



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Harley Logan  
**SPECIES** Feline  
**BREED** DSH

Harley has a > 1 year history of scooping his hind legs under and arching his back, and then biting at his hip region. He was seen at different veterinary and he was found to have L-S pain and had radiographs done in Oct 2020. Spondylosis was found between L7-S1. He was placed on a 2 week trial of antibiotics (Convenia injection) and then rads were re-taken and found to be no better or worse. He was placed on intermittent pain relief (gabapentin and/or meloxicam) as needed. We saw him in Jan 2022 for pain in the hind end. We palpated pain in his L-S region as well and got him on laser therapy for pain, as well as daily meloxicam. His pain has been well-managed on this regimen. He is not lame and is less painful on palpation of this region on PE. No other abnormal PE findings other than mildly overweight BCS 3.5/5.

**SEX** MN

Abnormal PE/Chem/CBC/UA Results: Jan 2022 Bloodwork (CBC, Chem, T4, SDMA) - all unremarkable. Spinal rads taken Jan 28 2022 and sent for interpretation - spondylosis (marked) in the L-S region as well as narrowing of that disk space. I also feel like the caudal end L7 and cranial aspect of S1 are more radio-opaque than they should be. IVDD vs discospondylitis vs OA/degenerative disease? I did not feel like this was a neoplastic lesion, but still on my ddx list.

**RADIOGRAPHIC STUDY OF THE LUMBAR SPINE**

Lateral and ventrodorsal views totaling 2 images available for review.

**AGE RADIOGRAPHIC FINDINGS**

**AGE** 12 Years  
 There are 7 normally shaped lumbar vertebrae.

**INTERPRETED BY** The sacrum comprises two fused vertebrae only.

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 Dr. med. Vet. DipECVDI  
 A vestigial rib appears to be seen as a faint linear mineral opacity ventral of the 1<sup>st</sup> lumbar vertebra.

**HOSPITAL NAME** The lumbosacral intervertebral disc space is severely reduced in width. Vertebral end plate sclerosis is seen as well as a moderate ventral and lateralized spondylosis deformans. There is no evidence of vertebral end plate defects, traumatic osseous injury, or aggressive bone lesions.

Woodridge  
 Veterinary Clinic  
 Mild generalized osteopenia appears to be present.

**RADIOGRAPHIC DIAGNOSIS**

- Degenerative lumbosacral stenosis.
- Lumbosacral transitional vertebra.
- Osteopenia - age related versus disuse.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE** 49942  
**DATE** 1-28-22

The radiographic findings support the presence of degenerative lumbosacral stenosis with ventral and lateralized spondylosis deformans as well as intervertebral disc disease. The reduced width of the intervertebral disc space may reflect uncomplicated degenerative disc disease; however, disc protrusion remains a potential. There is no radiographic evidence of discospondylitis which I would expect to be radiographically evident at this point with the long standing history of the clinical signs in this patient. No evidence of aggressive bone lesions is found.



**PATIENT**

Harley Logan

The lumbosacral changes may be associated with the clinical signs; however, concurrent presence of other spinal pathology cannot be ruled out and further definition with greater sensitivity by means of an MRI could be considered depending on the severity of the patient's clinical signs.

**SPECIES**

Feline

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MN

**AGE**

12 Years

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Woodridge  
Veterinary Clinic

**REFERRING VET**

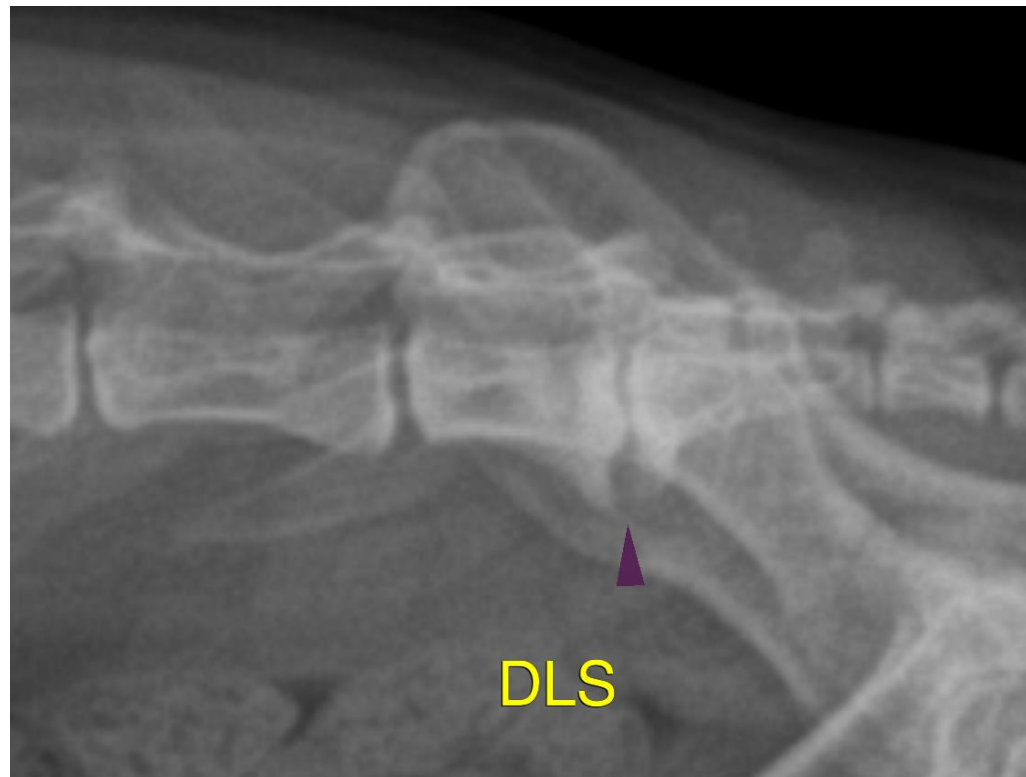
Anique McCrea-  
Spence

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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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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