

---

## Gastropexy

---



One of the most useful and efficient ways to convey information to you about your pet is via the written word. We carefully craft these notes to give you helpful information and accurate expectations around your pet's surgical experience.

**Please read this.** *Please save it and read it during each stage of the recovery process.* Surprises make for a stressful time for everyone.

Photo and video examples may be found on our website: [www.directvetsurg.com](http://www.directvetsurg.com) in the Pet Owner Portal under "DVS Resources".

Your pet has had surgery performed on the stomach called a gastropexy—this procedure permanently attaches the stomach wall to the right-side body wall. This procedure is preventative against gastric dilatation with volvulus (GDV; "twisted stomach"), but will not prevent gastric dilatation ("bloat"). GDV is life-threatening and requires emergency treatment and surgery; "bloat" will require urgent veterinary care but is unlikely to require emergency surgery. The gastropexy needs time to heal, so there will be some restrictions in place for six weeks. Ongoing accommodations will be required lifelong to reduce the risk of "bloat".

### GENERAL INFORMATION

Please keep a note of your questions as you and your pet progress thru recovery and address them to your primary care veterinary team. Our surgery group will contact your primary care team on **Day 2** (after their phone follow-up with you) and **Day 14** (after your recheck visit with them) to check in on your pet's progress and see if you have had any concerns or questions. This method will maintain continuity in care and an accurate patient medical record. **\*\*Use your checklist at the end of these notes to make these check-ins complete.\*\***

### ***First few days postop***

Please keep your pet in a comfortable, safe, indoor location without free access to stairs for the next 24 hours as he/she recovers from anesthesia and surgery.

Your pet may be groggy for the next few days. He or she may whine or appear more anxious than usual; this may indicate pain/discomfort or side-effects of the medications.

Please call your primary care veterinary team for assistance with medication adjustments or return for exam and additional pain medications as needed.

Monitor appetite and attitude. *If both do not steadily improve over the next 2-3 days*, please call your primary care veterinary team or return for progress evaluation and problem-solving.

The stomach and intestines often slow down or stop moving after anesthesia and surgery; this can be uncomfortable and lead to lack of appetite. The best way to get the stomach and intestines moving again is to have your pet move around. This need only be standing up and moving around for a few minutes, nothing strenuous. Every 2-4hrs during the daytime, ask your pet to get up to change positions and move around the room a bit. If and when they are feeling stronger, encourage them to walk around the yard with you.

You can expect your pet to have a bowel movement within 5 days. Some animals take longer than others depending on when they last ate prior to surgery and when they started eating after surgery. It may be abnormal in color and consistency for 2-3 days. If you have any concerns, please speak with your primary care veterinary team.

Please confirm that your pet has urinated within 24 hours of returning home. If he/she does not, or you notice any problems related to urination, please speak with your primary care veterinary team.

## MEDICATIONS

It is likely that you have been prescribed one or more medications for your pet over the first 2-3wks of recovery. During the discharge appointment or shortly thereafter, please make sure you understand:

- what each medication is being used to treat,
- what side-effects may develop, and
- whether or not the medication should be refilled and continued.

## BANDAGE CARE

A clear, plastic bandaid may have been applied to the incision (Tegaderm). This will protect the incision from infection from the environment and a wayward pet tongue! It is useful for up to 7-10 days. You may remove it like a "bandaid" at any time. If it is hard to peel off, waiting longer will make for easier removal. There is no urgency in taking it off unless you notice excessive redness, swelling or discharge.

## DIET

Start offering food when your pet comes home from surgery. Commonly, patients are not interested in eating the first 1-2d postoperatively, so don't be worried. Appetite is actually stimulated by getting the stomach and intestines moving as mentioned above.

Encouraging your pet to walk around frequently will improve appetite.

Feed your pet's normal food if they are interested. Supplement this with small amounts of good smelling foods like human baby foods, scrambled eggs, canned pet food; keep these supplements to small amounts so that stomach upset is not made worse with the rich foods. Once your pet is eating, feed smaller size meals more frequently (minimum 2x daily, ideally 3-4x daily) for the first 6wks; thereafter, lifelong feed at least 2x daily.

Food consistency should be soft, for example, dry kibble that is soaked with warm water or canned food. Do not allow encourage activity or excitement after eating, for approximately 1hr.

### ***Week 1-2 postop***

Please look at the incision on your pet's abdomen twice daily. It should be dry, slightly red along the margins, slightly swollen/thick on the edges with a light crust down the center. Over several days, it should lose redness and swelling.

Problems to call your veterinarian about:

- gapping (the edges should be exactly touching)
- ongoing or new discharge (other than small amount of crusting)
- swelling (other than slightly raised skin near edges).

Some bruising is normal and will resolve in 5-7 days.

Do not allow your pet to lick, chew or scratch the incision. Pets tend to want to lick early in the healing period and scratch later in the healing period; this can compromise the incision and predispose to infection. If necessary, please prevent access to the incision by using creative clothing options, an E-collar or other devices, if you must leave your pet unattended.

## PROGRESS EXAMS

Please return to your primary care clinic in 10-14 days for a progress exam. Skin healing will be evaluated, sutures (if present) will be removed, and any questions you have will be addressed.

## RESTRICTIONS

Avoid any rigorous activity for **6 weeks**. For dogs, short, leashed walks to urinate/defecate are fine.

Minimal, supervised/assisted access to stairs is recommended during restricted period. Use baby gates, etc. to prevent free access to stairs during this restricted period. When navigating stairs (up and down), have a hand/leash on collar/harness and ideally a sling/strap under the belly to prevent slips, stumbles, falls.

Please use a short (~6ft), hand-held leash when outside to urinate/defecate. Confine your pet to a small area/room/crate when unattended. Please do not allow your pet to run, jump or play during this restriction period.

If your pet's personality-type challenges these restrictions, discuss options for medicinal-assistance for your pet to make restrictions easier to manage (i.e. Trazadone, Gabapentin, Tramadol, other).

### ***Month 1-2 postop***

If steady improvement in appetite and bowel habits is not clear by this stage, plan a visit with your primary care veterinary team to evaluate your concerns.

### ***Long-term lifestyle***

Always advise all veterinary professionals that your pet has had a gastropexy in his/her past should your pet become ill for any reason in the future.

As mentioned above, "bloat" is still possible even after gastropexy. Signs of "bloat" include: *dry heave/retching, excessive salivation, distended abdomen, breathing hard, weakness/collapse*. If these signs are present, **please have your dog evaluated urgently**.

### ***Checklist:***

#### HOME MONITORING AND PROGRESS CHECK-IN WITH VETERINARY TEAM

- Pet attitude and appetite—Are these improving daily? What are your observations? What are your specific concerns?
- Pet mobility—Is this improving daily? What are your observations? What are your specific concerns?

- ❑ Incision health—Is redness and swelling going away? Is there discharge or moisture?  
(Photos taken close-up and at different angles are helpful for your primary care veterinary team.)
  
- ❑ Pet pain level— What are your observations? What are your specific concerns?
  
- ❑ Bowel habits and stool appearance—What are your observations? What are your specific concerns?

Based on your own experience through this, we welcome and encourage suggestions to this information that may help future patients and their people. Pay it forward! ([directvetsurg@gmail.com](mailto:directvetsurg@gmail.com))

--The DVS Crew