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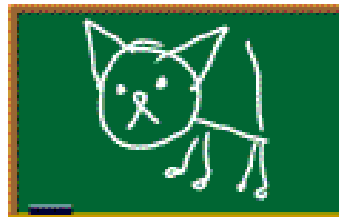
Weakness in a cat

An eight-months old female spayed domestic short haired cat presented to VNS for difficulty jumping all her life. Over time, she became unable to jump at all and developed an odd gait, an arched back and a bushy tail.

On examination, the cat was alert and responsive but was dysmetric, falling over more on the front legs than the back, buckling on the right thoracic limb particularly. She had a very arched back posture. She tired easily. Patellar reflexes were absent and withdrawal reflexes were poor with no cranial tibial response to stimulus. There was a slight head bob when resting.

Neuromuscular disease was suspected. Acetylcholine receptor antibody titers were sent out and

normal, ruling out myasthenia gravis most likely. Steroids were tried and the cat responded well to the medication, relapsing as the steroids were weaned off.



SPRING 2008

On recheck, the cat had developed a cow-hocked stance and later a plantigrade posture with all limb reflexes being decreased. Supplements of L Carnatine and

Coenzyme Q did not help. Eight months after initial presentation, a neuromuscular work up was scheduled.

Under anesthesia (diazepam, butorphanol, propofol and isoflurane), an electromyogram was obtained. The EMG revealed abnormal activity in the muscles (positive sharps and fibrillation potentials with occasional complex repetitive discharges). Biopsy was taken of the left peroneal nerve and gastrocnemius muscle. Steroids were resumed.

The biopsies were sent to the comparative neuromuscular laboratory (http://medicine.ucsd.edu/vet_neuromuscular).

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A Weimaraner 's origins

An eleven year old male neutered Weimaraner presented for difficulty getting up and down, hind limb ataxia and draggin front feet. Steroids were helpful. The dog was receiving levothyroxine.

The examination indicated general ataxia, and tetraparesis

worse in the left pelvic limb with absent conscious proprioception. On the left thoracic and pelvic limb and the right pelvic limb. The dog was somewhat disoriented and wide eyed look. No pain on spinal palpation.

The localization was to the brain

most likely right forebrain.

Normal thoracic radiographs and blood work pre anesthesia. MRI was obtained (diazepam, propofol and sevoflurane anesthesia).

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Feline case report—continued

The results indicated chronic, mixed neuropathydenervation with components of both distal axonal loss and onion-bulb formations. This pattern was recognized by Dr. Diane Shelton in a number of young cats with a chronic relapsing polyneuropathy.

The cat has responded to therapy and is being maintained on steroids, co-enzyme Q and L carnatine. The outcome is unknown.

This case is a good example of

neuromuscular disorders. They tend to be insidious, difficult to localize and often the results are unclear. Response to therapy helps us define the process. Some may be inherited such as muscular dystrophy. The complete diagnosis includes the following:

- Complete blood work with thyroid panel (K9)
- Thoracic radiographs to identify megaesophagus
- EMG and electrodiagnosis

tic work up

- Muscle and nerve biopsy
- +/- AchR Ab titer
- +/- FeLV, FIV, FIP, toxoplasmosis and neosporosis titers +/- tick titers in dogs
- Trial therapy may help

Exercise intolerance in patients with normal or inconsistent proprioception usually indicates neuromuscular disease.

DART –Sarasota April 11-13

This three-day introductory course covers these key topics: introduction to the animals in disaster; the emergency management system; disaster preparedness for individuals and households, animal facilities, and communities; the Incident Command System (ICS); legal issues; communications; and teamwork. Other major topics covered include

community animal needs/ damage assessment; team response and procedures; animal care and handling; emergency animal shelters; equipment; and responder health and safety, including stress management. Table-top exercises will give students the chance to use and combine the skills learned during the training, including implementing ICS; communica-

tions; equipment; damage assessment; establishing and organizing a response; working with the media; responding to the changing needs; and managing disaster resources including volunteers

Please visit www.hsus.org and sign up for April 11-13, 2008 in Sarasota, sponsored by Veterinary Neuro Services LLC

Weimeraner ...continued.

Contrast enhancing lesion was noted intramedullary at C4, to the left and dorsal. This lesion was compatible with neoplasia.

The owners opted for surgery and the mass was debulked with a dorsal laminectomy.

The patient was ambulatory post surgery and barely ataxic two weeks later.

The biopsy returned as chordoma, neoplasm originating from remnants of primitive notochord in the spinal column. They are locally aggressive, infiltrative neoplasms which destroy the vertebral

body and invade adjacent tissues. Most frequently, they arise in the lumbosacral and coccygeal spine then the cranium and rarely the cervical spine up to C5. There is a high rate of metastasis to the lungs in affected rats. A rare human meningioma exhibited chordoma differentiation. (Report



Publication Reviews—what's new!

This section cover some of the neurological literature published over the



past six months

- Granulomatous meningoencephalomyelitis article in Compendium Nov 07 is excellent.
- Canine Pituitary Macrotumors in Jan 08 Compendium is instructional
- Visit www.vetneuromuscular.ucsd.edu/cases for very cool neuromuscular case reports.
- JVIM nov/dec 07 has a number of articles of interest.
- An article on MRI findings and clinical associations in 52 dogs with suspected ischemic myelopathy states that the severity of the signs on presentation is associated with the presence and the extent of the lesion on the MRI.
- Another article evaluating the use of EEG in healthy and epileptic Finnish Spitz Dogs confirms the value of EEG as a tool in the examination of patients with epilepsy and differentiating epilepsy from epileptiform transients of sleep.
- There also is a report of Sensory Ataxic neuropathy in Gold Retrievers, which occurs in dogs between 2-8 months

Helping you pet get back on its feet!

- Vitale and Olby also report that Labrador Retrievers may be predisposed to the development of severe hyperlipidemia in association with hypothyroidism and this can lead to the development of neurological signs due to atherosclerosis and thromboembolic events.
- Coates and March also characterized the familial degenerative myelopathy in Pembroke Welsh Corgi Dogs. The spinal cord lesion predominates as non inflammatory axonal degeneration.
- In JAVMA, February 1, 08 issue, there is an article about the adverse effects and outcome associated with dexamethasone administration in dogs with acute TL IVD herniation: 161 cases. Although I agree with the article, I wish to point out that I do not recommend more than 0.25 mg/kg for the first dose and 0.1 mg/kg bid thereafter. The article reports the use of Dex at 1-30 mg/kg. I also enforce only DexSP. Food for thought!
- January 15, 08 article reviews 85 cases of tumors affecting the spinal cord of cats. Lymphosarcoma was the most common tumor, followed by osteosarcoma.
- In the December 07 issue, Cohen reports that cats may play a role in the natural epidemiology of EPM and that the disease is less common among horses <2 years of age relative

of age and is slowly progressive.

to other neurological disease and horses used for particular types of competition may have an increased risk of developing EPM.

- In February 15, 08, a study of 35 dogs evaluating the accuracy of the withdrawal reflex for localization of the site of cervical disk herniation in dogs states that this reflex is not reliable for this purpose. I agree based on my personal experience.
- March 1, 08 states the MRI findings with surgical features in Dachshunds with TL IVD extrusions. T2-weighted images appear more accurate and precise for the determination of extradural disc material.
- In March 15, 08 issue, you can read about levetiracetam as an adjunct to Phenobarbital therapy in cats with suspected idiopathic epilepsy. It is well tolerated and may be useful in this purpose. The dose used was 20 mg/kg every 8 hours.

Blaze the Trail

ACVIM Forum

2008

San Antonio, TX

June 4-7

www.acvim.org



Enjoy a good article with a cup of coffee and share! Join your local veterinary medical associations for networking!

Community

Check out our web page for a list of the not for profit organizations we support and encourage you to be involved with.

March 30, 2008 is the Tri County Conference.

- **Technicians RSVP TO: Lee Allor, Royal Canin, Office # 1-800-484-8439 Pin # 8970, or Cell # 239-823-3980**
- **D.V.M.s RSVP TO: Dr Richard Carpenter, Caloosa VMS. E-Mail: cvms@embarqmail.com, 239-850-3902**

Keep us updated and let us know how we can help you. Remember to support your local animal associations and shelters. They need you.

THE VOICE

Cliff Roles

Is available for your on hold recording at www.cliffroles.com, www.247cast.com/cliff or 941-685-9017



Olla, from the Big Cat Habitat had spinal surgery for a calcified disc on March 12th. Wish her good luck at www.bigcathabitat.com

Vet-MR in house

□ We are very proud to announce that we are acquiring the Vet MRI Grande. This is the first in house strictly veterinary MRI on the gulf coast of Florida.

□ We are in the process of preparing the room in the hospital. The magnet has arrived. The RF cage is being made in Italy.

□ MRI will be offered for both neurological cases and for non neurological cases. The former will require an exam by a neurologist first and the latter will require a prescription.

□ MRI cost remains at \$1450

which includes anesthesia, the scan, the report and a copy of the scan to both owner and the



referring veterinarian.

□ All patients over 3 years of age will need blood work no older than two weeks and thoracic radiographs no older than one month prior to anesthesia.

□ Patients will have to be fasted 12 hours prior to anesthesia.

□ Reports will be faxed and mailed within 24 hours.