New views required for Elbow Dysplasia certification submissions as at 1 June 2019

The South African Elbow Dysplasia (ED) scheme was initiated in 1999 to improve breeding selection to reduce the incidence of ED in dogs, particularly larger working dogs. Certification is done according to the Guidelines of the International Elbow Working Group (IEWG) and as approved by WSAVA. The number of views required to certify dogs varies in different countries with increasing views resulting in more accurate grading. In 1999 the minimum requirement of a single maximally flexed ML view of each elbow was instituted to start the SA scheme, to minimise costs and gain greater breeder compliance. This view allowed greater visibility of osteophytes on the anconeal process, even on potentially poor quality hard copy (analogue) images but significantly limited visibility of radiological changes associated with medial coronoid disease, osteochondritis dissecans and joint incongruity.

We are now 20 years further with additional knowledge of early radiological changes in dysplastic elbows, the most appropriate views required as well as the X-ray digital era upon 98% of veterinary practices. This creates additional opportunities to improve our ED grading accuracy with minimal cost implications.

Following discussions with KUSA and the National Clinicians Group of the SAVA and based on IEWG guidelines and a recent article* on the incidence of hip and elbow dysplasia in South Africa, the following two views of each elbow (see figures) will be required for elbow grading as from 1 June 2019:

Extended 100-120° ML view
Pronated CrCd view
(Note - the original flexed ML view is no longer required)

Two views of the same elbow can be made on a single cassette. The radiologist can manipulate brightness and contrast on the digital images in order to visualize any osteophytes and subtle changes indicative of the primary causes of ED allowing improved accuracy of interpretation and grading.
The radiologists will not charge an additional fee to examine the two views instead of one. Practitioners are requested to consider no additional fee charges for this limited change to the required views, as minimal (if any) additional cost to veterinarian is envisaged. This is an ideal opportunity for us all to provide a better service to help improve breeding selection and reduce the incidence of ED in the dog population in RSA.

The KUSA HD/ED approved radiologists will also directly inform their veterinary clients of these changes. Incorrect submissions of the single old flexed ML view will be accepted for the first three months after the implementation date to allow a smooth transition period. Updated HD/ED application forms will be available on the KUSA and SAVA websites as well as from your radiologist.

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Chief KUSA scrutineer