



PATIENT PRESENTING CLINICAL SIGNS

Dottie Derence Large 7x6cm mass right caudal abdomen with smaller masses ventrally

SPECIES COMPUTED TOMOGRAPHIC STUDY OF ABDOMEN

Canine A pre- and post-contrast CT study of the abdomen are provided for review, totaling two series. One pre-contrast CT series soft tissue algorithm and one post-contrast CT series, soft tissue algorithm.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Siberian Husky Mix A large, rounded, heterogeneously enhancing soft tissue mass is located at the topographic region of the right anal sac and contiguous with an ipsilateral rectum wall border. The mass is moderately enhanced. The lesion causes extramural and/or mural mass effect in the distal portion of the rectum, and mild extramural luminal compression is seen. The mass measures approximately 4.1cm x 3.3cm x 4.1cm in size. The extension of the mass with contact to the rectum wall border is at least 3.0cm in length.

SEX

Female Spayed

AGE

5 Years

Multiple caudal abdominal lymph nodes are enlarged causing a mass effect in the caudal retroperitoneum space and pelvic cavity. The right and left sacral lymph nodes (> right); the internal iliac lymph node, the medial iliac (and accessories) lymph nodes, and multiple aortic lymph nodes at the lumbar trunk. The lymph nodes are enlarged, irregular in shape, and heterogeneously enhancing.

The largest lymph nodes are the medial iliac (and accessories) (> right). The right medial iliac lymph nodes (and accessories) measure 8.2cm x 4.4cm and 3.0cm x 2.1cm. The left medial iliac lymph nodes (and accessories) measure 2.6cm x 1.4cm and 1.8cm x 1.1cm. The right sacral lymph node measures approximately 4.2cm x 2.7cm. The left sacral lymph node measures approximately 3.9cm x 1.4cm. The largest internal iliac lymph node measures approximately 3.4cm x 2.8cm.

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

The remainder of the abdominal lymph nodes and adrenal glands are normal.

The spleen is mildly enlarged, convex shape, homogeneously attenuating, and enhancing.

HOSPITAL NAME

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The right renal silhouette is normal in size, shape, contour, and attenuation pre- and post-contrast. Normal pelvis. The right ureter insertion is more caudal than usual, in the vesical neck/proximal urethra. No evidence of abnormal distension. The right kidney length is 7.2cm

REFERRING VET

Dr. Gans

The left renal length is normal in size, mildly irregular contour, presenting moderate pelvic dilatation, 2.1cm of distension and ipsilateral megaureter. The left ureter is entirely distended, and also with more caudal insertion into the neck/proximal urethra. The left kidney length is 7.1cm. The proximal ureteral distention is 2.4cm in diameter, and the distal ureteral distention is 1.0cm.

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The urinary bladder is mildly filled, with the apex in the plane of L6, and is homogeneously soft tissue opaque.

The stomach is mildly filled and normally positioned, containing a small amount of gas admixed with homogeneous soft tissue attenuating material – fluid.

DATE

6-21-23

The small intestines are nondilated and contain a small amount of fluid attenuating material and gas.



PATIENT The descending colon and rectum contain gas admixed with heterogeneously soft tissue attenuating fecal material.

Dottie Derence

The liver is homogeneously soft tissue attenuating and uniformly contrast enhancing with normal size and shape. The gallbladder is unremarkable.

SPECIES

The pancreas is normal.

Canine

The mesentery and retroperitoneal fat are normal.

BREED

The collimated thorax and musculoskeletal structures are unremarkable.

Siberian Husky Mix

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large right-sided anal sac mass. Differential diagnosis includes neoplasm, for example, apocrine gland adenocarcinoma.
- Multiple, regional, variably sized enlarged abdominal lymph nodes (sacral, medial iliac, internal iliac, and at the lumbar trunk), metastatic. The enlarged lymph nodes are causing the mass effect in the caudal abdominal, retroperitoneal space and pelvic canal.
- Left side hydronephrosis and megaureter, likely correlated to abnormal insertion, ureteral ectopy (intramural). Differential diagnosis concurrent pyelonephritis.
- Right ureteral more distal insertion, however without dilatation and normal bladder distention.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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For the final diagnosis of the right anal sac mass, a biopsy is required.

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The enlarged internal iliac and medial iliac lymph nodes indicate regional metastasis and is correlated to the previously detected abdominal masses. A calcium blood measurement analysis is suggested to search for concomitant hypercalcemia. Usually, the therapeutic approach involves a surgical approach; in this specific case, consider the extension of the mass beyond surrounding the rectum wall. In addition, coadjuvant chemotherapy or radiotherapy could be necessary; In this case, due to the size and number of noted metastatic lymph nodes, the prognosis poor.

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Correlate the left renal hydronephrosis and megaureter findings with clinical signs of recurring urinary infection and/or incontinency. A cystoscopy is suggested for further evaluation, and eventually for therapeutic management.

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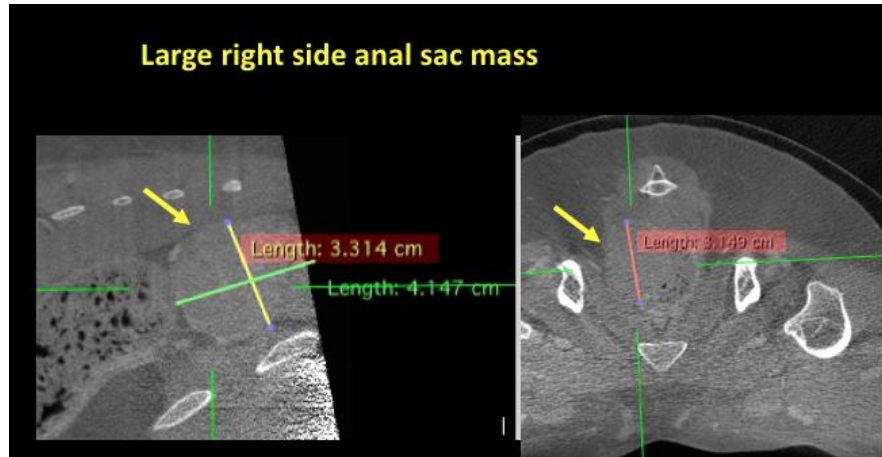
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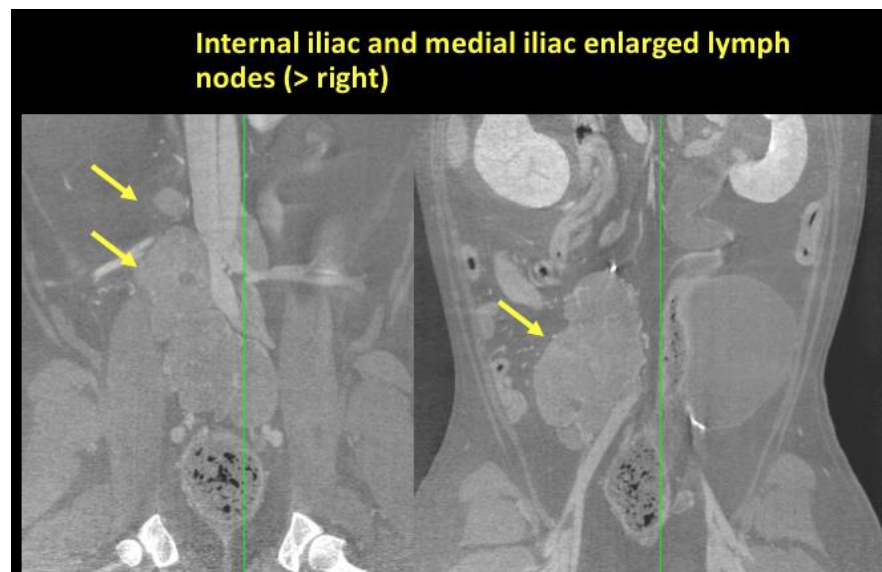
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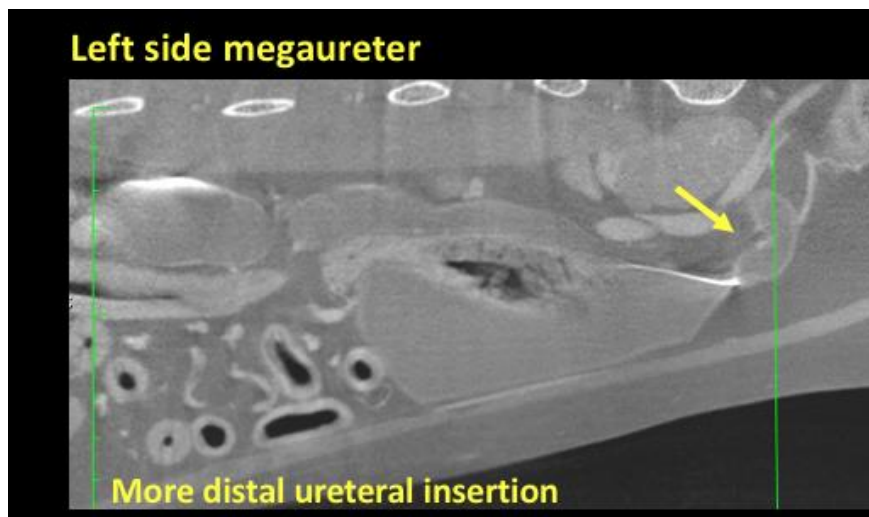
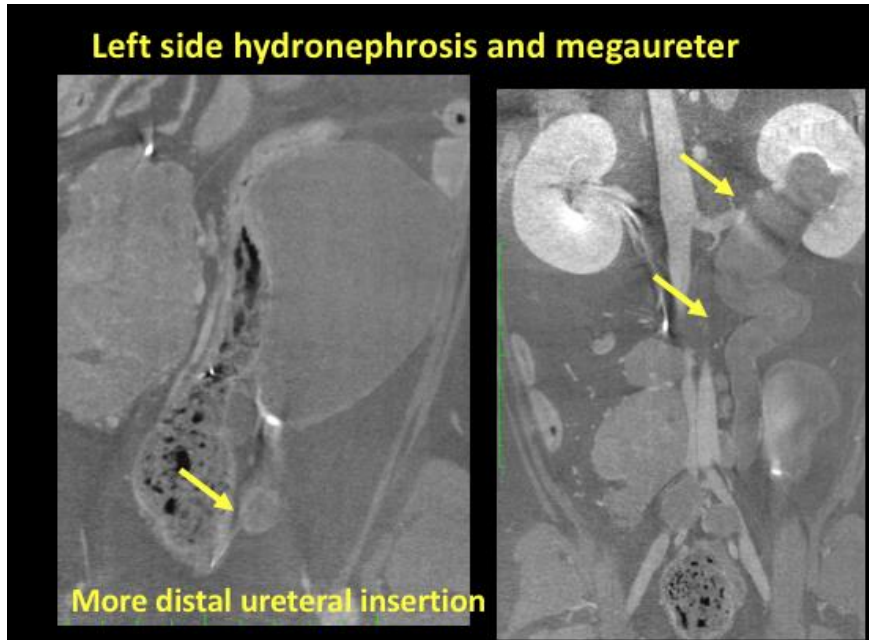
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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