Effect of feline temperament on systolic blood pressure in mature cats

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OBJECTIVES

To determine the association between cats' temperament and their systolic blood pressure.

METHODS

Client owned cats aged 7y–9y11m were invited to attend The Royal Canin Feline Healthy Ageing Clinic at the University of Liverpool veterinary practice as part of the

Cat Prospective Ageing and Welfare Study (Cat PAWS). A temperament test was performed and recorded on each cat by the same investigator shortly after they arrived at the clinic based on the cats response to the tester with an additional measurement of frustration¹. Systolic Blood Pressure was measured shortly after arrival at the clinic using a Doppler method from the radial artery. Leg and cuff size were recorded and, where possible, 5 recordings were taken and the mean result recorded.

RESULTS

Thirty-nine cats had both a temperament test and their systolic blood pressure measure from their radial artery. Systolic blood pressure was highly variable amongst individual cats, and did not differ amongst cats with different temperament scores (ANOVA $P=0.846$).

STATEMENT (CONCLUSIONS)

The preliminary results of this study indicate that the temperament test used might not be useful in determining the effect of temperament on systolic blood pressure, which might be related to the wide variability in systolic blood pressure measurements amongst study cats.

REFERENCE

1. Siegfurd JM, Walshaw SO, Brunner P, Zonella AJ. Validation of a temperament test for domestic cats. *Anthrozoos*. 2003;16(4):332–351.

Peri-operative regurgitation in cats and dogs: a retrospective cross-sectional analysis of 551 anaesthesia records in a multidisciplinary referral clinic over a 19-month period

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OBJECTIVES

To compare prevalence of, and risk factors for, peri-operative regurgitation in cats and dogs.

METHODS

This study used a retrospective cross-sectional study design to examine the clinical records of all dogs ($n=458$) and cats ($n=93$) that were anaesthetised at a multi-disciplinary referral centre in the UK between October 2015 and March 2017. Potential risk factors reported here included: anaesthetist (RVN/vet); age, weight, period of pre-operative starvation, duration of anaesthesia, and number of positional changes during anaesthesia. Preliminary univariate analytic and descriptive statistics were performed using SPSS (Version 23) using non-parametric analyses and untransformed data.

RESULTS

The overall prevalence of regurgitation was 0% in cats and 8% in dogs. In dogs, only 1.9% regurgitated ($n=2$) when repositioned 1–2 times, but the odds of peri-operative regurgitation significantly increased as repositioning frequency increased. The odds ratio for dogs repositioned 3–4 times was 4.6 (95% confidence interval: 1.038–20.433, $P=0.028$, 8.2% of dogs, $n=16$) and 21.1 (4.24–104.33, $P<0.001$, 29% of dogs, $n=9$) for dogs repositioned 5–6 times during anaesthesia. No other outcome measures

Poster presentations

were significantly associated with a change in peri-operative regurgitation risk.

STATEMENT (CONCLUSIONS)

Multiple patient repositioning during anaesthesia is a significant risk factor for peri-operative regurgitation,

therefore unnecessary repositioning should be avoided. Prophylactic measures to manage the consequences of regurgitation are particularly important for canine patients expected to undergo multiple repositioning during anaesthesia, and should be considered at the pre-operative stage.

Clinical and endoscopic findings and outcomes in two cats treated conservatively for feline gastrointestinal eosinophilic sclerosing fibroplasia

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OBJECTIVES

To describe clinical, imaging findings and outcome in two cats diagnosed with feline gastrointestinal eosinophilic sclerosing fibroplasia (FGESF) and conservatively treated.

METHODS

Review of medical records of two cats diagnosed with FGESF.

RESULTS

Cat 1 was a 5-year-old female spayed Maine Coon with chronic diarrhoea and vomiting; cat 2 was a 7-year-old female spayed DSH with chronic haematochezia and constipation.

Ultrasonographically, mural thickening with layering loss was identified in the stomach in cat 1 and in the descending colon in cat 2.

Endoscopically, a sessile polypoid-like ulcerated lesion was disclosed close to the duodenal papilla in cat 1 and in the distal descending colon in cat 2.

Histopathology was consistent with FGESF in both cats. Intra-lesional bacteria and concurrent IBD were observed in cat 1.

Both cats were treated with immunosuppressive therapy and antimicrobial agents.

At the time of writing both cats are still alive and subsequent abdominal ultrasound showed regression of the disease.

Mean follow-up was 18 months.

STATEMENT (CONCLUSIONS)

FGESF is an inflammatory gastrointestinal disease characterized by the presence of single to multiple eosinophilic masses along the gastrointestinal tract and the tributary lymph-nodes. The majority of cases reported have been treated surgically.

To the best author's knowledge, these are the first two cases of FGESF treated conservatively with regression of both clinical and ultrasonographic changes. It is likely that the small dimension of the lesions allowed a non-invasive diagnostic approach by endoscopic examination and resulted in a good response to medical treatment.

Survival time of extradural primary hemangiosarcoma in a dog

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OBJECTIVES

Primary extradural hemangiosarcoma is a rare condition in dogs. The aim of our report is to describe presentation, treatment, survival time and quality of life after treatment.

METHODS

An 8-year-old, neutered male, Staffordshire Bull Terrier presented with a 5 day acute onset of paraplegia and spinal hyperesthesia after jumping. Neurological examination revealed absence of postural reactions and normal to increased patellar reflexes. Neurological findings were