Background

- Compared to non-brachycephalic dogs, we believe that brachycephalic dogs have a greater tendency to develop hiatal herniation (HH) due to decreased pressure in the chest during inspiration (breathing in) that results in the upper part of the stomach being sucked into the chest. We hypothesize that, if the upper airway obstruction in these dogs can be alleviated, improvement in their respiratory compromise might be seen as well as a reduction in severity of their HH.

Participation Requirements

- Brachycephalic breed (dogs with broad short skulls)
- No evidence of other upper airway obstructive pathology (especially laryngeal collapse and hypoplastic trachea)
- No previous brachycephalic surgery
- Evidence of hiatal herniation on fluoroscopic imaging (performed pre-operatively)

Procedures

- High-resolution manometry (HRM) to trace the pressure profile of the esophagus under local anesthesia
- Barium esophagram (imaging of the esophagus using a fluoroscope)
- Placement of a monitoring probe in the nose to monitor esophageal pH
- Impedance planimetry to measure the lower esophageal area using a low pressure balloon
- Upper gastrointestinal endoscopic study
- Standard surgical procedure for brachycephalic obstructor syndrome
- Follow-up visit (30-60 days post surgery)

Owner Responsibilities

- Owners are responsible for bringing their dog into the VMTH for each study-related visit and completing the owner questionnaires.

Benefits

- The trial will pay for all study-related procedures except for the surgical procedure, hospitalization and any complications associated with the surgical procedure and recovery during the first visit.
- We hope this study will improve our understanding of your dog’s presence (or absence) of hiatal herniation, which may aid in long-term management of this component of his/her clinical signs.
- Results from this study may influence treatment of other dogs with similar conditions going forward.