Abstract Thoughts

**Tube Cystostomy Complications in Dogs and Cats**


**ABSTRACT:** In this retrospective study from two university hospitals in England, the indications for, complications of, and outcomes associated with tube cystostomy in 37 dogs and 39 cats were described. In dogs, the most common indications for tube placement were obstructive neoplasia (10 cases), neurologic dysfunction (9), and urinary tract rupture (8). In cats, the most common indications were urinary tract rupture (14), obstructive urolithiasis or lower urinary tract disease (12), and neurologic dysfunction (12). Mushroom-tipped (37) and Foley (35) catheters were used most frequently. The median time for tube duration was 11 days (range: 1 to 1,484 days). Forty-nine percent of animals had tube-related complications, which were significantly more likely to develop with long-term (>14 days) use. The most common (12 patients) major complication was inadvertent tube displacement. The most common (7 cases in both dogs and cats) minor complications were inflammation around the tube exit site and peritubal urine leakage. In 42 animals, the underlying condition resolved, and the tube was removed; 22 animals died or were euthanized with the tube in place. The authors concluded that cystostomy tubes are useful in treating animals with outflow problems and that commonly encountered complications could easily be resolved.

**COMMENTARY:** Urinary outflow problems related to neoplasia, calculi, or neurologic or traumatic lesions are frequently encountered in small animal patients and are associated with significant morbidity and mortality rates. This academic review of animals treated with indwelling tube cystostomy offers relevant data for clinicians needing a lifesaving measure for short- or long-term use. It is worthwhile to note that the longest duration of tube placement was in patients with neoplastic obstruction or neurologic dysfunction and that urinary tract bacterial (*Escherichia coli*) infection was common. Interestingly, the authors also described a resolved underlying condition or easy tube replacement in cases in which the cystostomy tube was inadvertently removed. Readers should be aware that long-term follow-up information, in this study, was obtained by a client questionnaire; therefore, these data may be somewhat subjective.

**Effect of Two Cyclosporine Dose Rates on Severity of Perianal Fistulae and Related Clinical Signs in Dogs**


The high cost of cyclosporine, which is used to treat perianal fistulae (PAF), has spurred attempts to determine the smallest effective dose, such as in this blinded, randomized prospective trial. Two groups of dogs with PAF (10 in each; mostly German shepherds) were randomly assigned to receive oral cyclosporine at 2 or 5 mg/kg q24h for
8 weeks. Every 2 weeks, the dogs were evaluated based on clinical signs (owners’ reports of licking and chewing perianal lesions; discharge and bleeding from perianal regions; straining to defecate), assessment of lesion photographs, and grading of lesion severity. Side effects and trough blood cyclosporine levels were analyzed.

Licking and chewing perianal lesions and straining to defecate were the most persistent signs. Each group showed significantly reduced lesion surface area and lesion severity; the 5 mg/kg dose produced faster resolution. A low percentage of dogs (10% and 60% for low and high doses, respectively) had complete resolution of PAF.

Key Finding:
• The recommended dose is 5 mg/kg q24h for 8 weeks, but neither dose was as effective as higher doses used in other studies. Trough blood cyclosporine levels of approximately 122 ng/ml are thought to improve clinical signs and lesion extent and severity, sometimes with complete resolution of PAF.