

THE SCREWTAIL ABNORMALITY:**Problems ranging from minor skin irritation to major rectal fistulas****Overview—“I don’t understand what a Screwtail Removal procedure is; please help me understand the condition and the treatment.”**

In several breeds of dogs and rarely in cats, the “tail” vertebra have been genetically modified through the years. What remains in these breeds is a very short length of coccygeal vertebra (“tail bones”) attached to the pelvic region. In some patients, these tail bones are bent awkwardly and push into the soft tissues of the pelvic region—the most concerning being the rectum.

Additionally in these breeds, the skin associated with this remnant tail is excessive and forms deep folds that remain moist and prone to local skin infection. These skin infections, when buried deep and unattended, can develop into wounds and then deep abscesses. If the abscesses are close to the rectum or the tail bones cause a wound in the rectum, major infections with draining fistulas can result.

Dogs and cats with this condition who are carrying excess weight will have their condition worsen as the skin folds become thicker and deeper. Overweight animals are also much less able to maintain their own personal hygiene.

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

For significantly affected patients, it is a daily challenge to them and their owners to maintain the hygiene of the screwtail/skin fold abnormalities. For the patients, chronic skin irritation and odor compel them to lick and scoot, and at time get grumpy about any handling of their hindquarters. For owners, it is at best an unpleasant daily chore, and at worst a battle with one’s pet to get the chore accomplished.

For patients with the tailbones pushing into the soft tissues of the surrounding area, the discomfort with defecation can be troublesome. If wounds are developing, the discomfort can be dramatic and will ultimately make a patient quite ill with infection.

The recommendation to remove the screwtail abnormality and excessive skin folds while problems are relatively minor (prophylactically), allows for a relatively more simple surgical procedure and easier recovery, before more serious problems develop. The type and frequency of postoperative complications increase with the severity of the problems at the time of surgery.

“What options do I have to treat my pet’s abnormality?”

Strict calorie restriction to reduce excess body condition is beneficial to the skin fold problems associated with the screwtail abnormality. Leaner patients will also benefit as the excess fatty tissues of the pelvic region are eliminated; pressure on the rectum and ease of defecation will improve.

Skin folds can be manually and topically cleaned and dried with mild soap and water; usually this is needed daily to remove skin wax, shed fur and accumulating moisture.

Adjusting fiber intake may improve defecation comfort/ability. It may help to trial high fiber additions (adding wheat or oat bran) or low fiber food (smaller amount of higher protein/energy food) to alter stool character and defecation frequency.

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

Not a complication, but necessary to know, the cosmetic appearance of your pet’s rump will be different. There will be no folds or significant bumps on the rump. The anus will be more visible in some dogs whose tail folds previously overhung the anus. The overall appearance is one of a very smooth, rounded rump; the incision scar is usually, ultimately, overgrown with fur. In some patients, the thick skin just above the folded tail zone can be retained and positioned as to create a small “tail bump” mimicking a stub-tailed appearance.

During the first 1-2wks, the rump area will be uncomfortable after surgery. The pain medication we use to numb the area will also numb the nerves to the anus. Surgery around the nerves at the end of the spinal cord may irritate the nerves to the anus. For all of these reasons, it is not unexpected to have patients have difficulty terminating their defecation, i.e. they cannot pinch their anus tightly closed to stop passing stool. This can result in small pieces of stool remaining on or just inside of the anus, that is then dropped later when walking around or lying down. We will make recommendations for fiber additions to the postoperative diet to help this. You will also need to monitor your pet’s defecation events and clean up the bum area as needed. Having your pet walk around for a period of time after defecating may also allow this remnant stool to drop off spontaneously outdoors.

It is uncommon, but this type of “poor termination” stool incontinence can be permanent. Hygiene accommodations and dietary modifications may limit the severity of this problem long-term.

The surgery is performed in an area that has large populations of bacteria and often involves closing the surgery site with inflamed skin. For both of these reasons, postoperative incision complications are not unexpected. These can range from mild inflammation and irritation to significant infection with wound opening (dehiscence). If the wound opens, we may recommend additional minor surgery to clean and re-close the incision or we may recommend healing “by second intention”, which means to allow it to heal from the inside out (without sewing the skin edges back together). We make recommendations for managing incision complications based on the status of the incision and wounds, and then adjust recommendations as we see how healing progresses. Antibiotics are commonly used, and topical cleaning is commonly recommended if incision problems develop. Additional bandaging or wound care is employed based on the situation. The length and width of the surgical scar may be larger in patients with incisional complications.

In patients with severe wounds or rectal fistulas, postoperative development or persistence of fistulas and/or draining tracts are rare but possible. Additional surgery may be needed to remove these draining tracts and treat deep/persistent infection.

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

The complications mentioned above are uncommon but possible; most are treatable to a full resolution. Incontinence may be permanent, but is often accommodated with minor lifestyle modifications.

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

In general, a pet’s life and lifestyle will improve following screwtail removal if your pet has been experiencing skin or rectal problems.

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

After surgery, we usually recommend adding insoluble fiber to the diet, in the form of wheat or oat bran. This can be found in the flour section of most grocery stores. Bob’s Red Mill is a common brand. ½-2 Tbsp is the usual addition per feeding.

With antibiotic use, a patient’s stool may become soft or turn into diarrhea. This can be uncomfortable for your pet and difficult to manage hygienically. Supporting the bowel health with probiotics (either from your veterinarian or in the less ideal form of active yogurt cultures) and prebiotics (cooked/canned winter squash or pumpkin; the “food” for healthy gut bacteria) will go a long way toward minimizing antibiotic-related bowel problems.

Your pet may drop stool after surgery, so choosing and preparing a safe/cleanable location for housing your pet for the first 1-2wks will be helpful. Washable bedding is also helpful. Having disposable or washable materials to gently clean the bum area will make any necessary clean-ups go smoothly; avoid scented or pre-moistened items that may burn or irritate the incision.

Prior to surgery, having an empty colon is very helpful to maintaining hygiene during anesthesia and a cleaner incision area immediately postoperatively. The pre-visit recommendation for withholding food and walking your pet to defecate adequately is helpful toward this goal.

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 **Screwtail Removal**.

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