

Our Clinicians



Dentistry, Oral & Maxillofacial Surgery
Peter Southerden
BVSc MBA Dip.EVDC MRCVS
RCVS Recognised & European Specialist in Veterinary Dentistry



Andrew Perry
BVSc MRCVS



Soft Tissue Surgery
Tim Charlesworth
MA VetMB DSAS (ST) MRCVS
RCVS Recognised Specialist In Small Animal Surgery (Soft Tissue)



Orthopaedics
Duncan Barnes
MA Vet MB CertSAS MRCVS



Ophthalmology
Ida Gilbert
BVSc CertVOphthal MRCVS



Imaging & CT
Esther Barrett
VetMB DVDI DipECVDI MRCVS

If you would like to keep up to date with our vets, you can follow their blogs on our website.

Sinonasal Mycosis - Treatment of Nasal Aspergillus Infection in the Dog - Tim Charlesworth

Sinonasal Mycosis is a debilitating fungal infection of the frontal sinuses and nasal chambers. This disease is most commonly caused by *Aspergillus fumigatus* in dogs and causes a wide range of symptoms including nasal discharge, sneezing, epistaxis, depigmentation of the nasal planum, sinonasal pain and inappetence.

Diagnosis

Diagnosis can be challenging as simple culture or cytology of the nasal secretions is usually unrewarding. Cases usually need either radiography (or ideally CT) to determine the extent of turbinate loss which is a feature of this disease and then rhinoscopy to identify, localise and biopsy the fungal plaques themselves which are often readily visible in affected cases.

Treatment

Treatment involves instilling antifungal agents (e.g. clotrimazole) directly into the sinuses and nasal chambers and there are several "protocols" describing how to do this. The picture shows a dog having the sinuses and nasal chambers vigorously flushed through using Foley catheters placed directly into each frontal sinus (a major advantage

of this particular protocol) before clotrimazole solution is instilled into the sinonasal space.

Prognosis

Although most dogs do go on to make full recoveries, many dogs do need multiple treatments and some dogs will have persistent serous nasal discharge due to the extensive turbinate loss caused by the dog's immune reaction to the fungal infection.

We are happy to see any dog with unexplained nasal discharge for work-up and treatment as required. Major differential diagnoses for this condition include intranasal neoplasia, nasal foreign body and severe dental disease.

Tim Charlesworth has upcoming Laparoscopic CPD Courses please refer to our website for more information.



Eastcott Referrals

Eastcott Veterinary Hospital
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Tel: 01793 528341 Fax: 01793 401888
Email: referrals@eastcottvets.co.uk
www.eastcottreferrals.co.uk

Opening Hours

Monday to Friday 7am - 8pm
Saturday and Sunday 8.30am - 8pm



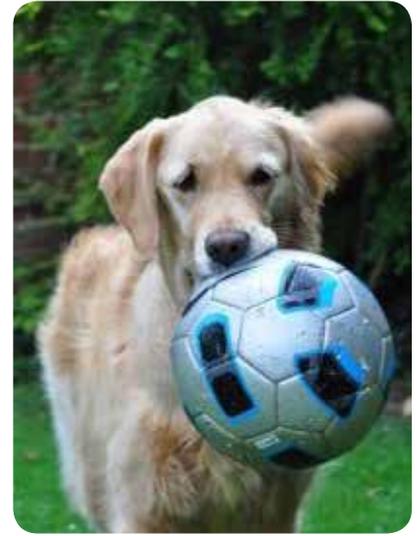
Maintaining Occlusion Following Total Mandibulectomy - Peter Southerden



Photograph showing oral mass prior to surgery



Photograph showing normal post operative occlusion



Florence keen to get on with a normal life!

Florence is a four year old working Retriever. She presented with a soft tissue mass on the buccal aspect of her right mandible at the level of the first molar.

An incisional biopsy showed that this was an intermediate grade fibrosarcoma. The tumour was staged. There was no evidence of spread to the local lymph nodes or chest. Surgical treatment consisted of radical resection of the tumour which involved a total right sided mandibulectomy achieving 3cm lateral margins around the mass.

Mandibular drift is a significant problem following a total or segmental mandibulectomy. The remaining intact mandible is pulled into a more central position by the action of the pterygoid muscles and the canine tooth can cause trauma to the palatal mucosa. Normal jaw position was maintained in this case using an orthodontic appliance attached to the lingual aspect of the mandibular canine tooth and the buccal aspect of the maxillary fourth premolar. The orthodontic bands should be replaced at

weekly intervals and the device maintained in position for at least six months.

This technique helped achieve a normal occlusion post operatively for Florence. Her post operative oral function is excellent and her owner is looking forward to her resuming a normal working gun dog life.

Peter Southerden has upcoming CPD Dentistry Courses please refer to our website for more information

Optimum timing for cataract surgery

As a rule of thumb, cataracts are best operated on early, as soon as effective vision is lost. This is especially important for diabetic cataracts, which can swell rapidly causing lens-rupture. If cataracts are left untreated, lens-induced uveitis will cause inflammation in the eye and predispose to glaucoma which can preclude surgery at a later date. Not all eyes are suitable for surgery, so an appointment should be arranged early for an assessment.

**Small Animal Bilateral
Cataract Surgery
£3200-£3600***

**Small Animal Uni-lateral
Cataract Surgery
£2200-£2500***

*Prices include 3 months of post-operative check-ups, but do not include ongoing drugs and further procedures.

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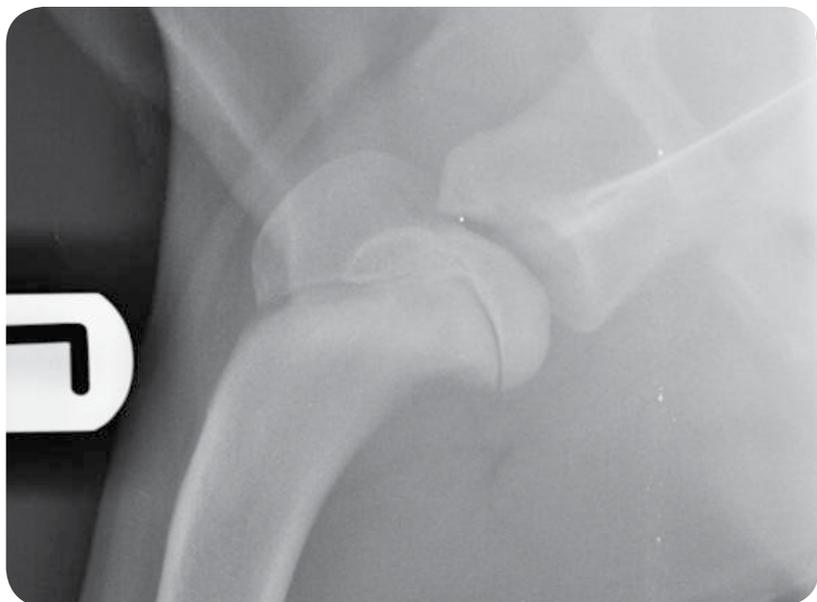
REFERRALS



Arthroscopic treatment of shoulder osteochondritis dissecans in a Labrador retriever - Duncan Barnes

A 7-month-old female Labrador retriever was referred with a 2 month long history of left forelimb lameness. Radiography of the forelimb revealed a mild flattening of the caudal humeral head and a faint mineralisation caudal to the humeral head.

A CT arthrogram was performed and was diagnostic of osteochondritis dissecans of the humeral head. A joint mouse was also visible within the shoulder joint.



Cartilage flap in situ on the caudal humeral head



Large joint mouse being grasped with arthroscopic graspers

The shoulder was explored arthroscopically allowing minimally invasive removal of the joint mouse and cartilage flap. After 6 weeks of rest and rehabilitation she made excellent progress and has now resumed the normal activity of a pet dog.

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Upcoming CPD & Talks 2014

Small Animal Laparoscopic Surgery Two Day Practical
23rd & 24th January 2014
£800 + VAT

2 Day Practical Extractions & Radiology
4th & 5th February 2014
£725 + VAT

2 Day Practical Extractions & Radiology
10th & 11th June 2014
£725 + VAT

Nurses Practical Dentistry
13th March 2014
£205 + VAT

Practical Extraction Only
3rd July 2014
£410 + VAT

2 Day Practical Extractions & Radiology
30th September &
1st October 2014

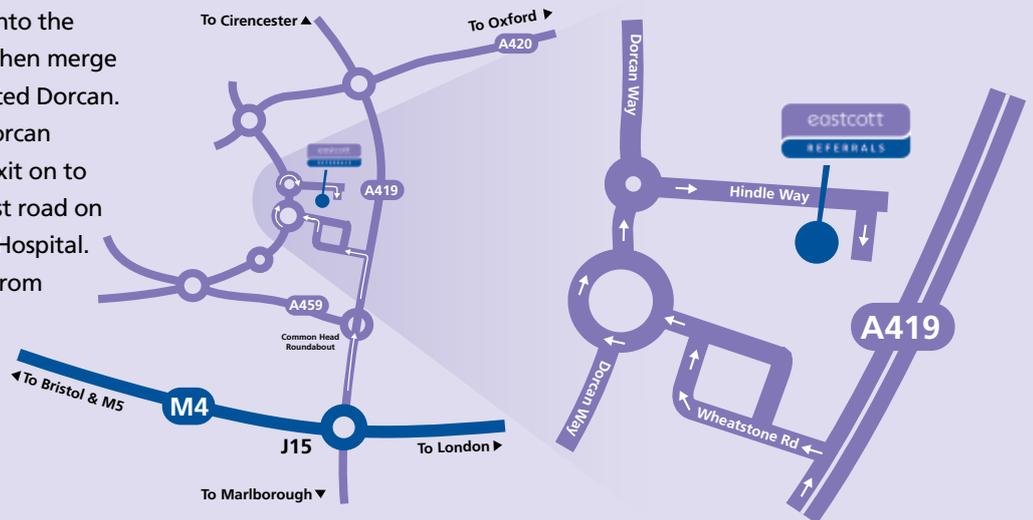
2 Day Feline Dentistry
16th & 17th October 2014
£830 + VAT

To book your place or to register an interest for more information go to our website www.eastcottreferrals.co.uk alternatively email referrals@eastcottvets.co.uk or call Athena 01793 401884. If there is a course you would like to see run or a talk you would like covered please contact us to see if we can help.

How to find us

From M4 westbound take junction 15 then at Badbury roundabout take the 3rd exit onto the A419 signposted Swindon. Branch Left, then merge onto Wheatstone Road – B4006 Signposted Dorcan. At roundabout take the 3rd exit onto Dorcan Way – B4006. At roundabout take 2nd exit on to Hindle way, Edison Park and take the first road on your right to arrive at Eastcott Referrals Hospital. Wheatstone Road can only be accessed from the A419 Northbound, if travelling southbound on the A419, proceed to Common Head Roundabout and then rejoin the A419 Northbound.

For satnav follow: SN3 3RB



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