


RESENTING CLINICAL SIGNS

History: Presented for panting and abdominal distension. Has been receiving Taste of the Wild grain-free diet since puppyhood. Radiographs consistent with peritoneal and pleural effusion. Tachycardic, slightly muffled heart sounds, slightly muffled lung sounds.

DATE

4/7/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Tom McNeill

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

Left atrial size is normal. The mitral valve appears normal, though mild mitral regurgitation is present. The left ventricular diastolic dimension is normal. Left ventricular systolic function is moderately to severely depressed. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. There is mild to moderate right atrial and right ventricular dilation. The tricuspid valve appears normal, though there is Doppler evidence of tricuspid regurgitation present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen. Pleural effusion is present.

PATIENT

Shelby Kimber

LA - 36.5 mm
 LVIDd - 37.6 mm
 LVIDs - 31.0 mm
 FS - 17.6%
 RA - 42.0 mm
 RVIDd - 37.4 mm
 LVOT - 1.28 m/s
 RVOT - 0.61 m/s
 TR - 2.51 m/s

SPECIES

Canine

BREED

Shepherd Mix

ASSESSMENT/RECOMMENDATIONS

This examination demonstrates moderate to severe depression of Shelby's left ventricular systolic function, as well as regurgitation of blood across his tricuspid valve. While I can't rule out the presence of a primary dilated cardiomyopathy or myocarditis as the cause of Shelby's myocardial function, his history of receiving a grain-free diet suggests that he may be suffering from a diet-associated cardiomyopathy.

SEX

MN

AGE

3 y

While Shelby does not have secondary dilation of his left heart chambers, he does have mild to moderate dilation of his right heart chambers, which is likely due to a combination of his tricuspid regurgitation and right ventricular myocardial dysfunction (due to ventricular interdependence, left ventricular dysfunction often results in secondary right ventricular dysfunction). Given the presence of mild to moderate right heart chamber dilation, it's likely that Shelby's peritoneal and pleural effusions are the result of the development of right-sided congestive heart failure. In addition to right-sided CHF, Shelby is at risk for the development of exercise intolerance, syncope, arrhythmia formation, and potentially left-sided CHF, therefore, careful monitoring for these is recommended.

WEIGHT

32.2 kg

Thoraco- and abdominocentesis is recommended.

HOSPITAL NAME

SVS Imaging CT

A whole blood taurine level is recommended, and taurine supplementation (1000 mg BID) should be given if a deficiency is documented. A switch to a traditional grain-based diet is recommended (please visit the Tufts Heart Smart website and click on forms for examples of recommended diets for dogs with cardiac disease).

REFERRING VET

Dr. Cavanaugh

Recommended therapy based on Shelby's echocardiogram includes furosemide (75 mg BID),



enalapril (15 mg BID), pimobendan (7.5 mg BID), and spironolactone (37.5 mg BID).

DATE

A recheck physical exam, thoracic/abdominal radiographs, and renal/electrolyte profile are recommended in 1-2 weeks. A recheck echocardiogram is recommended in ~6 months.

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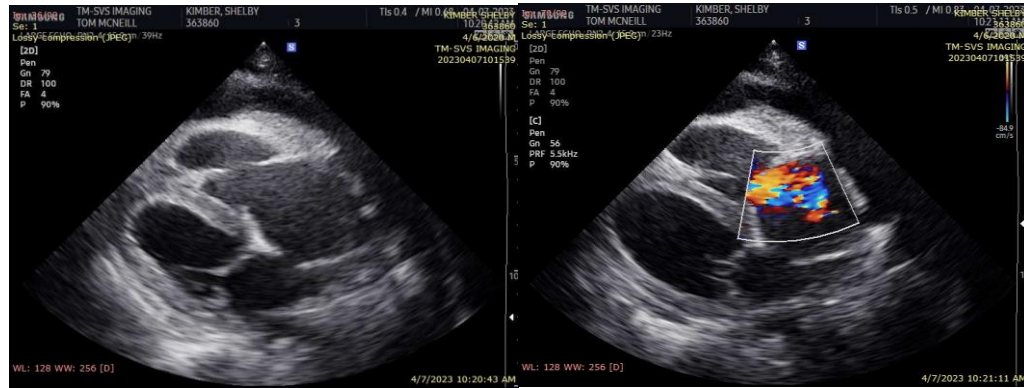
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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