

AS SEEN  
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# Veterinary Practice News

THE INFORMATION LEADER  
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## Rehab Becoming More Mainstream

By Dara Lyon Warner  
For Veterinary Practice News

Physical therapy has been intertwined with human medicine for most of a century. In fact, early practitioners were called “reconstruction aides.” But the application of physical therapy modalities to veterinary practice is comparatively recent.

Animal Rehabilitation and Wellness Hospital—ARWI.com—in Raleigh, N.C., is one of a relative handful of facilities dedicated exclusively to veterinary rehabilitation. The University of Tennessee, which offers a certificate program in canine rehabilitation, lists 275 certified practitioners in the U.S. and only 27 in the rest of the world.

Animal Rehabilitation and Wellness Hospital was born of founder and CEO Annie Janis’ grief over losing her beloved dog, Tanana, to degenerative disc disease. Treatment options were minimal and rehabilitation was nonexistent.

“Surgery was offered, but I was told she would probably never walk again,” Janis says. “If (rehabilitative therapy) had been available, I feel she would have stayed healthier, stronger and it would have increased her life span.”

Sometime later, when Janis was seeking a veterinary rehabilitation practitioner, she was referred to Denis Marcellin-Little, MS, DEDV, CCRP, who eventually became her partner in launching ARWI. The facility opened in 2003.

### Advances, Affiliations

“Clearly, rehabilitation has become a more mainstream



Cooper zips around the Animal Rehabilitation and Wellness Hospital parking lot on his cart. He moves faster than many expect.

PHOTO BY DARA LYON WARNER

consideration for the support of trauma patients and patients with limited mobility because of chronic conditions or neurologic problems,” Dr. Marcellin-Little explains. No longer with ARWI, he is a professor and practicing veterinarian at North Carolina State University’s College of Veterinary Medicine, barely a mile away.

He considers the demise of cage rest for two months after surgery one of the biggest breakthroughs in the field. “Fewer clinicians are recommending absolute confinement during the recovery period and more are recommending supervised activity,” he says.



A dog undergoes hip flexion.

PHOTO COURTESY OF ANIMAL REHABILITATION AND WELLNESS HOSPITAL

## Adding Rehabilitation To a General Practice

What should be considered in deciding whether to add rehabilitation to a general practice? Both Drs. Kevin Allen Jones and Denis Marcellin-Little responded similarly, advising that veterinarians answer these questions:

- \* Is there a demand for it?
- \* Is the technical staff interested in providing rehabilitative services?
- \* Does the practice deal with patients suffering impaired mobility or with working dogs?
- \* Does the practice have the appropriate resources, including an adequate number of personnel who are either certified or can be, to do rehabilitative work?

Animal Rehabilitation and Wellness Hospital founder Annie Janis tends to view things from the perspective of the impact on patients and their families.

“If rehabilitation becomes part of a clinic’s services, it needs to be a priority and done at a high level,” she says. “Staff members who are working with patients must be certified or supervised by someone who is.”

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ARWI's chief of staff, Kevin Allen Jones, DVM, CCRP, agrees and adds that rehabilitation is "at the forefront of veterinary medicine."

Dr. Jones counts stem cell therapy and prosthetics—particularly porous prosthetics combined with artificial limbs—among the more exciting advances. He expects their use to increase as technology improves, and calls veterinary rehabilitation a growing demand, even for families who may have spent a great deal on critical care.

## Best Possible Outcome

"They are willing to invest more to have the best possible outcome," Jones says. "The owners want to know their options and make the decision themselves."

Animal Rehabilitation and Wellness operates solely on referrals from other veterinarians, including those at North Carolina State. Despite their proximity, the two are not affiliated.

"The school is nonprofit and state-run; it has to be unbiased," Janis says. Another Raleigh rehabilitation clinic, Vet Hab, emphasizes on its website its work with performance dogs; ARWI is more focused on the family companion. "It's like a pediatric ward," Janis notes.

An average of 40 outpatients a week visit ARWI for evaluation or treatment. The four veterinary technicians on staff generally maintain patients in needed positions or assist in therapy, such as with the underwater treadmill, especially when working with large dogs.

"With our patient load, it's important to delegate treatments to the technicians but also recognize what they are not able to do," Jones says. "I have them work more with our inpatients, while I tend to work more with the outpatients. There are exceptions, and I will inform them which cases or treatments I prefer to do myself."

In early June, Animal Rehabilitation and Wellness had seven inpatients. Three were large dogs, each with limited or no function in at least two legs. There have been as many as 13 inpatients at a time, according to Janis, who says, "Mostly the big dogs end up with us because families can't manage (their care) at home. Their urine often must be expressed; some are incontinent and require repeated cleaning to prevent urine scalds."

She estimates that 98 percent of the patients are dogs, though some cats and even a rabbit have been treated.

Jones says the term "physical therapy" is restricted in most states to human patients.

"Some states are amending this," he says, "but it will take agreement between the boards of physical therapy and veterinary medicine. Essentially, it requires clarifying responsibility for the patients, in order to protect them."

Terminology aside, many of the protocols inherent in physical therapy complement veterinary rehabilitative work.

Melissa Horton, BS, PT, who has been recognized for her



ARWI incorporates exercise balls and physiorolls into physical therapy. Working with these colorful tools helps restore flexibility.

PHOTO BY DARA LYON WARNER

work with vestibular disorders and balance issues, consults with Jones and his staff on a voluntary basis. "I am driven by the desire to make a difference in the lives of others," she says.

Horton cites her "unofficial childhood work with animals"—for example, successfully nurturing birds and chipmunks injured by her cats—as the foundation for having pursued physical therapy. "There are significant challenges and differences (between canine and human patients), the most obvious being that the canine patients cannot follow verbal commands and answer our questions," she says.

One of ARWI's recent inpatients, Happy the Weimeraner, exhibited symptoms of benign paroxysmal positional vertigo, including nystagmus and an inability to remain sitting upright when turning his head. Rehabilitation focused on his head and eye movement, turning over and sitting with stability. Happy responded well and quickly, regaining enough function to return home.

"He may have been able to achieve those things eventually without rehabilitation," Horton says, "but the focused attention, I think, accelerated his progress."

## A Rehabbing Economy

Animal Rehabilitation and Wellness saw a slight drop in business during the first half of 2009, according to Janis, although it started to pick up a bit by June. She notes the decline has been seen throughout the field.

For example, general practice clients may delay elective procedures and rehabilitation clients may opt for a shorter course of therapy. Is it worth the struggle? Absolutely, Janis says.

"This place is my passion," she says. "We are not only helping the animals, we're helping the families who love them." ●