

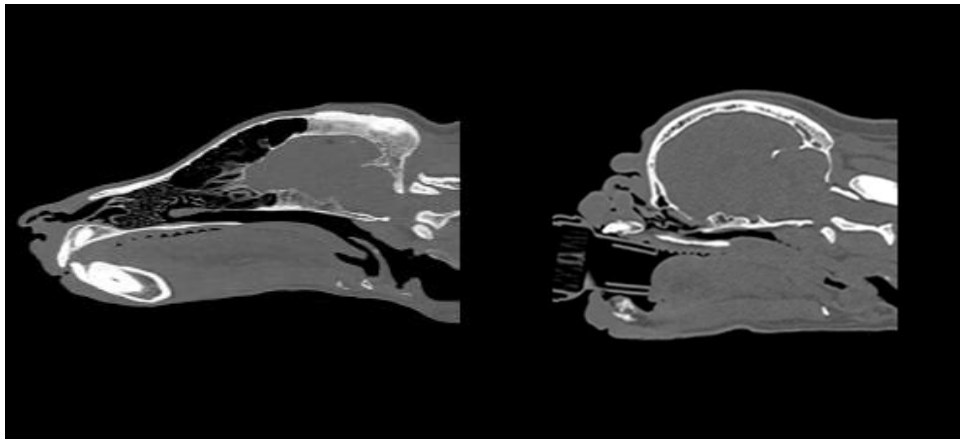


Brachycephalic Upper Airway

Brachycephalic = Short head. Usually they have a normal lower jaw and an abnormally short upper jaw.

Common breeds: Pug, Boston Terrier, French Bulldog, Bulldog, Pekingese, Shih Tzu, Japanese Chin, Boxer, Lhasa Apso and Cavalier King Charles Spaniel.

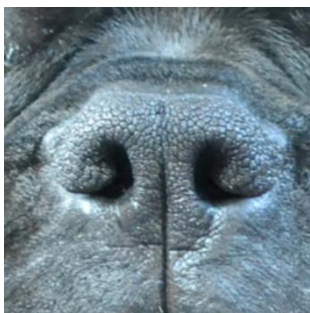
Predisposed to upper airway obstruction and respiratory distress.



German Shepherd Vs Pug

Clinical Signs:

Respiratory noise – Long/thick soft palate, narrowed/collapsed larynx, stenotic nares/deviated nasal septum/abnormal growth of nasal turbinates



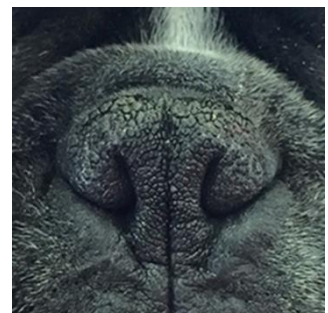
Normal



Mild

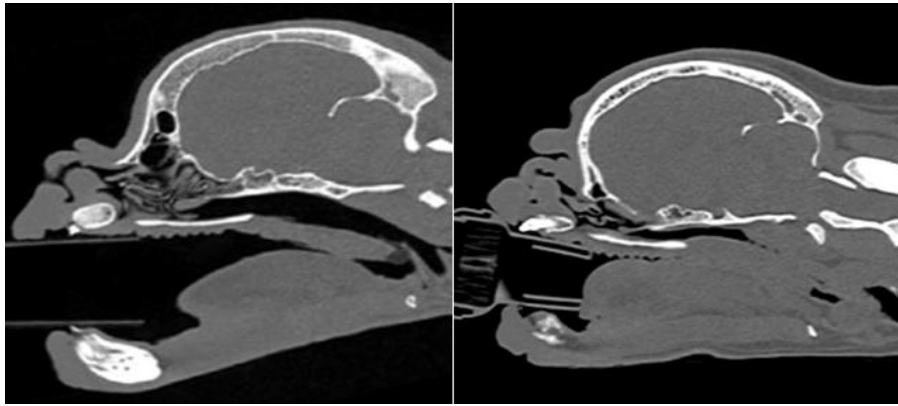


Moderate



Severe

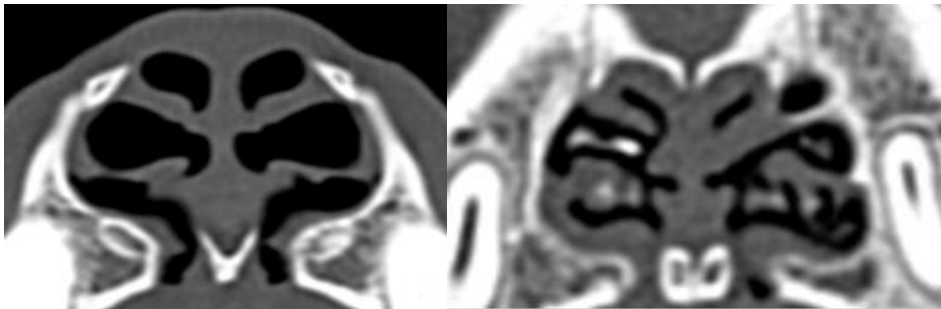
Gastrointestinal signs and difficulty eating – Excessive pharyngeal folds and elongated soft palate can impede swallowing. Regurgitation is common due to oesophageal diverticula (pouches) and/or hiatal hernia (stomach partially sliding into chest). Can cause gastroesophageal reflux.



Normal Soft Palate

Thickened/long soft palate

Obstructive sleep apnoea and sleep disordered breathing – Long soft palate vibrates and causes snoring sounds, especially when sleeping. Dyspnoea (difficulty breathing) and apnoea (lack of breathing) can occur during sleep, this can be life threatening.

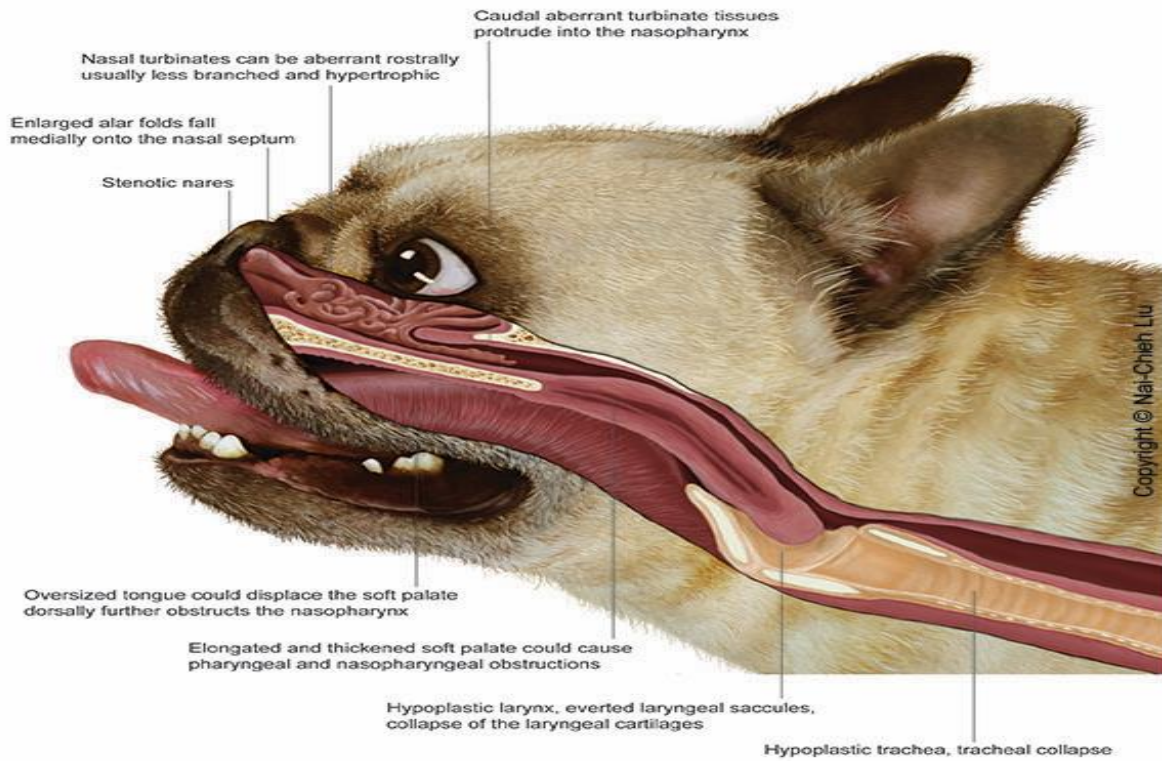


Normal Nasal Cavity

Abnormal Nasal Cavity

Heat intolerance – An obstructed nasal cavity limits heat exchange and therefore dogs can overheat during exercise, leading to heat stroke.

Cyanosis and collapse – A restricted airway means they may not be able to meet oxygen demand which can lead to cyanosis (blue tone to skin), collapse and loss of consciousness.



Grading:

Signs are not always present at rest therefore we use the '3 minute trotting exercise tolerance test'.

Grade 0 – BOAS free, annual health check if dog less than 2 years old.

Grade I – Clinically unaffected, mild respiratory signs, annual health check if less than 3yo.

Grade II – Moderate respiratory signs, clinically relevant disease and requires management – Weight loss and/or surgery.

Grade III – Severe respiratory signs, requires a thorough examination and surgery.

BOAS is not curable, however upper airway corrective surgery can provide a better quality of life. Revisional surgery may be required in some severely affected dogs.

Here at The Meopham Veterinary Hospital our surgeons perform this procedure on a regular basis and accept referrals in this discipline. We have dedicated, on site 24 hour care at the Hospital and these patients will have a nurse with them at all times to ensure their recovery is as safe as possible. We have advanced patient care monitoring equipment and are RCVS accredited to the highest level.

For further information or to book a BOAS assessment please contact us on referrals@meophamvets.co.uk or call us on 01474 815333.

All BOAS procedures are carried out by Dr Martin Hobbs, Dr Rupert Davenport or Dr Penny Barnard-Bosma. They all continued with post graduate study and have each gained further accredited certificates, one of those being in small animal surgery. With 57 years of combined Veterinary experience please rest assured that your pet is in experienced hands.

Our team:

Dr Martin Hobbs, Practice Principal & owner. BSc (Hons), BVetMed, CertSAS, CertVDI, CertVOphthal, MRCVS.

32 years of experience.



Dr Rupert Davenport. BVSc, CertAVP (GSAS) MRCVS.

16 years of experience.



Dr Penny Barnard-Bosma. BSc, BVetMed, BSAVA PGCertSAS, PGCertVID, MRCVS.

13 years of experience.

