Nasal Carcinoma in Dogs


ABSTRACT: In this retrospective case series from several veterinary schools and private referral centers, the medical records of 139 dogs that were not treated for nasal carcinoma and lived more than 7 days after the diagnosis were reviewed. The objective of the study was to evaluate factors associated with survival. Dogs were included in this review based on histologic confirmation of nasal carcinoma and not undergoing surgery, chemotherapy, radiation, or immunotherapy. Some of the dogs did receive corticosteroids or NSAIDs and antimicrobials.

The median age of the dogs was 11 years, and the median body weight was 48.4 lb (22 kg). Nearly 80% of the cases involved purebred dogs, and golden retrievers were most frequently represented. Epistaxis was the most common (77%) clinical sign and the only risk factor associated with survival; dying was 2.3 times more likely in affected patients (median survival: 88 versus 224 days for dogs without epistaxis). In 49 cases in which computed tomography was available for review, the nasal carcinoma was unilateral in 29 dogs. In available medical records, 47% of the dogs had clinical improvement, while 53% did not. The median survival time for all dogs was 95 days, and the estimated 1-year survival probability was 12%. The authors concluded that the prognosis was poor for dogs with nasal carcinoma receiving only palliative treatments.

COMMENTARY: Primary nasal tumors account for 1% of all neoplasms in dogs, and most (75%) are malignant. Radiation therapy alone or with cytoreductive surgery is considered the most effective treatment, and median survival times of 7 to 48 months have been described. The results of this study are useful for practitioners who are treating patients with only palliative medications and for which advanced treatments are declined. The clinical sign of epistaxis appears to be critical in the clinical outcome. Animals without nasal bleeding survived for approximately 7 months, which is close to the lower survival time described for radiation therapy. Interestingly, nearly half of all patients had clinical improvement with palliative medications, although the authors reference a study in which radiotherapy provided clinical improvement in 95% of the cases.

Prevalence of Cranial Cruciate Ligament Rupture in Dogs with Lameness Attributed to Hip Dysplasia


The prevalence of cranial cruciate ligament rupture (CCLR) in 369 dogs diagnosed with canine hip dysplasia (CHD) as the cause of lameness was determined in this retrospective study of data, including age; breed; gender; complaint; physical examination, radiographic, and surgical findings; and treatment. Dogs were placed into one of two groups:
• Those with or without clinical or radiographic signs of CHD and with lameness due to CCLR
• Those without indications of stifle ligament injury but with clinical signs of CHD

Commonly represented breeds were the Labrador retriever, the German shepherd, and the golden retriever, along with mixed breeds. Groups 1 and 2 differed significantly in terms of age (mean: 3.8 years) but not gender. The prevalence of CCLR as a cause of lameness was 32%. Bilateral CCLR distribution (43%) was higher than earlier reported. Of 119 dogs with CCLR, 94% had radiographic signs of CHD, 92% had stifle joint infusion, and 81% had a cranial drawer sign. Group 2 dogs had conservative (65%) or surgical (34%) management.

**Key Findings:**
• The results supported the suggestion that lameness was actually caused by CCLR, not CHD.
• Careful palpation plus radiography is invaluable for differentiating these conditions.
• Greater awareness of CCLR should lead to earlier, more accurate diagnosis of lameness in young large-breed dogs.

**SURGICAL REMOVAL OF NONVISCERAL SOFT TISSUE SARCOMAS IN CATS**


The medical records of 42 cats with surgically removed soft tissue sarcomas (i.e., fibrosarcoma, nerve sheath tumor, malignant fibrous histiocytoma, leiomyosarcoma, liposarcoma, lymphangiosarcoma, myxosarcoma, undifferentiated) were reviewed for age; breed; gender; vaccination history; tumor location, size, and recurrence; surgeon; surgical margins; and histology. The cats had no adjuvant treatment.

Most cats (39) were domestic shorthaired; 22 were castrated males; 18 of 20 females were spayed; and the median age was 10 years. All cats had clinically detectable masses at presentation (17 nerve sheath tumors, 12 fibrosarcomas, six malignant fibrous histiocytomas, three leiomyosarcomas, one each of other masses), but other clinical findings were unremarkable. The median survival time (all cats) was 608 days, with 24 cats alive at the time of the study. Tumors recurred in 26 cats. Survival time was significantly associated with tumor type and size: Survival was longer for cats with fibrosarcoma or nerve sheath tumor versus malignant fibrous histiocytoma and tumor diameters less than 2 cm versus greater than 2 cm. Longer survival time for cats with leiomyosarcomas (not included in the analysis because of small numbers) suggests a good prognosis for cats with these tumors.

**Key Findings:**
• Tumor size and type, but not location, were significantly associated with survival time.
• Further study should clarify whether completeness of excision and vaccination are related to survival time.