EAR DISEASE IN RABBITS

John Chitty  BVetMed CertZooMed MRCVS
Anton Vets, Andover, UK SP10 2NJ

Aidan Raftery  MVB CertZooMed MRCVS
Avian & Exotic Animal Clinic, Manchester M16 0DE
Ear Disease is Common...

- Lop-eared breeds
- Underlying anatomical differences, NOT medical disorders
- Surgical, not medical?
What are the anatomical differences?
Proposal 1

- There is a functional division to horizontal and vertical canals in lop-eared rabbits
This leads to a build up in cerumen
Is this pathological and does it need treating?

- Always pathological?
- Presence of clinical signs?
- Presence of radiographic changes?
- Presence of neural signs?
- Presence of inflammation?
- Cytologic changes?
Current study

- PRELIM RESULTS!!!
- Asymptomatic rabbits
- Lops and non-lops
- Differences?
- Extensive flora
- No cytological evidence of reaction!
Therefore...is prophylactic LWR indicated?
Otitis- how to investigate

- Clinical signs
- Radiography
- Otoscopy/ auroscopy
- Cytology/ culture
- Advanced imaging?
Clinical signs

- Irritation
- Head tilt
- Head shake
- Facial palsy
- Pain signs
- Gut stasis
ie. almost anything!
Don’t forget the pinna!
Parasites
Mites
Don’t forget to check spine and hind-limbs!!
Auroscopy/ otoscopy

- Difficult when conscious
- Impossible in lops
- Need sed/ GA
- Need cleaning too?
Radiography

- Otitis externa??
- Media?
- Sensitive?
- Great screening tool?
Ultrasonography?
CT/MRI
How is it treated?

- Avoid ear drops!
- **Systemic therapy** - based on cytology/culture
- Flushing
- Ear wicks
- Surgery
  - Lateral wall resection
  - TECA
Why avoid ear drops?

- Polypharmacy
- Potential adverse effects of steroid
- Based on canine otitis
- Primary inflammatory disease!
- More likely to add to the build-up!
Physical cleaning

- **Flush**

- **Effects**
  - Removal of cerumen
  - Removal/dilution of infectious agents

- Continued use of cleaning agents?
Ototoxicity

- Tympanum usually broken
- AVOID chlorhexidine!
- TRIS-EDTA appears OK
- Saline?
Ear Wicks

- Antimicrobial-filled sponges
- Choice?
- Placement
- Time left in
- OM vs OE
Ear Wicks
Cerumen build-up

- Vs ear base abscess
- Soft-walled component forms diverticulum
- Infected?
- Symptomatic?
- Surgery?
- Massage
Proposal 2

This condition more accurately referred to as

**aural diverticulosis**
Use of emollient drops?

- May reduce viscosity of cerumen?
- May aid massage
- Reduce interventions?
- Otoact
  - Squalene
  - Salicylic acid
  - Camomile
  - Tannic acid
LWR?

- Use classic technique
This works well because...

- No longer allows cerumen to build up
- Easy access for cleaning
- A lot of canal wall for “draining board”
But what about “normal” otitis?
Lateral Wall Resection

Pros
- Opens canal and removes fold
- Enables “drainage”
- Relatively easy surgery

Cons
- “stoma” formation at soft-walled junction
- Can be difficult for owners to maintain post-surgery
- There is very little “draining board”
Traditionally...

- Open lateral wall
- Join to skin
- Establish draining board between “HC” and ventral skin
- Successful/ problematic... when?
Propose...

- Similar with VC
- Close VC
- Form stoma between HC and skin
Advantages...

- Obliterate soft-walled component of canal
- Easier to maintain
- Still enables good drainage from both parts of ear canal
When to do LWR?

- Treatment?
- All chronic ear problems?
- Prophylaxis?
- Is it inevitable that lop-ears will get ear disease???
TECA?

- When indicated?
- Salvage?
- Do we need all canal wall removed??
- Side-effects?
Future studies...

- Flora and cytology of diseased ears
- Links with other diseases
- Suitability of washes/cleaners for long-term prevention
In the meantime, shall we simply educate away from lops??