

Letters to the Editor

Implications of small intestinal thickening in cats

In the article “Prevalence and underlying causes of histologic abnormalities in cats suspected to have chronic small bowel disease: 300 cases (2008–2013),”¹ the authors conclude that nearly all cats with thickening of the small intestine, including the muscularis propria, had histologic evidence of inflammatory bowel disease or lymphoma. This large study contributes to our understanding of these diseases in cats and the role of ultrasonography in its diagnosis. Importantly, the study population consisted of cats that had both compatible clinical signs and ultrasonographic evidence of small intestinal thickening, and the authors indicated that in their experience, a high percentage of owners were amendable to further diagnostic testing when presented with this combination of findings.

The high prevalence of histologic abnormalities reported by Norsworthy et al¹ supports our previous conclusion² that cats with ultrasonographic thickening of the muscularis propria are likely to have either inflammatory bowel disease or lymphoma. However, in their discussion, the authors erroneously suggest that our previous study² found that degree of thickening of the muscularis propria versus the small intestinal mucosa differed between cats with inflammatory bowel disease and cats with lymphoma. The comparison we made involved the muscularis propria and submucosa. Thus, our findings cannot be compared with the ratio calculated by Norsworthy et al. In addition, our study population consisted of cats with and without ultrasonographic abnormalities, and we found that cats with disease had a higher prevalence of muscularis propria thickening than did healthy cats. However, the degree of thickening did not differentiate between

inflammatory bowel disease and lymphoma. The authors also state that some of the cases in our study may have been misdiagnosed because of a lack of immunohistochemical analysis and PCR assay, when in fact these tests were performed.

A follow-up study³ with detailed measurements of the wall layers confirmed increased wall thickness and muscularis propria thickness in cats with lymphoma and inflammatory bowel disease, compared with thickness in healthy cats, and concluded that the 2 diseases appear the same ultrasonographically. All 3 of these studies concluded that the presence of intestinal wall thickening in cats is a strong indicator of inflammatory bowel disease or small cell T-cell lymphoma, and that full thickness biopsy is warranted for differentiation.

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1. Norsworthy GD, Estep JS, Hollinger C, et al. Prevalence and underlying causes of histologic abnormalities in cats suspected to have chronic small bowel disease: 300 cases (2008–2013). *J Am Vet Med Assoc* 2015;247:629–635.
2. Zwingenberger AL, Marks SL, Baker TW, et al. Ultrasonographic evaluation of the muscularis propria in cats with diffuse small intestinal lymphoma or inflammatory bowel disease. *J Vet Intern Med* 2010;24:289–292.

3. Daniaux LA, Laurenson MP, Marks SL, et al. Ultrasonographic thickening of the muscularis propria in feline small intestinal small cell T-cell lymphoma and inflammatory bowel disease. *J Feline Med Surg* 2014;16:89–98.

Further queries regarding “What Is Your Diagnosis?”

I want to thank the *JAVMA* for publishing the “What Is Your Diagnosis?” feature. The articles are certainly of interest for all veterinarians, but they also provide a wonderful opportunity to help and encourage first-year veterinary students to realize the importance and usefulness of their new basic medical information and begin to integrate that information into their dream of pursuing clinical medicine.

The article by Stelmach et al¹ describing a 5-year-old dog with an inguinal hernia offered a particularly great teaching opportunity. In discussing with students the regional anatomy important to this case, however, it became apparent that something was missing or at least vague. The possibility of the hernia passing through the vaginal ring into the vaginal process was not mentioned, and the only statement about the origin of inguinal hernias was that “Inguinal hernias occur as a peritoneal evagination through the internal and external inguinal rings.” This left the students and myself wondering just where or how the jejunum and omentum contained within this

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hernia left the peritoneal cavity. Did herniation occur through the vaginal ring or a tear in the peritoneum? Could the authors please clarify this point?

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1. Stelmach DK, Jiménez DA, Andrade N, et al. What Is Your Diagnosis? *J Am Vet Med Assoc* 2016;248:149-151.

Continuing to tackle the issue of veterinary debt

In April 2016, the AVMA, Association of American Veterinary Medical Colleges, and Michigan State University will be hosting the Fix the Debt Summit to address the issue of veterinary student debt.¹ As a 2013 graduate, I am especially gratified to see that veterinary students and recent graduates are specifically being invited and encouraged to attend,² and it is my hope that through this summit, participants will be able to come up with inno-

vative solutions to this important problem.

In my opinion, current approaches to the issue of veterinary student debt, including increased debt forgiveness, loan repayment programs, and loan subsidies, may ease the financial burden for some students but ultimately will fall short and perpetuate a culture of unsustainable borrowing among veterinary students. The class of 2013 graduated with a mean educational debt of \$146,000, a 7.2% increase from mean debt for the class of 2012, which well exceeded the rate of inflation.³

I believe an unavoidable conflict of interest exists when institutions encouraging increased access to credit for students are themselves the beneficiaries of that credit. One suggestion I would make is to implement requirements for veterinary schools to be self-lending institutions to maintain their accreditation, along with the stipulation that veterinary students be permitted to discharge their

debt through regular bankruptcy proceedings.

Under these conditions, colleges would be better motivated to accept only the number of students who can reasonably be expected to graduate and achieve meaningful employment to repay their loans and to ensure that students accrue only those debts they can reasonably be expected to repay. To some, these solutions will seem extreme, but it may just create a path to financial solvency for our profession.

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1. Larkin M. Summit to explore student debt-related issues, solutions. *J Am Vet Med Assoc* 2015;247:986-987.
2. AVMA. Scholarships will help students, recent grads attend debt summit. Available at: atwork.avma.org/2016/02/10/scholarships-will-help-students-recent-grads-attend-debt-summit/. Accessed Feb 22, 2016.
3. Shepherd AJ, Pikel L. Employment, starting salaries, and educational indebtedness of year-2013 graduates of US veterinary medical colleges. *J Am Vet Med Assoc* 2013;243:983-987.