

SPAY ([OVH] OVarioHysterectomy)

Associated Terms:

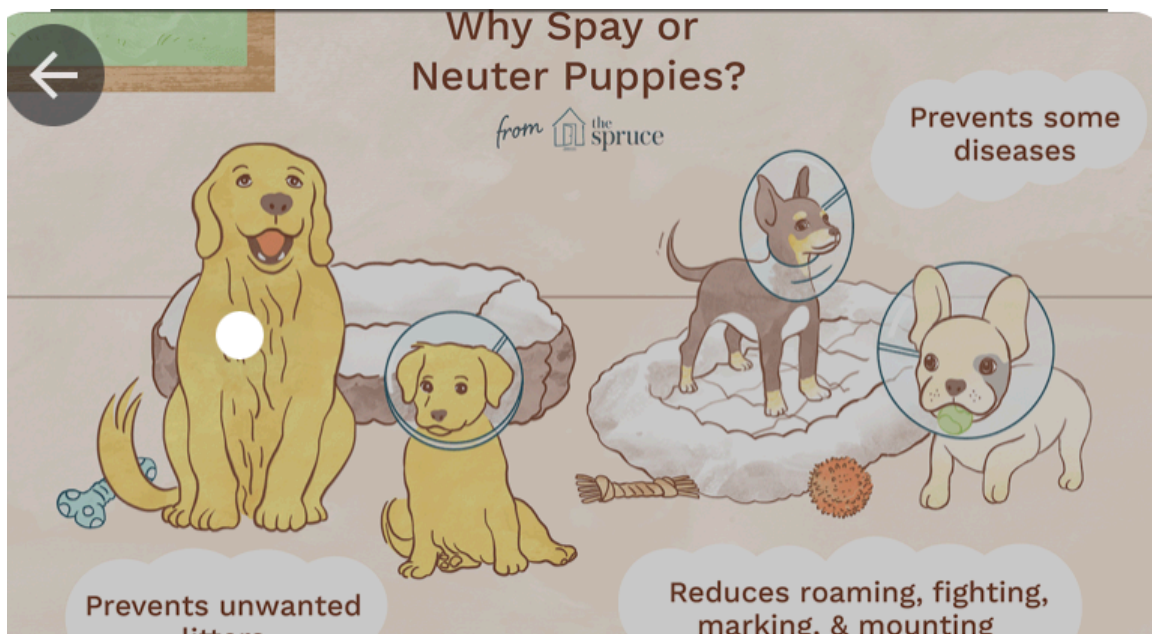
Hysterectomy, Ovariectomy

OVERVIEW

Due to recent advances in veterinary medicine, more options are now available when it is time to have your pet “spayed.” The surgery may be done in a traditional “open” manner or through minimally invasive means using laparoscopy. Procedures that may be performed include **ovariohysterectomy, the surgical removal of the uterus & ovaries, or ovariectomy, when only the ovaries are removed.** All of these procedures are performed under general anesthesia. Most primary care veterinarians recommend performing these procedures at approximately six months of age, but they can be performed on dogs of any age. They may be elective, or a treatment for a disease process.

The following are **reasons to consider having your pet spayed:**

- Vastly decreased chance for development of mammary (breast) cancer
- 200 times less likely if a spay was performed before the first estrus (heat cycle)
- Eliminates chance of developing a [pyometra](#) (infection of the uterus)
- Eradicates unwanted estrous behavior & associated bleeding
- Eliminates unwanted pregnancies & risks of dystocia (difficult birth)



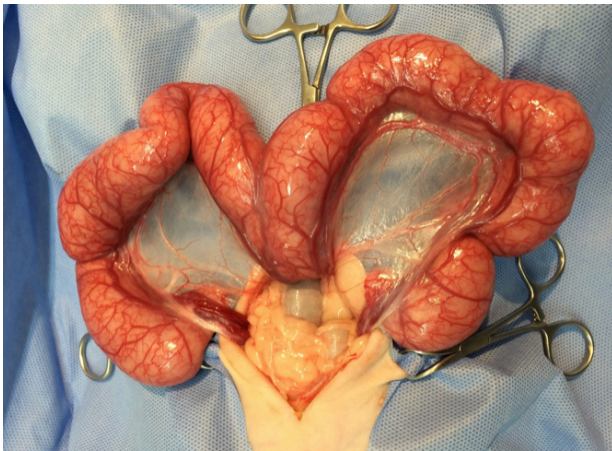
SIGNS & SYMPTOMS

Most young healthy pets being spayed do NOT have any clinical signs. However, if your pet has a disease of her reproductive tract, such as [pyometra](#), dystocia or ovarian or uterine cancer, she may show signs associated with this disease process.

DIAGNOSTICS

Medical workup for a routine ovariohysterectomy or ovariectomy generally consists of:

- Complete physical examination
- Additional tests for older dogs may include a complete blood count, serum chemistry, & urinalysis
- Abdominal radiographs (x-rays) & possibly ultrasound may be necessary in dogs presenting with [pyometra](#) or dystocia



TREATMENT

Laparoscopic Surgery

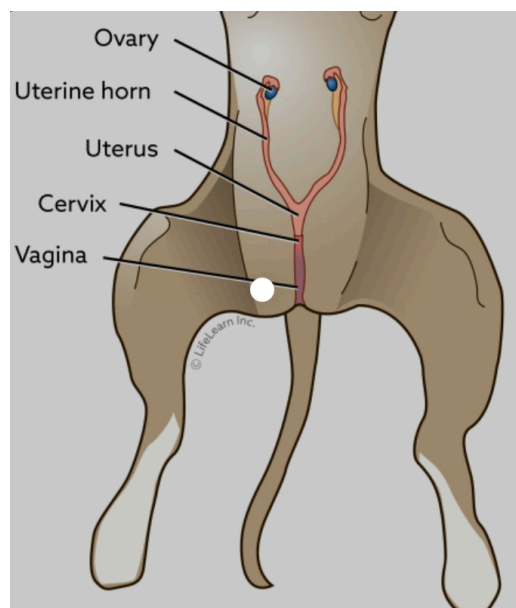
Procedures vary, but generally, **2-3 small (usually less than one inch long) incisions are made in the abdomen for insertion of a laparoscope & instrument ports.** The abdomen is distended with carbon dioxide gas & the laparoscope is introduced to visualize the reproductive tract. Instruments are used to grasp & manipulate the reproductive tract through the instrument ports. Blood vessels can then be ligated with clips, suture or a vessel-sealing device. Ovariectomy or ovariohysterectomy can be performed using this method. After removal of the reproductive tissue, closure of the portal sites is performed. This minimally invasive procedure requires specialized equipment, training & increases cost significantly.

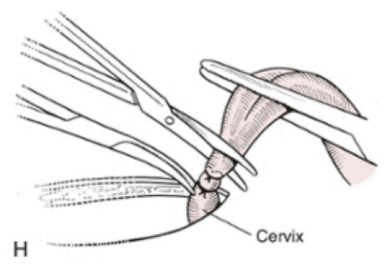
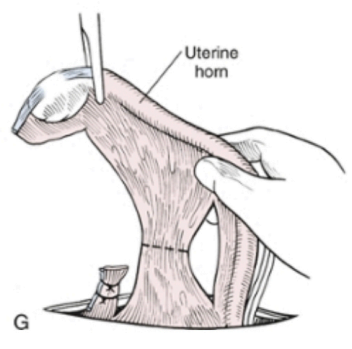
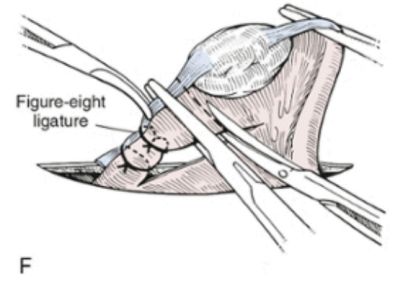
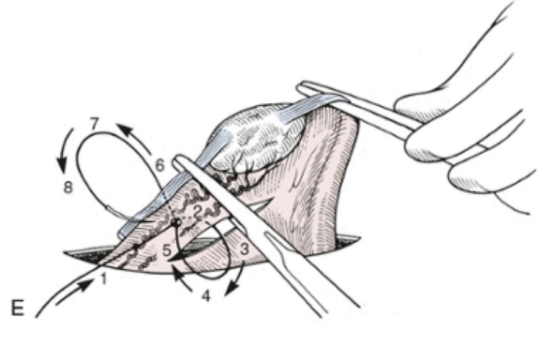
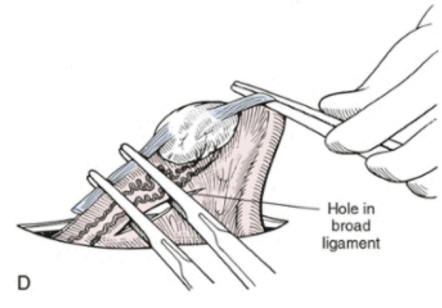
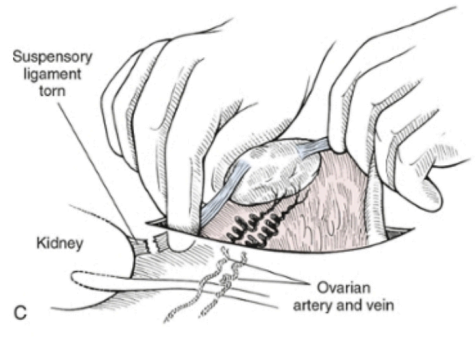
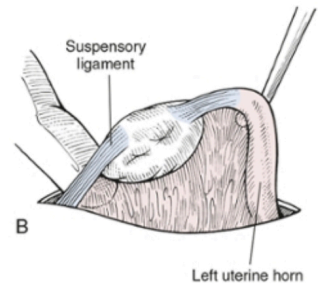
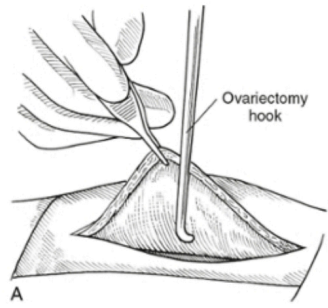
Open Surgery

The surgical incision is usually made on the abdominal midline, although a flank approach can be used (older technique). The length of the incision varies depending on the size of your pet & other factors. The ovaries &/or the uterus are exteriorized & ligatures are tied around blood vessels supplying the portions of the reproductive tract to be removed. Following removal of the ovaries &/or uterus, the incision is closed in layers, including the body wall, SC tissue & skin.

Ovariohysterectomy (Ovaries/Uterus Removal) vs. Ovariectomy (Ovaries Removal)

Ovariohysterectomy has been the most common “spay” procedure performed in the United States for many years. However, recent literature has shown no long-term difference in outcome between pets receiving ovariectomy or ovariohysterectomy. Based on those findings, the 2 procedures can be considered essentially equivalent to one another. In Ovariectomy technique, the uterus is left intact & may have the potential to develop uterine cancer in the future. As of OVH technique, the uterus has been removed so there is no chance of uterine cancer.





AFTERCARE & OUTCOME

Aftercare includes:

- House rest, with no running, jumping or rough play for 2 weeks following surgery.
- Nocita (bupivacaine): 3-days long lasting local block for pain management will be used.
- Pain medications are often prescribed for several days following surgery.
- Primapore: adhesive band aid with antibiotic ointment will be used. The Primapore can be allowed to fall off naturally after 5 days. Only if the Primapore is dirty or soil that it should be removed sooner. Forcing the Primapore off early may result in skin irritation.
- An Elizabethan collar may be necessary to prevent licking of the surgical wound. Must be wore at all times. E-collar can be taken off during potty breaks or meals only under adult supervision.

Further treatments may be necessary following ovariohysterectomy for treatment of [pyometra](#) or other diseases.

Ovariohysterectomy can lead to complications such as:

- incisional bruising
- swelling
- infection

More serious complications such as hemorrhage & urinary obstruction are rare but can be life threatening. **Ovariohysterectomy can be more difficult in larger or obese pets** & may be associated with more complications. Urinary incontinence reported after surgery, which may require lifelong medical treatment.

The prognosis is excellent for routine ovariohysterectomy & ovariectomy.

The prognosis is more variable following ovariohysterectomy for [pyometra](#) & dystocia.

If you have any questions, please feel free to ask your primary veterinarian &/or veterinary surgeon.

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