to the displaced duodenum but no underlying cause of the intussusception was identified. The coagulopathy was presumed to be consumptive and surgery was performed following plasma transfusion. Gastric wall and lymph node biopsies were taken, also revealing no underlying cause for the intussusception. The patient recovered uneventfully.

STATEMENT (CONCLUSIONS)

Although rare, pylorogastric intussusception should be considered as a differential diagnosis in patients with haematemesis and coagulopathy, and CT examination may aid accurate diagnosis. This is the first report presenting CT findings of this condition.

Sjögren's Syndrome in a dog: diagnosis and treatment

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OBJECTIVES

Sjögren's Syndrome is a progressive systemic autoimmune disease characterized by hyposecretion of the lacrimal and salivary glands and other exocrine glands. The primary aetiology in dogs following the human international consensus guidelines is not yet reported. The aim of our case report is to describe the clinical presentation, diagnostic work up and treatment of a dog with Sjögren's Syndrome-like signs.

METHODS

A 5-year-old intact male, Poodle cross dog presented with two weeks history of xerophthalmia, xerostomia, nasal hyperkeratosis, adipsia and anorexia. Neurological

examination was unremarkable and Schirmer tear Test revealed 0 mm/min of tear production on both eyes with bilateral corneal ulceration, mucous membranes were tacky and there were no nasal secretions.

RESULTS

MRI, CSF, urine protein creatinine ratio, rheumatoid factor, thyroglobulin antibodies and protein electrophoresis were unremarkable. Thoracic radiographs revealed a mild interstitial pattern. In total 3 drops of 1% Pilocarpine on the oral mucous membranes instigated tear and saliva production after 40 minutes. Primary Sjögren's Syndrome was one of the differential diagnoses, as well as neurogenic causes of dry mouth and eyes, in particular, dysautonomia. Biopsy of the left mandibular salivary gland revealed presence of mild lymphoplasmacytic infiltration of the salivary gland. Oral 1% Pilocarpine, topical and oral Cyclosporine and supportive treatment successfully reversed clinical signs.

STATEMENT (CONCLUSIONS)

Sjögren's Syndrome should be considered as a differential diagnosis for patients with keratoconjunctivitis sicca and difficulties to eat or anorexia. Raising awareness for Sjögren's Syndrome will hopefully lead to further investigation into the disease and development of a treatment plan for affected animals.