

**TUMOR REMOVAL:**

**Tumors on the outside of the body, under the skin, may need to be removed to prevent future problems**



**Overview—“I don’t understand what a “tumor” is; please help me understand the diagnosis and the surgical procedure.”**

You may hear the following terms: lump, growth, mass, malignant tumor, benign tumor. They all refer to a similar thing. Technically, these are “neoplastic” tissues or “tumors”—cells of normal tissues/organs that have become abnormal and unregulated and start dividing like crazy. They multiply over and over until they form a mass of abnormal tissue—a tumor.

If the cells are wimpy, they will just grow and grow inside a capsule and will NOT stick fingers of bad tissue out into normal tissue or send stray cells to invade other organs. We call these Benign Tumors.

If the cells are more aggressive, they grow and grow and stick fingers out into surrounding structures and/or send invading cells to other organs like liver, lungs, lymph nodes. We call these Malignant Tumors.

Surgery is usually a treatment option for some of these tumors—it is a treatment of “local disease” (i.e. the mass and the spreading fingers) but will not treat or prevent the invader cells spreading thru the body (“distant disease”).

**“Why is this procedure being recommended for my pet?”**

At the very least, a tumor can be tested by looking at a needle sample of cells under a microscope. This simple, painless test allows us to say whether this is a tumor versus not a tumor. It will NOT help tell us the difference between benign and malignant or grade the malignant types. If a lump does not look like a tumor on the needle sample test, it may be something related to inflammation, bleeding/bruising, foreign body, etc. (treated according to each specific cause.)

When we have a lump that is likely a tumor, the next step is to decide whether it is more likely a benign tumor or a malignant tumor and how is it likely to behave. Minor surgery can help us answer these questions by getting a biopsy sample, and/or we most often juggle the “odds” of what it is (based on breed, age, location, the feel of it).

The decision to find out exactly what it is with a biopsy *versus* guessing what it is by “playing the odds” is a tricky one. A surgeon will always be happiest with an exact diagnosis; this allows the least invasive surgical (local) removal. If we have only guessed the tumor nature, we may choose to do a larger surgical removal “just in case” there are tumor fingers poking into surrounding structures.

Surgically removing a tumor can result in a cure with benign and malignant tumors. The odds of that cure depend on both the nature of the tumor and the completeness of the surgical removal. If the results of biopsy testing after surgery suggest an aggressive tumor or an incomplete surgical removal (i.e. cells remain behind), then additional recommendations will be made to further treat this tumor.

**“What options do I have to treat my pet’s tumor (no treatment; conservative, medical, and surgical treatments)”**

Some tumors are benign under the microscope and benign in how they behave in the patient. These are small (less than 1-2”), slowly changing (over years), in a safe location (lots of skin, no vital structures nearby). Common types are: lipoma (lye-poma), adenoma (add-i-noma), fibroma (fye-broma).

These same benign tumors can become too large to be safe anymore (they interfere with walking) or they outgrow their blood supply (become oozing wounds). Waiting for them to become problems can create problems! Surgery on bigger tumors in challenging locations with important structures nearby or in areas with limited skin is harder, more expensive, and will likely require more postoperative management on your part.

Small biopsies of some tumors can yield valuable information that helps shape the decision about surgical removal or waiting. Often biopsy can be done with heavy sedation and local anesthetic.

When surgery is required, preoperative planning with the surgeon, your veterinarian and yourself is important for a full understanding of options and postoperative expectations for each option. What option is best for cure? What option is least likely to cause cosmetic defects? What option will require weekly bandage changes with your veterinarian? The final plan is one that fits best with your goals for your pet.

**“What postoperative complications do I need to know and understand when considering this surgery?”**

Skin incision-related problems are the most common postoperative complications. These can be really minor with a slight gap and more crusting than hoped for during healing. Other times, this can be a major event with the need for additional surgery to correct a major skin defect. (And a spread of variations on either end of that major-minor spectrum.) Protecting the surgery site with bandaging or other covering (dog bodysuit, etc.) can definitely help prevent these skin incision-related problems.

If the tumor needs to be removed from a location that is close to important structures or movable structures, complications may be related to those nearby structures (such as eyes or legs or anus, etc.)

**“Are there situations when the surgical outcome is not what we hoped it would be?”**

The visible appearance of the surgical site can be quite variable, from hair color or pattern being altered, to noticeable scar lines. If the visible appearance is important, make sure to fully understand the expected outcome of the surgical mass removal plan.

Tumor recurrence may occur weeks to years after surgical removal; this is more common with malignant tumors; tumors that were not or could not be completely removed; and tumors that not treated with additional therapy (medications or radiation). In general, it is harder and less successful to remove a tumor that has RE-grown after a first removal. For this reason, we strongly recommend curative-intent surgical removal the FIRST time.

**“How is my pet’s life and lifestyle likely to change after this procedure?”**

After the healing period (approximately 3-8wks), there is unlikely to be any long-standing lifestyle changes. If an important nearby structure (eye, leg, anus, etc.) is changed after a tumor is removed, there may be functional changes specifically related to those structures.

**“Are there things I can do to prepare myself, my home and/or my pet for this procedure?”**

Choosing surgical removal sooner rather than later, before a tumor gets larger and more difficult to manage, is generally a good idea.

If tumor removal will involve the body or legs, bodysuits or leg/foot coverings can be very helpful with postoperative management. Many products are available online; explore options once the surgical plan is in place.

**Outpatient surgery and anesthesia** can be uncomfortable, painful, disorienting, and frustrating experiences for animals; watching your pet work through the early postoperative period and recover from anesthesia and pain

medications can be worrisome, scary and frustrating for pet owners. The vast majority of the time this period of difficulty is brief, and *your pet is actually more comfortable and secure at home with you*. Sometimes it doesn't feel like that at two in the morning when your pet is anxious and not consolable, and you are unsure of what to do. You always have the option of transporting your pet to a 24-hour veterinary facility postoperatively. If you do not want to have your pet home in the first few days postoperatively, please advise your primary care veterinary staff. They will provide contact information for a local 24-hour veterinary facility and help get an estimate for the ongoing care.

It is important that you have proper expectations about this procedure; your experience and you pet's outcome will benefit greatly. Please discuss this information with your veterinarian when working through the decision-making process regarding **Tumor Removal**.

**Lara Rasmussen, DVM, MS**

Diplomate, American College of Veterinary Surgery

DIRECT VETERINARY SURGERY, LLC

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