



PATIENT PRESENTING CLINICAL SIGNS

Zena Woolman 3 weeks ago, suddenly went limp on back legs Lameness in L hind, ++significant atrophy of lateral thigh, is not reactive with quite firm stifle extension, not really getting stifle effusion. As soon as went to do hip extension quite significant reaction. Suspect is issue in pelvis/spine. Rads have been taken, rec CT +/- myelogram, ddx disc or neoplasia??

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE LUMBAR SPINE AND PELVIS

BREED

Bull Terrier Mix

A pre- post-contrast CT and TC myelography study of the lumbar, lumbosacral spine and pelvis are provided for review, totaling 5 series. One pre-contrast of the lumbar spine and pelvis, bone algorithm. Two post-contrast of the lumbar spine and pelvis, soft tissue algorithm. One pre-contrast of the lumbar spine and pelvis, bone algorithm. Two post-myelogram lumbar spine, bone algorithm and soft tissue algorithm.

SEX

Female Spayed

COMPUTED TOMOGRAPHIC FINDINGS

SPINE (T12-T13, L1-L7/S1 and caudal vertebrae)

AGE

12 Years

At the level of L7-S1, there is multifocal osteolysis of the endplates bilaterally and there is also irregular periosteal proliferation and completed bridging spondylosis deformans. Within the ventral aspect of the vertebral/epidural canal is a moderate amount of mixed attenuating extradural material showing irregular deviation of the contrast lines and causing nerve root impingement.

A small focus of osteolysis is seen at the cranial endplate at L5.

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Complete and incomplete bridging spondylosis deformans are seen at T12-T13, L2-L3 and L3-L4

Normal spine alignment.

CT Myelogram

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Adelaide Plains Veterinary Surgery

A spinal needle is seen at the level of L7-S1. The contrast medium is within the subarachnoid and epidural spaces. Mild irregular filling defects are seen at L7-S1 region. The contrast medium travels cranially and at the level of L2-L3, there is reduced appearance of the ventral line and mild dorsal deviation. In addition, at the level of L3-L4, L4-L5 and L5-L6 there is a variable and mildly reduced appearance of the ventral line of the contrast medium.

REFERRING VET

Dr J Katakasi

Multifocal retention of the contrast medium in the epidural space is seen adjacently in the caudal lumbar vertebra, cauda equine region.

A few tiny spots of gas are also seen in the epidural and subarachnoid spaces, iatrogenic.

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PELVIS

The coxofemoral joints and pelvis are unremarkable.

No aggressive osseous lesions are identified.

DATE

7-17-23



PATIENT Reduction of the gluteal and pelvic muscle mass is seen and more evident within the left side.

Zena Woolman

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Multifocal osteolysis of the endplates of L7-S1 and cranial L5, the differential diagnosis includes discospondylitis.
- L2-L3, L3-L4, L4-L5, L5-L6 and L7-S1 small amount of extradural disc material, chronic disc disease, and mild herniation, with mild spinal cord compression and root impingement.
- Multifocal spondylosis deformans at T12-T13, L2-L3 and L3-L4.
- Normal pelvis and coxofemoral joints.
- Muscle disuse atrophy, mild, more left side.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings of discospondylitis, especially at the level of L7-S1, explain the clinical reported signs of suddenly limping on the back legs, and muscle mass atrophy. The occurrence of more evident muscle mass of the left side could be correlated to more nerve root impingement at this side. However, it is not clearly evident if this difference is in the vertebral canal and foramen. In a recent published study, multiple agents could be correlated to discospondylitis, such as *Staphylococcus spp*, *Streptococcus spp*, and *Pasteurella species* are the most identified. However, fungal diseases are less likely, for example, *Aspergillosis*. Consider cerebrospinal fluid (CSF) sample collected for evaluation.

Reference: Van Hoof, C, Davis, NA, Carrera-Justiz, S, et al. Clinical features, comparative imaging findings, treatment, and outcome in dogs with discospondylitis: A multi-institutional retrospective study. *J Vet Intern Med.* 2023; 1- 9. doi:10.1111/jvim.16785

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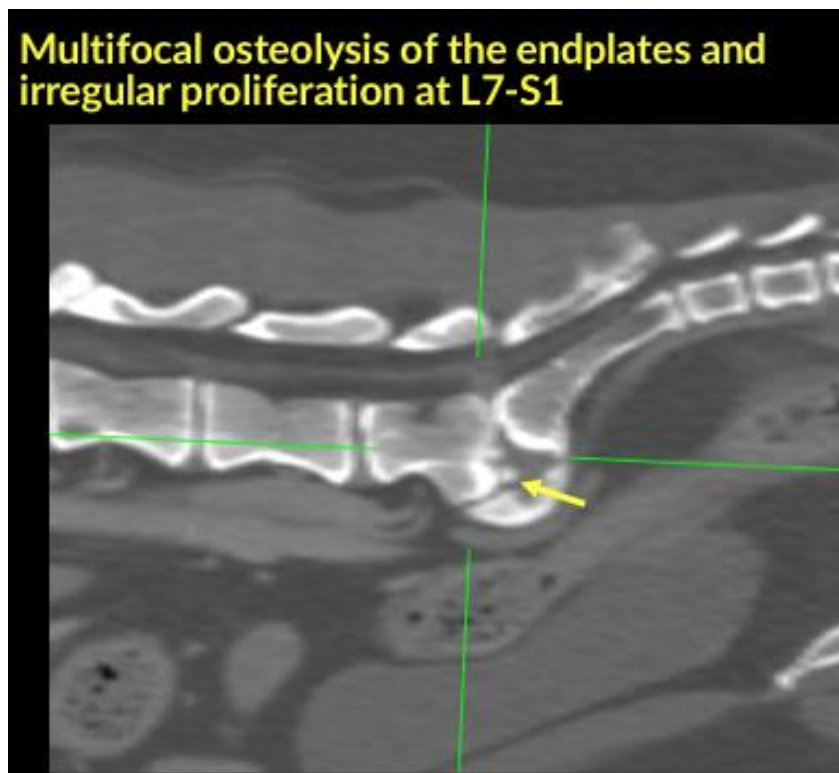
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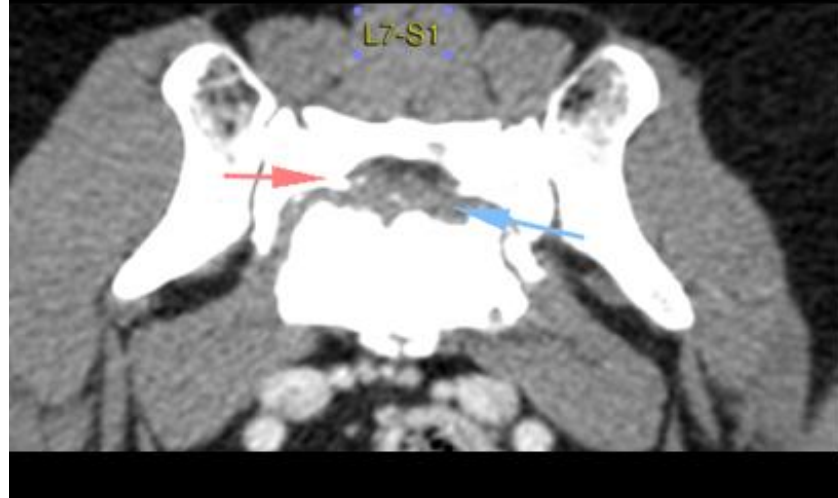
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Mixed attenuation material, ventrally within the vertebral canal at L7-S1



Multifocal osteolysis of the endplates and irregular proliferation at L7-S1





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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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