

Canine Aural Hematoma Techniques

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In the Literature

Hall J, Weir S, Ladlow J. Treatment of canine aural hematoma by UK veterinarians. *J Small Anim Pract.* 2016;57(7):360-364.

FROM THE PAGE ...

Aural hematomas occur commonly in dogs. Treatment can include needle drainage +/- steroid infusion or surgical drainage with suture placement. Management of the underlying cause is essential. Information on recurrence is limited, and no robust comparative data to guide initial and recurrence treatment strategies exist.

This survey investigated opinions regarding aural hematoma treatment techniques and success. A total of 251 responses were analyzed. Initial treatments included needle drainage with (43%) and without (16%) local deposition of corticosteroids, surgery (29%), Penrose drain placement (4%), or other (8%). Surgical techniques included linear incision with sutures (35%), sutures with stents (24%), S-shaped incision and sutures (23%), or other punch biopsy or stent approaches (18%). The most common rationale for treatment type provided was history of previous success (77%); less frequent reasons cited were owner preference (6%), cost (5%), practice policy (4%), convenience (4%), and other (4%). The clinicians' perceived success of initial treatment was good to excellent with surgery (91%) as compared with needle drainage with (59%) and without (38%) steroids. Sixty-five percent of veterinarians predicted a 0% to 25% chance of recurrence; however, only 51% of veterinarians who used needle drainage and steroids expected an outcome equally as favorable as compared with the 96% who chose surgery as a first-line treatment. Recurrent hematomas were more commonly treated with surgery (67%), followed by needle drainage with (16%) or without (7%) steroids, Penrose drain placement (7%), and other (3%). Following a second treatment, 83% of veterinarians predicted a 0% to 25% chance of recurrence.

Study results suggest the most common initial treatment provided for aural hematoma is needle drainage with or without local steroids (59%). Some type of surgical intervention is more common with recurrent hematomas, and the overall perceptions

of success with surgery generally are higher than with other treatment options.

... TO YOUR PATIENTS

Key pearls to put into practice:

- 1 Identification and management of the underlying cause of aural hematoma formation is key to successful treatment.
- 2 Treatment must be provided in a timely fashion and followed carefully in the short term.
- 3 Goals include removal of the blood clot, prevention of recurrence, and maintaining cosmetic appearance and function of the ear.
- 4 Less invasive options (drainage +/- steroids) should be considered for acute or mild cases.
- 5 Chronic or recurrent cases may require surgical drainage and tacking sutures.