

Interpretive Summaries

SMALL ANIMALS

Radiographic, magnetic resonance imaging, computed tomographic, and rhinoscopic features of nasal aspergillosis in dogs

The purpose of the study was to determine radiographic, magnetic resonance imaging (MRI), computed tomography (CT), and rhinoscopic features of nasal aspergillosis in dogs. Fifteen dogs with confirmed nasal aspergillosis were included in the study. All dogs underwent radiography, MRI, CT, and rhinoscopy. Some lesions suggestive of nasal aspergillosis detected via MRI and CT were not detected via radiography. Computed tomography was the best technique for detection of cortical bone lesions; however, identification of the nature of abnormal soft tissue was not possible. Magnetic resonance imaging allowed evaluation of lesions of the frontal bone and differentiation of a thickened mucosa from secretions and fungal colonies; however, secretions and fungal colonies could not be differentiated. Rhinoscopy was the best technique for identification of the nature of abnormal soft tissue (including fungal colonies). On the basis of our results, we recommend CT or MRI followed by rhinoscopy to confirm the diagnosis of nasal aspergillosis in dogs.—J. H. Saunders et al (*J Am Vet Med Assoc* 2004;225:1703–1712).

Foreign body attachment to polypropylene suture material extruded into the small intestinal lumen after enteric closure in three dogs

Three dogs in which polypropylene suture material was used to close an enteric surgery site in a continuous pattern were evaluated at a later date because of recurrence of signs of intestinal disease. Surgery in each dog revealed that the suture material had been extruded into the lumen of the intestine and acted as a site for attachment of a foreign body. The nonabsorbable nature of polypropylene and its use in a continuous pattern are possible explanations for this complication. Polydioxanone or poliglecaprone 25 may be suitable alternatives to polypropylene for use in a continuous pattern for closure of small intestinal surgery sites.—M. Milovancev et al (*J Am Vet Med Assoc* 2004;225:1713–1715).

Clinicopathologic features of an unusual outbreak of cryptococcosis in dogs, cats, ferrets, and a bird: 38 cases (January to July 2003)

Cryptococcus spp infections in dogs, cats, and other domestic species are not uncommon worldwide but typically involve unique varieties in specific locations.

Classically, in North America, the principal agent of cryptococcal infections is *C neoformans* var *neoformans*, whereas both *C neoformans* var *gattii* serotype B and *C neoformans* var *grubii* serotype A are considered endemic in Australia. *Cryptococcus neoformans* var *gattii* has a unique environmental niche because it is consistently isolated from eucalypt trees, particularly *Eucalyptus camaldulensis* and *E teriticornis*. In this report, an outbreak of cryptococcosis in multiple species is described, and most cases resulted from infection with *C neoformans* var *gattii* (serotype B) in a single location within southwestern British Columbia, Canada, which is an unusual geographic location for that organism. Most affected animals had nonspecific CNS signs and represented a diagnostic challenge. Serologic testing for cryptococcal antigen had sensitivity of 92% and specificity of 98%. All cultured cryptococci were susceptible to amphotericin B and ketoconazole.—S. J. Lester et al (*J Am Vet Med Assoc* 2004;225:1716–1722).

Clinical signs, underlying cause, and outcome in cats with seizures: 17 cases (1997–2002)

Medical records of 17 cats with seizures were reviewed to determine clinical signs, results of diagnostic testing, underlying cause, and outcome. Cats were included only if an underlying metabolic abnormality causing the seizures had been identified, diagnostic imaging of the brain and CSF analysis had been done, or a necropsy had been performed. Seizures were classified as being a result of metabolic disease, symptomatic epilepsy (ie, epilepsy resulting from a structural lesion of the brain), or probably symptomatic epilepsy (ie, epilepsy without any extracranial or identifiable intracranial disease that is not suspected to be genetic in origin).

Three cats had seizures associated with an underlying metabolic disease (hepatic encephalopathy), 7 had symptomatic epilepsy (3 with neoplasia and 4 with meningoencephalitis), and 7 had probably symptomatic epilepsy. Six of the 7 cats with symptomatic epilepsy died or were euthanatized within 3 months after the diagnosis was made, whereas 6 of the 7 cats with probably symptomatic epilepsy survived for at least 12 months after the diagnosis was made.—H. L. Barnes et al (*J Am Vet Med Assoc* 2004;225:1723–1726).

EQUINE

Treatment of tracheal collapse with an intraluminal stent in a Miniature Horse

A 7-month-old miniature horse was referred for respiratory distress. Tracheal collapse at the level of the tho-

racic inlet was diagnosed. An intraluminal nitinol stent was placed with endoscopic guidance. Respiratory function was restored immediately after stent placement. The main complication observed during a 14-month follow-up period was growth of granulation tissue through the stent, which was controlled satisfactorily by electrocautery performed during endoscopy with the horse standing. Treatment of tracheal collapse with an intraluminal stent is an effective, practical, and minimally invasive procedure in miniature and young equids and ponies.—L. L. Couëttil et al (*J Am Vet Med Assoc* 2004; 225:1727–1732).

Effects of treatment with and without adjuvant radiation therapy on recurrence of ocular and adnexal squamous cell carcinoma in horses: 157 cases (1985–2002)

Medical records of horses with histologically confirmed ocular and adnexal squamous cell carcinoma (SCC) evaluated from 1985 to 2002 were reviewed. Two treatment groups determined by recurrence of SCCs treated with and without adjuvant radiation therapy were established. Ocular or adnexal SCCs that received adjuvant radiation therapy were treated with ≥ 1 cytoreductive surgical procedure followed by ≥ 1 treatment with strontium 90, iridium 192, or cobalt 60, or cryotherapy and strontium 90. Ocular or adnexal SCCs that did not receive adjuvant radiation therapy were treated with enucleation or exenteration, ≥ 1 cytoreductive surgical procedure, surgery and cisplatin, or ≥ 1 surgical procedure followed by cryotherapy. Ninety-one horses with 157 SCCs at 6 anatomic locations were identified. Local tumor recurrence rates were recorded for each type of treatment in each treatment group. Recurrence rates of SCCs on the eyelid, cornea, and limbus (the junction of the cornea and sclera) or bulbar conjunctiva were significantly lower after treatment with adjuvant radiation therapy than after treatment without adjuvant radiation therapy. Coat color, breed, and interaction of age and breed had a significant effect on recurrence of ocular and adnexal SCC, regardless of type of treatment and anatomic location.—C. B. Mosunic et al (*J Am Vet Med Assoc* 2004; 225:1733–1738).

CAMELIDS

Tibial plateau leveling osteotomy in a llama with a ruptured cranial cruciate ligament

A 3-year-old 155-kg (342-lb) castrated male llama was examined because of left hind limb lame-

ness of acute onset. A diagnosis of cranial cruciate ligament and medial collateral ligament rupture was made, and tibial plateau leveling osteotomy was recommended. The tibial plateau leveling osteotomy procedure was performed as described for dogs, except that 2 orthopedic plates were used to stabilize the osteotomy because of the size of the llama. The medial collateral ligament was sutured and reinforced with 2 strands of size-2 polypropylene placed in a figure-8 fashion between cancellous bone screws in the femur and tibia. Four days after surgery, failure of the medial collateral ligament repair was evident.

Approximately 3.5 years after surgery, the llama was reexamined. The owners reported that the llama had full use of its left hind limb, and only mild lameness (grade 1 of 5) was evident. Results suggest that tibial plateau leveling osteotomy may be applicable in camelids with rupture of the cranial cruciate ligament. However, additional study is needed before tibial plateau leveling osteotomy can be routinely recommended. In particular, additional information is needed on the tibial plateau slope in healthy camelids, the role of the fibula in tibial plateau leveling osteotomy procedures, and the prevalence of cranial cruciate ligament rupture in camelids.—W. M. Ray et al (*J Am Vet Med Assoc* 2004;225: 1739–1742).

Infection with *Corynebacterium pseudotuberculosis* in five alpacas

Among the population of an alpaca breeding farm, 5 alpacas (22 days to 14 months old) developed focal swellings in the subcutaneous tissues of the head or neck. Infection with *Corynebacterium pseudotuberculosis* was confirmed on the basis of results of microbial culture of abscess material and a serum hemolysis inhibition assay to detect *C pseudotuberculosis* toxin. The dams of the affected alpacas were seronegative for *C pseudotuberculosis* toxin. The affected alpacas underwent surgical excision of the abscesses and were isolated from herdmates for 90 days; treatment was successful, and no other alpacas in the herd became infected. Common risk factors for sources of infection in the affected alpacas included housing in a maternity barn and a pasture. Also, the infection potentially originated from new alpacas introduced into the herd during the preceding 3 months. Infection with *C pseudotuberculosis* should be considered as a differential diagnosis for camelids with peripheral lymphadenopathy or abscesses in subcutaneous tissues.—D. E. Anderson et al (*J Am Vet Med Assoc* 2004;225:1743–1747).