



Veterinary Specialists of Alaska, P.C. Client Information Sheet Laryngeal Paralysis in Dogs

Laryngeal Paralysis in Dogs (Lar Par)

Mike Edwards, DVM, MS, DACVS; Dirsko J.F. von Pfeil, Dr.med.vet., DVM, DACVS, DECVS

The larynx is the gateway to the trachea (wind pipe). It allows for passage of air to the lungs and helps to prevent food from entering the airway.

In some dogs, the muscles of the larynx become paralyzed and are no longer capable of opening the “gates” to allow passage of air into the trachea. Most commonly, laryngeal paralysis is recognized in older retrievers, but can occur in other breeds.

There are multiple causes of laryngeal paralysis, Alaskan Huskies and Bull Terriers can be born with laryngeal paralysis. Bouvier des Flandres and Dalmatians can develop dysfunction of the laryngeal nerves as part of a more widespread nervous disorder.

The most common form of laryngeal paralysis develops for unknown reasons and is most frequently seen in the retriever breeds.



What are the clinical signs?

Typically, the first sign of laryngeal paralysis is noisy and difficult breathing, especially during inhalation. Some dogs exhibit voice change and exercise intolerance. With abnormal breathing comes a vicious cycle in which the dog becomes short of breath due to exercise or overheating. This leads to anxiety and stress that cause the dog to work even harder to breathe, which leads to more anxiety and stress.

How is the condition diagnosed?

The most reliable way to diagnose this condition is to observe the movement of the laryngeal cartilages with the patient under light anesthesia.



Veterinary Specialists of Alaska, P.C. Client Information Sheet Laryngeal Paralysis in Dogs

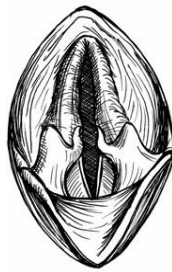
Laryngeal Paralysis in Dogs (Lar Par)

What is the treatment?

Emergency treatment for dogs experiencing a respiratory crisis involves sedation to calm the patient, and steroids to help reduce the swelling of the airway. These patients frequently become overheated and require cooling. On very rare occasions, the patient will require a temporary tracheotomy in order to survive the crisis. After a few days of rest, allowing the laryngeal swelling to subside, the patient can be treated surgically.

Fortunately, most patients are identified before experiencing a respiratory crisis. This condition can be treated very successfully with a surgical procedure referred to as a tieback, or more formally, a cricoarytenoid lateralization. During this procedure, the laryngeal cartilage on one side of the throat is held in the open position with non-absorbable suture.

This is a technically demanding procedure which must be performed correctly in order to assure an acceptable outcome.



Airway before surgery.*



Airway after surgery.*

What should I expect after surgery?

Our patients, typically, appear relieved immediately after surgery. Their breathing, typically, is dramatically improved post-operatively.

Many patients experience a loss of voice after surgery. Fortunately, breathing is more important than barking! Coughing after drinking water is a common occurrence after this procedure. In many cases, this problem subsides with time.

Because the airway is held partially open, these patients risk inhaling food or other foreign materials. This is known as aspiration pneumonia and can become a serious condition if it goes untreated. We take specific measures to minimize the risk of aspiration pneumonia in our patients.

If performed correctly, this procedure will greatly improve your pet's quality of life. Our patients breathe easier after surgery and are able to resume a much more active, athletic lifestyle. Many of our patients resume hunting and some have even become active sled dogs.

*Drawing courtesy: Dr. Derek Fox, DVM, MS, PhD, DACVS