



**PATIENT**

Meila Fisk

**PRESENTING CLINICAL SIGNS**

Has 5-6 cm mass immediately caudal to stomach. Weight loss. Hematochezia. Vomiting first week of May. Increased kidney & liver enzymes.

Abnormal PE/Chem/CBC/UA Results: Increased WBC  $18.22 \times 10^9/L$ , alp197 U/L, alt 143 U/L, amyl 1868 U/L, crea 175 umol/L

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE ABDOMEN**

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

**BREED**

American Bulldog

**COMPUTED TOMOGRAPHIC FINDINGS**

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

**SEX**

FS

Both kidneys present a moderately decreased volume and irregular margins. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

**AGE**

10.5 Years

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

Multifocal throughout the hepatic parenchyma, well-defined, roundish, parenchymal filling defects, measuring up to 2.6 cm in diameter, are appreciated.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

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The stomach is moderately distended by chymus. The pylorus of the stomach presents a circumferential moderate to marked thickened of the wall, measuring up to 3.9 cm in width and loss of normal wall layering. The affected segment of the pylorus is measuring approximately 6.4 cm in length, involving the most proximal segment of the duodenum.

**REFERRING VET**

Dr. Fisk

Multifocal moderate spondylosis formation is seen along the lumbar spine. The lumbosacral intervertebral disc is significantly protruding into the vertebral canal, occupying approximately up to 75% of the cross-sectional area of the vertebral canal at the same level. The vertebral endplates of the lumbosacral junction are irregular with multiple moth eaten defects of the subchondral bone Both coxofemoral joints present moderate osteophyte new bone formation. The acetabular groove bilaterally is shallow joint space of the coxofemoral joints is incongruent.

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Intramural pyloric mass
- Advanced chronic nephropathy
- Multiple hepatic cysts
- Degenerative lumbosacral stenosis with compression of the cauda equina fibers and chronic remodeling of the respective vertebral endplates
- Spondylosis deformans

**DATE**

5-31-22



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The main finding is the intramural mass originating from the pylorus, involving the most oral duodenal segment - the finding is consistent with neoplastic transformation. Differentials include adenocarcinoma, lymphosarcoma, leiomyosarcoma, other. Ultrasound guided FNA sampling or gastroscopy including biopsy might be used as advanced diagnostic tests. Complete excision of the mass warrants Billroth 1 surgical procedure.

Prognosis is guarded.





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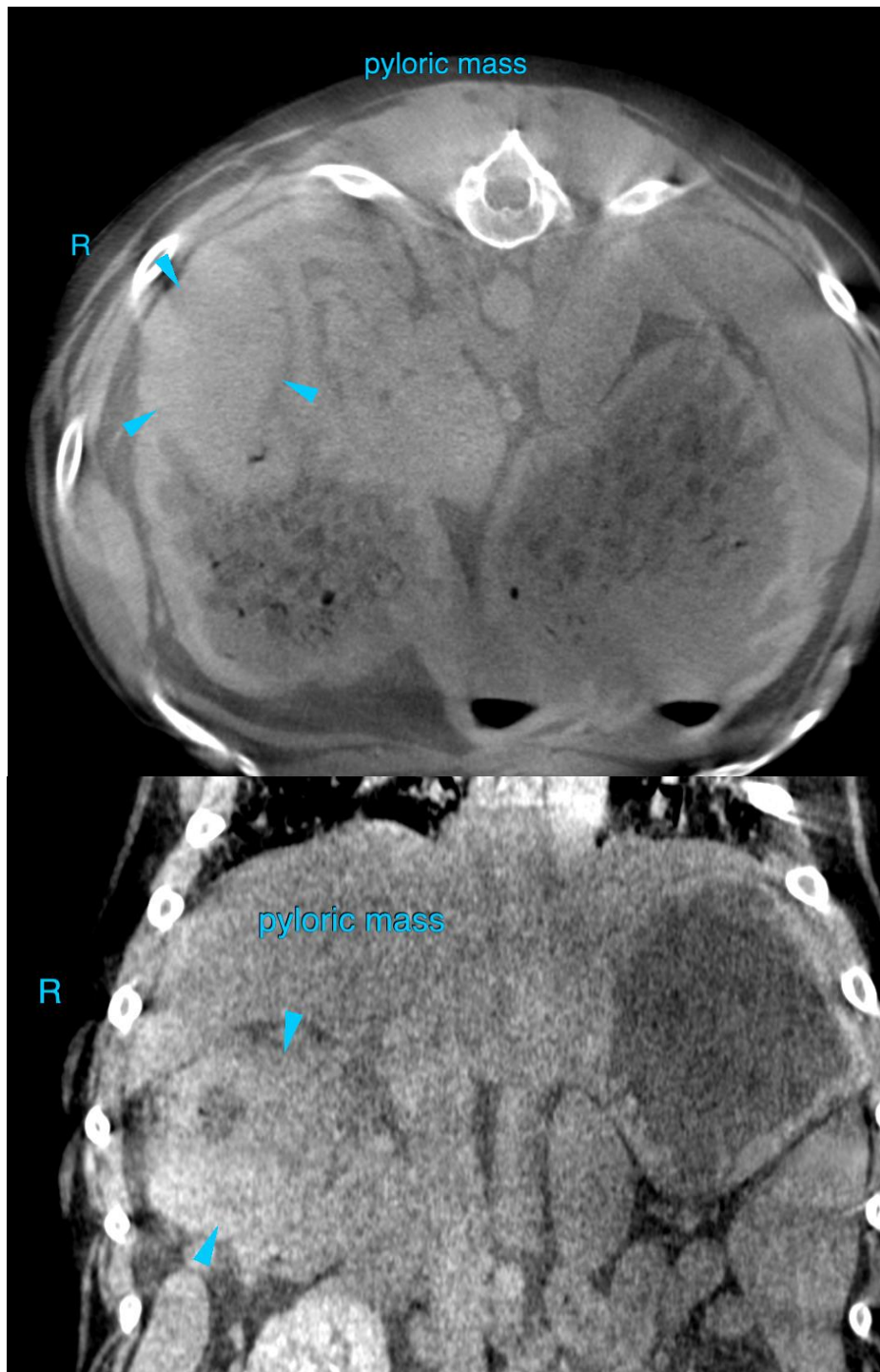
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

**BREED**

American Bulldog

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com

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