



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Rusty Dalcanto
PRESENTING CLINICAL SIGNS P present for coughing gagging, O noticed 2 months ago P would drink water and then do gagging and then water would come out of the left nostril. The frequency has gone from occasional to now happening every time P goes to drink. O has tried elevating the water bowl and it has not helped.

SPECIES Canine
BREED Golden Retriever Standard Poodle Mix
 O reports no problems when P is eating. P had X-ray taken 6/13/23. He has been doing a little cough for at least a year. Over the past few months they noted the cough was occurring when he was eating or drinking. Then the past 2 months he has had fluid and mucus coming from his nose after he drinks water, which has been severe for the past month. He will occasionally regurgitate after eating but primarily brings up mucus rather than food. On 6/13 he was evaluated for this issue for the first time. He was treated with 7 days of Clavamox and his food and water bowls were elevated. Since then he has been pouring less water and mucus from his nose after he drinks. They feed him Kirkland adult kibble.

SEX CM
ABNORMAL PE/CHEM/CBC/UA RESULTS: Blood work is dated 6/16/23. CBC - PCV = 61%, WBC = 15,100, neutrophils = 11,778, lymphocytes = 1,1661, monocytes = 1,510, eosinophils 151, platelets = 173,103. Chemistry - SDMA = 17.1, otherwise normal. Urinalysis 6/16/23 - USG = 1.051, pH = 7.0, 1+ protein, quiet sediment. HW = negative. T4, fT4 and TSH = normal. Acetylcholine Receptor Ab-Myasthenia Gravis = 0.01 (normal <0.6) A barium swallow shows normal esophageal motility. Cricopharyngeal dysphagia or asynchrony is suspected and there are multiple mild aspiration events into the proximal trachea.

AGE FLUOROSCOPIC BARIUM SWALLOW STUDY OF THE ESOPHAGEAL & OROPHARYNGEAL SWALLOWING PHASES

AGE 6 Years
 7 cine loops available for review, 2 of which represent the esophageal phase of swallowing and 5 for the oropharyngeal phase of swallowing.

INTERPRETED BY FLUOROSCOPIC FINDINGS

INTERPRETED BY Nele Eley, DVM
 Dr. med. Vet. DipECVDI
Esophageal Phase of Swallowing

The motility of the thoracic esophagus presents within normal limits. Primary or secondary peristaltic waves of the esophagus are able to propel the boluses through the esophagus appropriately and to clear the thoracic esophagus completely.

Lower esophageal sphincter opening appears to be prompt and synchronous.

No evidence of abnormal dilation or abnormal pathway of the esophagus is seen.

Oropharyngeal Phase of Swallowing

Bolus formation appears to be delayed. Occasional pharyngeal contractions appear to be incomplete. Multiple pharyngeal contractions can be observed after bolus formation without successful passage of the bolus through the cricopharyngeal sphincter which remains closed for multiple attempts of bolus propulsion then opens asynchronous to the pharyngeal contraction. The transport of the bolus after successful passage through the cricopharyngeal sphincter appears to be delayed in the upper cervical esophagus immediately caudal to the cricopharyngeal sphincter.

INVOICE 59651
DATE 8-2-23
 Repeated aspiration of contrast media into the larynx, laryngeal ventricles, and trachea can be observed during the unsuccessful attempts of bolus propulsion through the cricopharyngeal



PATIENT sphincter.

Rusty Dalcanto

FLUOROSCOPIC DIAGNOSIS

SPECIES

Canine

- Disturbed oropharyngeal phase of swallowing with cricopharyngeal sphincter asynchrony.
- Suspect incomplete/reduced pharyngeal contraction.
- Suspect upper cervical esophageal dysmotility.
- Aspiration of contrast media into the larynx and trachea and repeated oro- and naso-pharyngeal reflux of contrast media.

BREED

Golden Retriever
Standard Poodle Mix

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The main finding appears to be the asynchrony between the pharyngeal contraction and the cricopharyngeal sphincter opening suggesting presence of cricopharyngeal sphincter asynchrony/achalasia. There appears to be lack of coordination between the pharyngeal contraction and upper esophageal sphincter relaxation.

SEX

CM

The dog appears to be too old for idiopathic congenital neuromuscular disease with cricopharyngeal dysphagia which is why other neuromuscular disease, hypothyroidism, and myositis should be considered potential differential diagnoses as well. This could also explain the suspect incomplete pharyngeal contractions and delayed/disturbed upper esophageal motility. Unilateral or bilateral cricopharyngeal and thyropharyngeal myectomy can be considered once other differential diagnoses as mentioned above have been ruled out.

AGE

6 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

VetMed Consultants

REFERRING VET

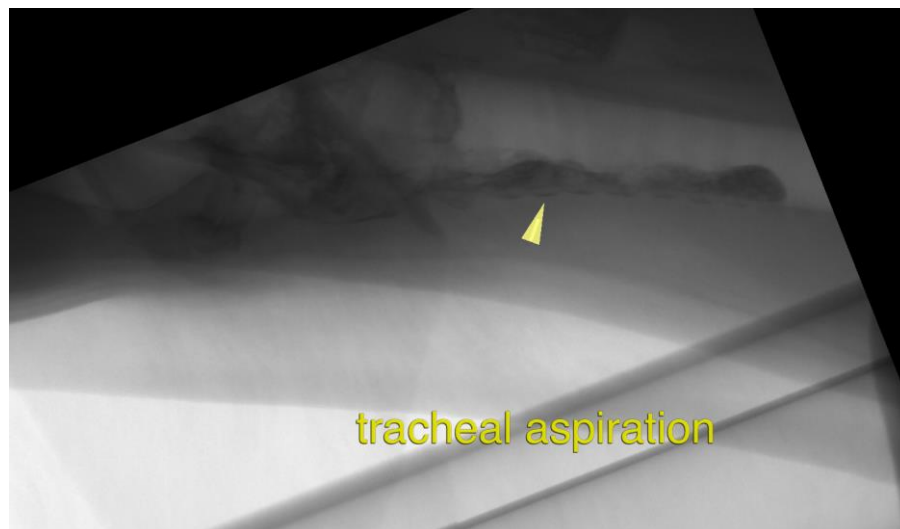
Drew Allen

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PATIENT

Rusty Dalcanto

SPECIES

Canine

BREED

Golden Retriever
Standard Poodle Mix

SEX

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AGE

6 Years

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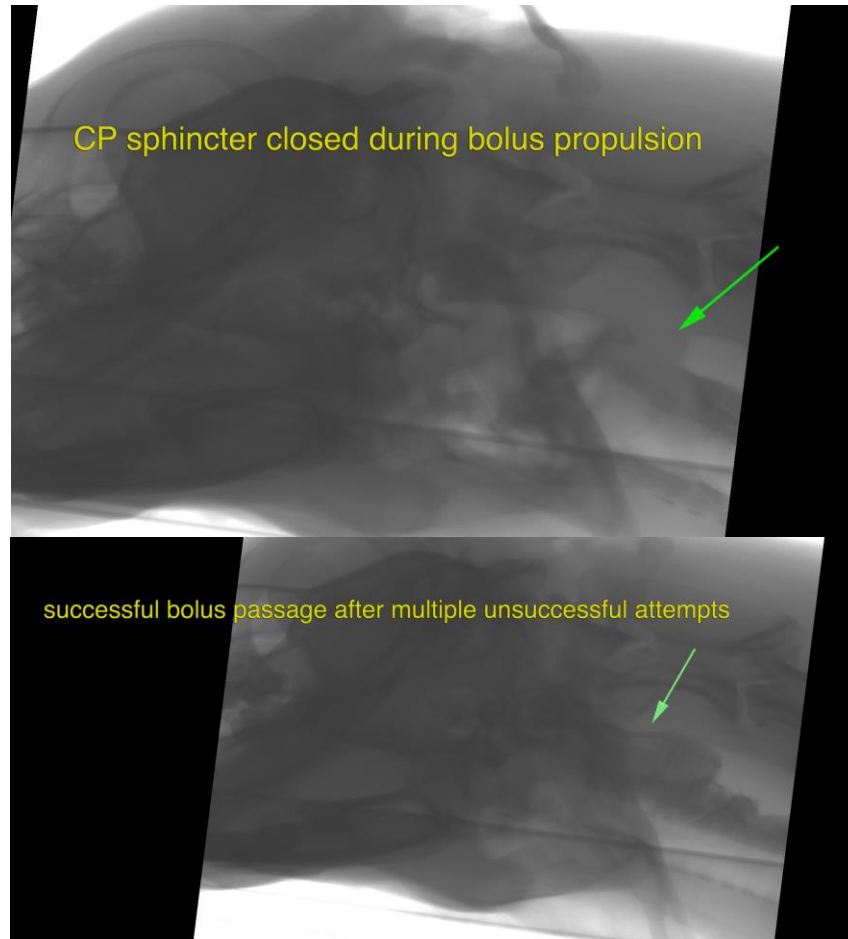
Drew Allen

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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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