

Complications

- Neuritis and end-neuroma formation are common complications, particularly in the proximal nerve stump; depending on the study, up to 20% of patients are affected. Neuromas are bulblike projections at the proximal stump of a transected nerve due to misdirected axonal sprouting and Schwann cell proliferation. These lesions are very painful, and in selected cases they must be treated with local injections of triamcinolone acetate (5 to 10 mg for each neuroma), sarrapin, or alcohol blocks.
- Re-innervation can occur when the severed nerve endings re-establish contact with each other; missed accessory branches contribute to this failure. This can happen as early as 6 months postoperatively, depending on the technique used. However, ideally this does not happen for many years.
- Rupture of the DDF tendon can occur after neurectomy, especially if it was compromised before surgery.
- The formation of excessive scar tissue can lead to a decreased blood supply to the hoof, potentially leading to laminitis, or in rare cases, sloughing of the hoof. Laminitis can develop after a second operation or with injury of the blood vessels.
- Undetected subsolar infection
- Step on foreign body
- Luxation and subluxation of the Distal Interphalangeal (DIP) joint