



GIT Resection & Anastomosis

Gastrointestinal resection and anastomosis

Gastrointestinal resection and anastomosis is indicated whenever there is a significant problem with a portion of the intestine such as

- Foreign object obstruction,
- Gunshot wounds,
- Intestinal tumors,
- Intussusception and
- Animal attack injuries are some common reasons to perform a gastrointestinal resection and anastomosis.

Preoperative Tests:

- Preoperative tests depend in part on the age and general health of the animal as well as the cause for the gastrointestinal resection and anastomosis.
- Most often, the pet is relatively ill before the surgery is performed.
- Extensive tests such as radiographs, blood count, serum biochemical tests, a urinalysis, and possibly an EKG may be necessary prior to surgery.

Type of Anesthesia:

- As in humans, the procedure requires general anesthesia to induce complete unconsciousness and relaxation.
- In the usual case, the pet will receive a pre-anesthetic sedative-analgesic drug to help him relax, a brief intravenous anesthetic to allow placement of a breathing tube in the windpipe, and subsequently inhalation (gas) anesthesia and oxygen during the actual surgery.

Gastrointestinal Resection and Anastomosis Surgery:

- Following anesthesia, the pet is placed on a surgical table, lying on his back. The hair is clipped over the middle of the abdomen and the skin is scrubbed with surgical soap to disinfect the area. A sterile drape is placed over the surgical site. A scalpel is used to incise the skin at the middle of the abdomen, and then the abdominal cavity is opened.
- The intestines are isolated and evaluated. The section of diseased or damaged intestine is detected. On either side of the damaged intestine, large clamps are used to close off the healthy parts of the intestine to prevent leakage of intestinal contents into the abdomen. The damaged section of intestine is then removed with a scalpel or surgical scissors.
- At this point, there is a section of intestine missing and the healthy edges need to be sutured together. Using absorbable suture, the healthy sections of intestines are sutured together and the area is tested to make sure there are no leaks.
- A section of omentum (the lacy membrane that cover the intestines) is wrapped around the incision site to help protect against leaks. The abdominal incision is then closed with one or two layers of self-dissolving sutures (stitches).
- The outer layer of skin is closed with sutures or surgical staples; these need to be removed in about 10 to 14 days.

GI Resection and Anastomosis Surgery Time:

- In most cases, the procedure takes about one to two hours to perform, including the needed time for preparation and anesthesia.
- The time will vary depending on the severity of the intestinal damage.

Risks & Complications:

- The overall risk of this surgery is moderate, depending on the reason for the procedure.
- The major risks are those of general anesthesia, bleeding (hemorrhage), postoperative infection, intestinal leakage and wound breakdown (dehiscence) over the incision.
- Overall complication rate is moderate, but serious complications can result in death or the need for additional surgery.
- Typically, major complications develop within the first three days following surgery.

AfterCare:

- Postoperative medication should be given to relieve pain, which is judged in most cases to be moderate and can be effectively eliminated with safe and effective pain medicines.
- The home care requires reduced activity until the stitches are removed in 10 to 14 days.
- The suture line should be inspected daily by the pet owner for signs of redness, discharge, swelling, or pain.
- The pet should be monitored for changes in appetite, vomiting or diarrhea.

Hospitalization:

- Hospital stays may vary from 2 to 5 days and release from the hospital will depend on the overall health of the pet.

If you have any questions please feel free to contact us using the information below.

Thank You,



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