Oral presentations

RESULTS

Twenty-eight cases were identified, 8 without pre-treatment UP:C or follow-up results were excluded.

Of 20 included cases, 3 (15%) were proteinuric (UP:C 0.66, 1.36, 4.4) before treatment. After 4 weeks of masitinib treatment, proteinuria had resolved in one and in the 2 others, UP:C remained stable.

Eleven of the remaining 17 dogs had UP:C performed 1-2 weeks post-treatment. Three had developed proteinuria (UP:C 0.54, 1.27, 8.2). After 3-4 weeks, 13 previously non-proteinuric dogs remained on masitinib treatment and 1/9 that had UP:C checked was proteinuric (UP:C 4.56). After 5-8 weeks, 10 previously non-proteinuric cases remained on masitinib treatment and 0/7 that had UP:C performed were proteinuric. After 9-12 weeks,

7 previously non-proteinuric dogs remained on masitinib and 0/5 that had UP:C performed were proteinuric.

Overall, 4/17 (24%) cases developed proteinuria within 3 months of starting masitinib. In two, proteinuria resolved despite continuing masitinib. In the other two masitinib was discontinued, proteinuria improved in 1 dog and progressed in the other. The latter case developed hypoalbuminaemia and ascites which resolved with appropriate treatment.

STATEMENT

In all dogs that developed proteinuria on masitinib, it occurred within 4 weeks and varied in severity. The only dog with severe proteinuria and adverse effects recovered suggesting reversibility with prompt, appropriate action.

Investigation of prognostic factors in canine chronic lymphocytic leukaemia

**Louise Pickett, Maciej Guzera,
Magalie Aquino Cleto, Lluvia Moreno Perez,
Joy Archer, Tim Williams**

University of Cambridge, Cambridge, UK

OBJECTIVES

To assess prognostic indicators for canine chronic lymphocytic leukaemia (CLL), including immunophenotype and treatment protocol used.

METHODS

Dogs diagnosed with suspected CLL by flow cytometry between 2009 and 2013 were identified retrospectively. Univariable Cox regression analysis was performed to assess the association between haematological parameters and survival time. The log rank test was used to

assess the association between treatment protocol or immunophenotype (T, B or atypical) and survival time. Data are presented as median [25th, 75th percentiles].

RESULTS

Dogs with B-CLL, T-CLL and atypical CLL lived 243 [44, 447] days (n=10), 113 [44, 500] days (n=20) and 300 [20, 318] days (n=8) respectively. However, there was no significant relationship between immunophenotype of CLL and survival time (P>0.05). Baseline lymphocyte count (P=0.634), red blood cell count (P=0.302) and platelet count (P=0.439) were not associated with survival time, although increasing neutrophil count at diagnosis tended towards a significant association with survival time (HR 1.076, 95% CI 0.988-1.172; P=0.091).

Dogs treated with prednisolone and chlorambucil had longer survival times compared with dogs receiving no treatment (300 [89, 549] days, n=14 vs. 25 [18, 36] days, n=6; P=0.027), however survival did not differ between dogs treated with prednisolone alone (318 [44, 386] days, n=6) or prednisolone and chlorambucil in combination (P=0.648).

STATEMENT

The severity of lymphocytosis or presence of cytopaenias at the time of diagnosis were not found to be significantly associated with a poorer prognosis. Furthermore, in contrast to previous studies, an association between immunophenotype and survival time in canine CLL was not demonstrated.

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