Oral presentations

were assessed. Side effects were graded using the VCOG criteria.

RESULTS

There were 11 neutropenic events in Group 1 vs. 10 in Group 2 (one dog experienced two neutropenic episodes). All events were VCOG grade 1 or 2. There was one thrombocytopenic event, concurrent with neutropenia,

in Group 2. The majority of neutropenic events occurred at week 2 in both groups. These caused some treatment delays, dose reduction.

STATEMENT

Results of this study are suggestive that RT together with VBL-P chemotherapy is safe and does not increase the risk of bone marrow toxicity.

The use of complementary and alternative therapies in dogs and cats with cancer in the UK

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OBJECTIVES

To determine the usage of complementary and alternative therapies in dogs and cats with cancer at a UK oncology hospital. To identify whether a need exists for veterinary professionals to be more aware of these therapies.

METHODS

Clients presenting for oncology consultations with their dog or cat were asked to complete a questionnaire. The data are presented as counts and percentages and chi-square was used to evaluate significant data.

RESULTS

Study population: 140

Complementary and alternative therapy usage: 38.6%

Most popular therapies used: nutritional supplements (25%), probiotics 20%

Reasons for usage: improve general wellbeing (38%), improve immune function (16%), cure cancer (4%)

Sources of information used to instigate a therapy: Internet (34%), Veterinary Surgeon (30%)

Vet aware of usage: Yes (27%), No (16%), Don't know (7%)

Owner's belief on whether the vet would be supportive of usage: Yes (27%), No (4%), Don't know (69%)

Participants level of interest in these therapies: Strong (37%), Average (56%), No (7%)

Participants using these therapies were predominantly women with an average/strong level of interest

Participants using these therapies themselves were more likely to be using these therapies in their pet

STATEMENT

Veterinary professionals need to be aware that complementary and alternative therapies may be being used in approximately one third of pets with cancer. Regardless of personal opinions, clinicians must understand the actions and possible interactions of these treatments. To prevent concealment of treatment by the owner from the vet, an open and honest approach is recommended.

Prognostic utility of the modified Glasgow prognostic score in dogs with lymphoma undergoing treatment with chemotherapy

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OBJECTIVES

To determine if the modified Glasgow prognostic score (mGPS) provides prognostic information for dogs undergoing treatment for canine lymphoma.

METHODS

Overall median survival times (MSTs) were calculated for 15 dogs with lymphoma treated with a variety of induction and rescue protocols between January 2011 and December 2012. The mGPS was calculated for each dog at presentation as follows: Score 0 CRP<20mg/l and albumin>25g/l, Score 1 CRP>20mg/l

and albumin>25g/l or score 2 CRP>20mg/l and albumin<25g/l.

RESULTS

Median age at presentation was 7 years, with 8 males and 7 females. No breed predisposition was highlighted. 9/15 were multi-centric and 4/15 intestinal/mesenteric lymphoma. WHO stage III, IV and IV were reported in 8/15, 5/15 and 2/15 dogs respectively. 6 dogs were sub-stage a and 9 sub-stage b. B-cell and T-cell lymphomas were identified in 2/5 and 3/5 dogs respectively. GPS of 0, 1 and 2 were documented in 3/15, 8/15 and 4/15 dogs. MST for dogs with a mGPS of 0 was 277 days (range 210–1672),

mGPS of 1, 164 days (range 76–1491) and mGPS of 2, 7 days (1–64 days). Kaplan-Meier analysis revealed dogs with mGPS of 2 had significantly shorter MSTs than dogs with mGPS 0 or 1. Dogs with an mGPS of 0 had significantly longer MST than dogs with GPS of 1 or 2.

STATEMENT

These results suggest the canine mGPS may provide prognostic information for dogs with lymphoma undergoing treatment with chemotherapy. Further work based on larger and defined populations is needed to assess its utility to guide treatment decisions.

Eosinophilic cellulitis ('Well's syndrome') associated with lymphoma in a dog

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OBJECTIVES

Well's syndrome is a rare inflammatory skin disease characterized by maculopapular eruptions with marked eosinophilic inflammation within the dermis. In humans, a variety of triggering factors have been documented such as insect bites, drugs, vaccination, intestinal parasitism and multiple malignancies. A similar dermatitis has been reported in dogs, suspected to be secondary to gastrointestinal disease or to be a drug reaction. To the authors' knowledge, this is the first description of eosinophilic dermatitis associated with lymphoma in a dog.

METHODS

A 8-year old female spayed Boxer was presented for further investigations of multiple, generalized non-pruritic erythematous lesions. Physical examination revealed right scapular lymphadenomegaly. The patient was receiving chemotherapy for a multi-centric high-grade lymphoma that had been diagnosed 9 months earlier.

RESULTS

No response was seen to symptomatic treatment with corticosteroids, so skin biopsies were obtained. Histopathology revealed deep eosinophilic dermatitis. Lymph node cytology confirmed a relapse of the lymphoma. Rescue chemotherapy was commenced, which generated complete resolution of the lymphadenomegaly and of the skin lesions.

STATEMENT

The diagnosis of this syndrome should prompt extensive investigations to rule out concomitant diseases, such as multi-centric lymphoma and it is important to consider the possible association between this dermatitis and lymphoma. In human medicine, eosinophilic dermatitis can be the first clinical complaint of an underlying pathology, and equally, the onset of typical skin lesions in a dog previously diagnosed with lymphoma should raise suspicions for a possible clinical relapse.

The occurrence of proteinuria in dogs treated with masitinib

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OBJECTIVES

Evaluate the frequency and onset of proteinuria in masitinib treated dogs.

METHODS

Clinical records of masitinib treated dogs between June 2010 and July 2016 were reviewed. The incidence of proteinuria (urine protein:creatinine ratio (UP:C) >0.5) was recorded before and for 3 months following treatment commencement.

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