



PATIENT PRESENTING CLINICAL SIGNS

Bella Livore One month history of left hind limb lameness after playing with owners daughter. Radiographs of the leg did not show any obvious fractures or issues, but there was a possible avulsion fracture in the left caudal distal tibia. She has continued to be lame despite moderate exercise restriction and anti-inflammatory. Examination Findings: Thoracic auscultation and abdominal palpation were within normal limits. Ambulatory x 4 with a mild left hind limb lameness; moderate muscle atrophy of the left hind limb compared to the right; no areas of pain or joint instability palpated in either hind limb. BCS 4/9 Assessment: Left hind limb lameness of one months duration - possible chronic avulsion fracture of the distal tibia vs ligament or tendon injury of the tarsus. Recommendations: Since nothing was obvious on palpation, and it had been 4 weeks since the last radiographs, I recommended further imaging of the leg. We could take another set of radiographs because enough time has passed that we might see further changes, but since the changes may be subtle, we could do a CT scan. This would give more information, but is more expensive. The problem with doing radiographs is that we may not see anything and then need to follow up with CT. If there is a small fracture fragment that has displaced, surgery may be required to remove the fragment. If there is a hairline fracture with no displacement, then shock wave therapy would be recommended. Shockwave can also be helpful for ligament and tendon injuries. The owner may consider attempting shockwave therapy of the distal limb to see if we get improvement, but in this case we dont know exactly what we are treating. Abnormal PE/Chem/CBC/UA Results: Thoracic auscultation and abdominal palpation were within normal limits. Ambulatory x 4 with a mild left hind limb lameness; moderate muscle atrophy of the left hind limb compared to the right; no areas of pain or joint instability palpated in either hind limb.

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Intact Female

AGE

2 Years

COMPUTED TOMOGRAPHIC STUDY OF THE LEFT TARSUS & STIFLES

Plain and post contrast studies available for review.

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

COMPUTED TOMOGRAPHIC FINDINGS

Left Tarsus

Moderate tibiotarsal joint swelling is noted. There is a moderate amount of periarticular osteophytes in the talocalcaneal and tibiotarsal joints as well as onto the sustentaculum tali.

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A 1.5 mm sized fragment is isolated from the caudal and distal joint surface of the left tibia with only minimal displacement.

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A 1.5 mm sized rounded fragment is isolated from the plantar aspect of the medial malleolus. This "fragment" is rounded, and mild regional soft tissue swelling is noted.

There is partial talocalcaneal fusion with the mid and proximal third of the talocalcaneal articulation being collapsed and presenting osseous fusion whilst a line of separation between the talus and calcaneus is maintained in the distal third.

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The intertarsal bones and joints are in situ.

Stifles

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The left hind limb presents significant volume loss of its musculature.

**PATIENT**

Bella Livore

Both stifle joints presents within normal limits. There is no evidence of articular swelling. The patellae are in situ. No significant periarticular osteophytosis is seen. The position of the tibia appears to be within normal limits with respect to the femoral condyles. The fabellae are in situ.

The bilateral popliteal lymph nodes present within normal limits.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Chronic traumatic osseous injury of the left tibiotarsal joint with slab fragment of the caudodistal tibia, suspect avulsion of the medial collateral ligament from the medial malleolus, osseous fusion of the talocalcaneal joint as well as moderate secondary left tibiotarsal osteoarthritis, and deep digital flexor tendinitis.
- Disuse atrophy of the left hind limb musculature.
- Normal CT findings of the stifle joints.

SEX

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INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT findings suggest multiple chronic osseous and ligamentous injury within the left tibiotarsal joint involving the caudal and distal part of the left tibial joint surface as well as the medial malleolus, medial collateral ligament, and talocalcaneal fusion. Moderate secondary osteoarthritic changes are seen as well as signs of chronic deep digital flexor tendinitis with new bone formation on the sustentaculum tali which is a common consequence of tibiotarsal osteoarthritis.

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The avulsion of the medial collateral ligament appears to be partial, however, integrity of the biomechanical stability should be monitored by means of clinical palpation.

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Partial talocalcaneal fusion has been achieved already, however, surgical techniques such as partial or full tarsal arthrodesis, replacement of the medial collateral ligament, and/or removal of the tibial fragment can all be discussed.

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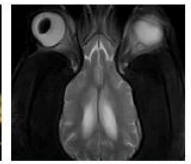
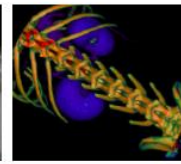
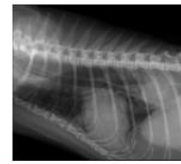
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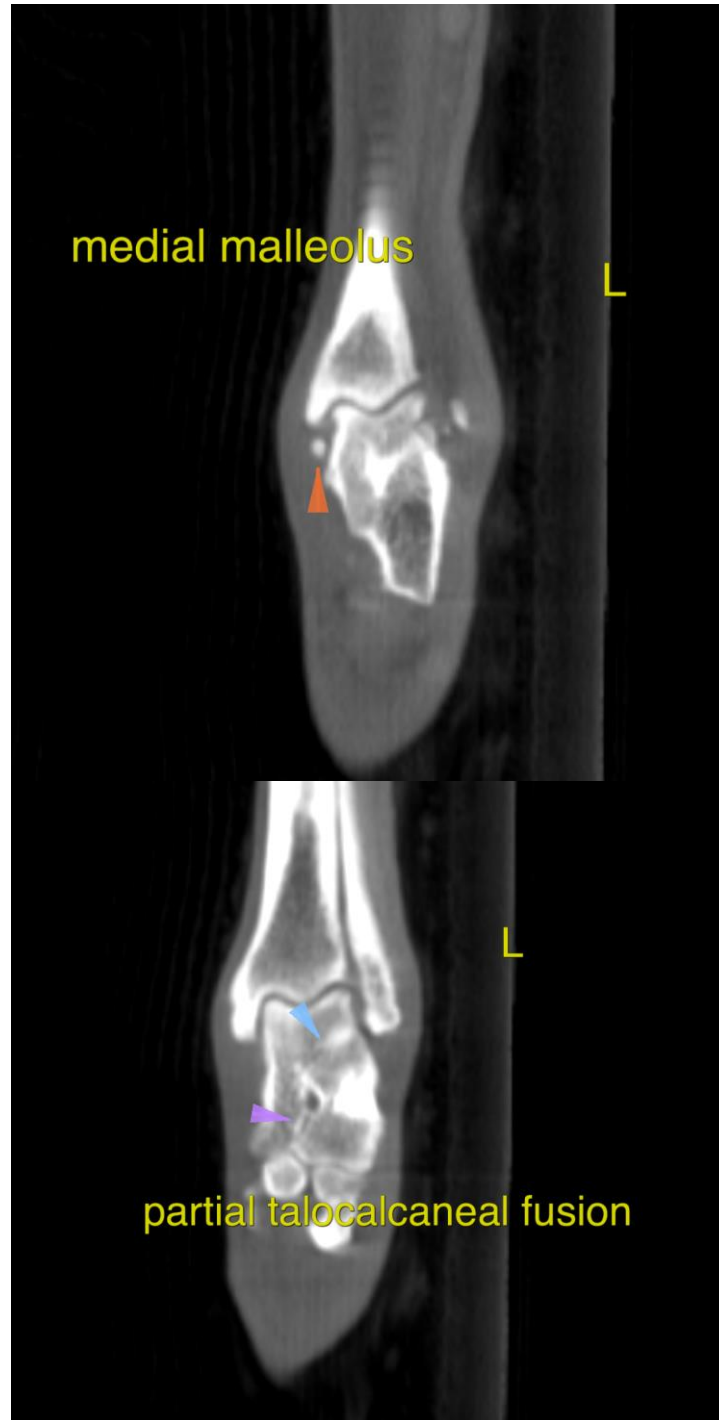
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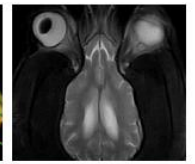
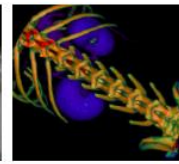
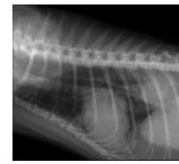
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Bella Livore **The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

SPECIES

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.

Canine

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