Pelvic and sacroiliac injury repair

Pelvic fractures and sacroiliac luxation | Dogs and cats

The pelvis supports the hind legs and transfers weight to the spine and body. Surgery restores stability and alignment after selected fractures or displacement of the pelvic joints.

About the procedure

What has been injured?

The pelvis is a frame of bones that connects the hind legs to the spine. Trauma often breaks several parts at once. The sacroiliac joint connects the pelvis to the base of the spine (the sacrum); it can separate or shift out of position. Pelvic injuries may also affect the hip socket, nerves, bladder or urethra. A pet may be unable to stand, have severe pain, or have difficulty passing urine or stools.

What needs checking before surgery?

Your vet will first check breathing, circulation and other injuries, particularly after a road traffic accident. Pain relief is essential. X-rays and sometimes CT help show which pelvic structures are damaged. Neurological assessment and checks of urinary function are important because nerve or urinary injuries may not be obvious initially. Surgery may be delayed until the pet is stable.

What does surgical repair involve?

A displaced sacroiliac joint may be repositioned and secured with a screw placed into the sacrum. Fractures of the main weight-bearing pelvic bone or hip socket require plates and screws. The surgeon aims to restore alignment, pelvic canal size and weight transfer where necessary. Imaging helps confirm implant placement. Not every fracture needs fixation; some stable portions can heal without an operation.

Can my pet recover without surgery?

Some pelvic fractures and selected sacroiliac injuries can be managed with strict rest and pain control. The decision depends on displacement, stability, comfort, hip involvement, pelvic canal narrowing, other limb injuries and neurological function. Surgery is considered when it is likely to improve stability, alignment or the ability to walk comfortably.

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Recovery, risks and home care

Recovery and home care

Expected outcome

Many pets regain full mobility, but concurrent nerve injury, joint damage or other trauma can limit recovery.

Caring for your pet at home

Provide a quiet, non-slip restricted space and soft bedding. Cage rest is strongly recommended and will help avoid many unnecessary complications. Use a sling only as instructed if your dog needs support. Cats need a low-sided litter tray and no access to climbing. Follow the pain relief plan. Monitor urination and stools closely and tell the vet if your pet strains or cannot pass them. Do not allow running, jumping, stairs or unsupervised outdoor access.

Follow-up and return to movement

An early review checks wounds, pain, nerve function and ability to toilet. X-rays are commonly repeated around 6–8 weeks, or earlier when indicated. Restriction often lasts 6–12 weeks or more depending on injury severity, age and healing. Rehabilitation may be important for weakness or nerve injury, but exercise increases only when the team confirms it is safe.

When should I call?

Inability to urinate, repeated unsuccessful attempts to urinate, severe abdominal pain, collapse or sudden hind-leg weakness are emergencies. Also report persistent straining to pass stools, worsening pain, wound discharge or a sudden loss of limb use.

Questions to ask your vet

Are the nerves and urinary tract affected? Which parts require repair? How should I help my pet stand and toilet?

Discussing risks and complications

As with any surgical procedure, complications can occur. Your surgeon will discuss the possible complications, individual risks and expected outcome for your pet during the pre-operative consultation.

General anaesthesia can cause serious complications, including death. Your veterinary team will explain individual risks and alternatives.

Your veterinary team will discuss the recommended treatment, alternatives and the risks of general anaesthesia for your individual pet.

Important information

Check the wound daily; prevent licking and keep it dry. Give prescribed medicines only. Report vomiting, diarrhoea, poor appetite or increasing illness. For breathing difficulty, collapse, uncontrolled bleeding or severe distress, seek emergency care immediately.

Follow the personalised discharge plan; this sheet is not a consent form. Contact your own practice or its out-of-hours service for urgent care.