# **CANINE NEUTERING: WHEN AND HOW**

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Anna De Battisti looks at the benefits and risks of this procedure and focuses on the best time to neuter dogs, as well as comparing different surgical methods

#### Summary

This article discusses reasons to neuter male and female dogs and the evidence supporting the best time and method for gonadectomy are described.

#### Key words

gonadectomy, dog, early-age gonadectomy, ovariectomy, ovariohysterectomy

CANINE neutering is the most common procedure performed by veterinarians, although the necessity and, in particular, the timing of this procedure are still controversial.

#### Do I neuter or not?

There is a strong social benefit in neutering dogs housed in animal shelters<sup>1,2</sup>. However, we frequently deal with pets that are considered members of the family and where the health of each pet is the main concern. Knowledge of the benefits and adverse effects of neutering is vital in the decisionmaking process.

Mammary tumours (MT) are the most common type of malignant tumour in female dogs. Estimates of lifetime risk for malignant MT in female dogs vary from two per cent to more than 20 per cent<sup>3</sup>-<sup>5</sup>,

depending on age<sup>4</sup>. Approximately half of mammary neoplasms are malignant. Metastases are reported in up to 77 per cent of dogs with mammary gland carcinomas. Spayed dogs and cats are significantly less affected by mammary tumours than intact animals. Compared with the risk in sexually intact dogs, dogs spayed before the first oestrus have a 0.5 per cent risk, dogs spayed after the first oestrus have an eight per cent risk, and dogs spayed after the second oestrus have a 26 per cent risk of developing MT<sup>6</sup>.

The incidence of pyometra in intact females is reported to be approximately 23 per cent at 10 years of age<sup>Z-9</sup>. Ovariohysterectomy (OVH) and ovariectomy (OVE) are both shown to prevent pyometra<sup>10</sup>, <sup>11</sup>.

Testicular neoplasia ( $^{Figure 1}$ ) is the second most common tumour type in dogs, with an incidence that varies between 1.3 per cent and 16.2 per cent $^{12}$ ,  $^{13}$  (9.2 per cent and 13.6 per cent in cryptorchid dogs $^{14}$ - $^{16}$ ).

Bilateral orchiectomy has a prophylactic and therapeutic effect on testicular neoplasia, but also on several androgendependant diseases, such as benign prostatic hyperplasia, chronic prostatitis, perineal hernia and perineal adenomas.

There is some evidence that neutered dogs have an increased risk of developing prostatic carcinoma<sup>17</sup> and osteosarcoma<sup>18</sup>,<sup>19</sup>. It needs to be considered that the overall incidence of these neoplasms is low and that gonadectomised dogs live longer than intact dogs. The longer life expectancy may contribute to a higher overall cancer incidence in neutered animals.

Neutered dogs have an approximate two-fold increase in risk of developing cranial cruciate rupture compared with intact dogs<sup> $20^{-22}$ </sup>.

One study reports neutered dogs have a slightly higher risk of hip dysplasia  $(HD)^{23}$ . In a large study on 1,842 dogs, an increased risk of HD was noted in dogs spayed or castrated before five months of age<sup>24</sup>. The evidence of this association, however, is considered weak.

There is conflicting information regarding the role of gonadectomy in developing obesity. In a study on 8,268 dogs, neutered dogs were about twice as likely to become obese than intact dogs<sup>25</sup>. In a 15-month prospective study, no differences in food intake, weight gain or back fat depth were found between neutered and intact dogs<sup>26</sup>. The results of a study on 1,842 dogs indicate that neutering before six months of age is associated with lower prevalence of obesity compared with neutering after six months of age<sup>24</sup>.

A major concern when advising gonadectomy in female dogs is development of urinary incontinence due to urethral sphincter mechanism incompetence (USMI). The reported incidence of this condition in neutered females varies between five per cent and 20 per cent<sup>24</sup>,<sup>27</sup>,<sup>28</sup>. Neutered females have an approximate eight-fold increase in risk of developing urinary incontinence

compared with intact females<sup>29</sup>. However, even if USMI is often successfully managed with medications, surgical intervention may prove necessary in cases that do not respond to medical treatment

## When do I neuter?

Conflicting evidence exists regarding the best time to perform gonadectomy in dogs. Although it is recognised that spaying before the first oestrus decreases greatly the risk of mammary tumours, the exact timeline is still contentious.

In a prospective randomised study on 1,213 dogs, peri- and early postoperative complications were evaluated comparing dogs that were neutered at less than 12 weeks of age, between 12 and 23 weeks of age and after 24 weeks of age. There were no differences between the three groups apart from a higher complication rate in dogs neutered later<sup>30</sup>.

In a study on 269 dogs from a shelter with a follow up of four years, gonadectomy performed before six months of age did not result in an increased incidence of behavioural problems, problems associated with any other body system or change in rate of retention in the original adoptive household compared with gonadectomy performed after six months of age. Increased incidence of parvovirus enteritis, however, was noted in dogs that underwent earlier gonadectomy<sup>31</sup>.

In a retrospective cohort study on 1,842 dogs with a median follow up of five years, 56 medical and behavioural conditions were evaluated for association with age at gonadectomy. Among female dogs, early gonadectomy (before 5.5 months of age) was associated with increased rate of cystitis and decreasing age at gonadectomy was associated with increased rate of urinary incontinence. Females neutered before three months appeared to be at highest risk of urinary incontinence compared with those neutered after. Among male and female dogs neutered early, hip dysplasia, parvovirus infection, noise phobias and sexual behaviours were increased, whereas obesity, separation anxiety, escaping behaviours and relinquishment were decreased<sup>24</sup>.

In a 15-month prospective study comparing dogs neutered at seven weeks or seven months, no differences were noted in food intake, weight gain or back fat depth. Genitalia of dogs neutered earlier were immature compared with genitalia of dogs neutered later<sup>26</sup>. No difference in incidence of perivulvar dermatitis (which may be caused by an immature vulva) was noted in a large retrospective cohort study evaluating dogs that were neutered before or after 5.5 months of age<sup>24</sup>.

Two studies<sup>29,32</sup> found no evidence of an association between USMI and age of spay or spaying before or after first oestrus, although another large study<sup>24</sup> demonstrated a linear relationship between decreasing age at spay and increased risk of urinary incontinence. This study also reported a 3.5-fold increase in risk for incontinence for dogs neutered younger than three months of age.

In summary, there isn't a strong body of evidence supporting either early or late gonadectomy. However, based on the evidence we have, it would be safer to advise neutering female dogs before the first oestrus, but not before four months of age. For male dogs there is no evidence supporting late versus early gonadectomy.

# OVH versus OVE?

OVH and OVE are both effective neutering methods. There is strong evidence that OVE is as effective as OVH in preventing pyometra<sup>10</sup>,<sup>11</sup>. In two studies, a total of 141 bitches underwent OVE and none developed uterine disease<sup>10</sup>,<sup>11</sup>.

Long-term studies have been unable to detect a difference between occurrence of incontinence in dogs after OVE compared with OVH<sup>10</sup>.

A recent study<sup>33</sup> showed no difference in operative time, pain scores or wound scores between bitches undergoing OVH and OVE.

It is likely that performing OVE versus OVH (granted that no uterine anomalies are found) will remain a matter of the surgeon's preference until larger studies are conducted.

Laparoscopic ovariectomy (<sup>Figure 2</sup>) is gaining popularity among veterinary practitioners. In dogs, videoendoscopic sterilisation results in less postoperative pain<sup>34-36</sup>, less surgical stress<sup>35,36</sup> and quicker recovery<sup>37</sup>, although the surgical time may be longer compared with traditional OVE<sup>34,36,37</sup>.

### **Open versus closed castration?**

Canine orchiectomy can be performed open (parietal vaginal tunica is incised) or closed (parietal vaginal tunica is left intact). The choice between these two techniques is largely based on surgeon preference because supportive research studies are lacking. It is still strongly suggested to perform closed castration when infectious orchitis is suspected.

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