WHAT IS YOUR DIAGNOSIS?

In this month’s ‘What is your diagnosis?’ we will concentrate on the interpretation of diagnostic imaging. An image is presented along with a brief clinical scenario followed by a question. Answers are found at the end of the article.

1) A dog was presented due to acute abdominal pain and lethargy. The dog was currently on treatment for piroxicam for lymphoplasmacytic rhinitis. What does the radiograph show and what would you do?
2) A puppy with chronic diarrhoea had been improving in terms of demeanour and appetite but then showed reduced appetite, vomiting and lethargy. Abdominal palpation revealed a firm, uncomfortable area mid-abdomen. An abdominal ultrasound examination revealed the following findings. What is your diagnosis?
3) A young female neuter Hungarian Viszla is presented due to urinary incontinence. The dog was a kennelled, working dog so the exact pattern of incontinence was poorly characterised. However, the dog’s bed was frequently wet in the morning and urine was seen dribbling from the vulva as the dog walked. A retrograde vaginourethrogram (b) was performed and compared with that from a normal dog (a). What is the most likely cause of the incontinence?

a)

b)
Answers

1) The radiograph revealed pneumoperitoneum, with free gas visible in the dorsocranial abdomen, giving natural contrast to the cranial pole of the right kidney, the liver and also highlighting the diaphragm (air density of both sides of the crura). This is an indication for emergency exploratory celiotomy which in this dog revealed two perforated gastric ulcers, likely secondary to piroxicam administration.

2) The ultrasound image shows a multi-walled portion of intestine, consistent with an intussusception.

3) The abnormal vaginourethrogram study (b) showed an additional structure between the bladder/urethra and the vagina that filled with contrast along part of its length. This is an ectopic ureter and appears to be entering the urethra at the middle section of the urethra.