Oral presentations

post-operatively. Long term survival showed that surgically managed cases and medically managed cases had a median survival time of 730 days (range 1–3802 days) and 137 days (range 1–1216 days) respectively. Two-tailed Fisher's Exact Test demonstrated no statistical significance in short or long-term survival ($P>0.05$) between medically and surgically managed groups.

STATEMENT (CONCLUSIONS)

Feline intracranial empyema is a rare condition that has historically been treated with combined surgical and medical management. This study documents that intracranial empyema can also be successfully treated with medical management alone.

Aetiological diagnosis of feline epilepsy from signalment and clinical history

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OBJECTIVES

To determine the influence of clinical factors on the likelihood of aetiological classification in cats with seizures.

METHODS

Four referral institutional databases were searched, data extracted for each case included; patient signalment, pre-existing disease, concurrent anti-epileptic drugs and therapeutic monitoring, seizure history, results from; neurological examinations, bloodwork, CSF collection, PME and MRI. Clinical factors were first assessed

at a univariate level, via logistic regression, to the three outcome categories based on MRI result; epilepsy of unknown origin (EUC), structural symmetrical lesions (SSL) and asymmetrical structural lesions (ASL). Any statistically significant variables were then assessed via multivariable logistic regression models with Odds Ratios (and 95% confidence intervals) generated.

RESULTS

67/91 cats were diagnosed with EUC, 11/91 with an ASL and 13/91 with an SSL; 11 of which were diagnosed with hippocampal necrosis (HN). The odds of HN was 12 (OR 95% CI: 1.2–122.0) times more likely with cluster seizures, 22 (2.47–199.7) times more likely with facial twitching and 25 (5.2–117.2) times more likely with an asymmetrical seizure pattern. Cats experiencing single seizures rather than cluster seizures were 32 (2.81–364.78) times more likely to have an ASL than a SSL and 42 (5–333.3) times more likely to have EUC over a SSL.

STATEMENT (CONCLUSIONS)

Results from this study suggests a very specific presentation of hippocampal necrosis. Thus, prompting the importance of performing a neurological exam, as well as establishing a detailed seizure history for each patient when giving informed guidance to owners and formulating further diagnostic and treatment plans.

Elective, multiple deep digital flexor tenotomy in a Labrador Retriever to treat contracture secondary to ischaemic myelopathy

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OBJECTIVES

The aim of this case is to present a treatment for a complication of ischaemic myelopathy.

METHODS

A six-year-old, female, entire Labrador Retriever presented with collapse and right-sided Horner's syndrome. Neurological examination localised the lesion to the right C5–T3 segments of the spinal cord. MR-scans revealed a diffuse area of malacia within the right side of the spinal cord and a degenerate C6–7 intervertebral disc with no evidence of a compressive lesion. CSF, haematology, biochemistry, clotting times, serology for toxoplasma/neospora and thyroid function testing were normal; consistent with a diagnosis of ischaemic myelopathy secondary to fibrocartilagenous embolism.

RESULTS

The following 6 months, the patient made a good recovery, but after 3 months remained paretic on the right thoracic limb and knuckled over at the carpus. Attempts were made to support the carpus, but she was still unable to use the limb without traumatising

the digits. Gait examination and carpal extension revealed a good range of motion and weight-bearing. However, contracture of the digital flexor tendons resulted in knuckling over of the digits of the right manus during walking. Elective tenotomy of the deep digital flexors II–V were performed via a lateral approach. The dog made an uneventful recovery. 2 weeks after surgery repeat gait analysis revealed improvement. Since then, the patient has continued to

make steady progress and has begun to use the limb normally once again.

STATEMENT (CONCLUSIONS)

Approximately 20% of patients suffering ischaemic myelopathy will be left with significant deficits. In the case presented, tenotomy of the digital tendons greatly improved limb function.

Outcome of spinal stabilisation in Pugs with caudal articular process dysplasia

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OBJECTIVES

Chronic progressive thoracolumbar myelopathies are often caused by caudal articular process malformation in Pugs, causing neurologic dysfunction of the pelvic limbs. This disease may be associated with intervertebral disc protrusion or arachnoid webs/diverticulum at the same level. Urinary or faecal incontinence may also be present. Previous studies have shown the persistence or the deterioration of the neurological status, despite laminectomy with or without stabilisation. We hypothesised that chronic instability of the vertebral column causes the neurological decline in these dogs and that spinal stabilisation may halt or ameliorate the clinical signs.

METHODS

Clinical records between 2013 and 2017 were retrospectively reviewed for Pugs diagnosed with caudal articular process dysplasia and showing thoracolumbar myelopathy. Diagnosis was confirmed via computed tomography and magnetic resonance imaging. Fifteen dogs met the criteria for inclusion in this study.

RESULTS

Median age of presentation was 8.5 years. Median follow-up was 4 months. All dogs showed paraparesis and pelvic limb ataxia. Urinary or faecal incontinence was present in 7/15 (47%) of dogs. Caudal articular process dysplasia was localised between T8–L2 vertebrae. Thirteen cases showed the presence of arachnoid webs or diverticulum. Two of those cases had previous laminectomy, durotomy and marsupialisation, but they continued to deteriorate. Fourteen dogs had vertebral stabilisation [laminectomy, marsupialisation and stabilisation (7), stabilisation (4), laminectomy, corpectomy and stabilisation (3)] and improved neurologically. One dog that had laminectomy and corpectomy continued to deteriorate.

STATEMENT

Conclusions – This study indicates the importance of diagnosing caudal articular process dysplasia and supports the use of spinal stabilisation in surgical planning.

How common is common? Estimated prevalence of recurrent seizures disorders in cats under primary veterinary care in the UK

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OBJECTIVES

Recurrent seizure disorders [RSDs] are cited as the most common chronic neurological presentation in cats but little is truly known about prevalence. This study reports prevalence, signalment and risk factors for RSDs in cats in the UK.

METHODS

The VetCompass database of primary-care veterinary clinical data was interrogated to identify RSD cases