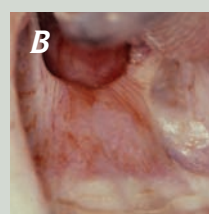
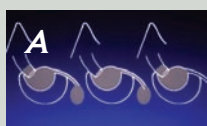


Fig. 12 Illustration (A) and photographs showing how feline nasopharyngeal polyps can extend into the pharynx (B) and ear canal (C).



Fig. 13 Early SCC of the pinna in a cat requiring partial pinnectomy.

Neoplasia of the ear pinna in cats is most commonly squamous cell carcinoma (SCC). Dermatitis lesions should be biopsied to determine if the lesion is pre-cancerous or cancerous. Early SCC may be treated by partial pinnectomy, while recurring SCC may require aggressive en bloc surgery including TECA (*Fig. 13*).

Smith MM. Ear, nose, and throat surgery. In: Smith MM, Waldron DR. Approaches for General Surgery of the Dog and Cat. WB Saunders; 1993; 2-15.

(continued from front - Oral Tumors)

The referring veterinarian is involved in all components of the decision making process from the decision to perform surgery, goals of surgery, and advice concerning the recommended oncologist for continued patient care. In summary, oral surgery either cytoreduces, or preferably removes the entire tumor. However, even with negative tumor margins, the expertise of the oncologist to provide follow-up adjunctive care is always recommended.

Smith MM. Advanced maxillofacial reconstruction techniques. In: Verstraete FJM, ed. Textbook of Oral and Maxillofacial Surgery, Elsevier, in press. Taney KG, Smith MM. Resection of a mast cell lip tumor in a dog. J Vet Dent, in press.