Oral presentations

Outcome of dogs with histologically low/immunohistochemistry high grade mast cell tumour treated with adjuvant chemotherapy

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OBJECTIVES

This retrospective study evaluates the outcome of dogs with histologically low/immunohistochemistry high grade mast cell tumour (MCT) treated with adjuvant lomustine and reports treatment toxicity.

METHODS

The records of dogs treated with adjuvant chemotherapy for intermediate grade mast cell tumour with low mitotic

index ($\leq 5/10\text{HPF}$) and high Ki67 ($> \text{or} = 1.8\%$) with no evidence of metastatic disease at presentation were reviewed. Lomustine was administered every 3 weeks with 3 or 4 planned cycles. Patients were followed up by regular re-staging ultrasound with or without cytopathological examination of liver and spleen or through medical records from the referring veterinarian. Disease free interval (DFI) and median survival time (MST) were calculated using Kaplan-Meier method.

RESULTS

Twenty-five dogs were included. All dogs underwent surgical excision and four dogs received adjuvant radiotherapy. None of the patients developed local recurrence. Three dogs (12%) developed metastatic disease. The DFI of these dogs was 141, 186 and 223 days. DFI of the whole study population was 1063 days (141–2619). MST for patients with metastatic disease was 417 days. MST of the whole group was not reached. One-year, 2-year and 3-year survivals was 96%, 92% and 85%, respectively. The main adverse event was hepatotoxicity which occurred in 28% of patients.

STATEMENT (CONCLUSIONS)

This study population showed low rates of tumour recurrence and improved survival compared to previously published data of dogs with immunohistochemically high grade MCT without adjuvant chemotherapy. Prospective studies should be considered to evaluate this further.

Canine anal sac adenocarcinoma in a single referral centre – signalment, treatment and outcomes

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OBJECTIVES

Canine anal sac adenocarcinoma (ASAC) is a neoplasm with a diverse clinical behaviour and no gold standard of care apart from surgical excision of disease. This study aimed to report the signalment, treatment and outcomes of dogs with ASAC treated at a single referral centre.

METHODS

This was a retrospective study that included dogs diagnosed with ASAC that presented for diagnostics or

treatment. 41 dogs were identified following review of clinical records, between 2015 and 2018. Signalment, stage, treatment and outcomes were recorded.

RESULTS

Labradors and cocker spaniels were the most commonly represented breeds. 27 dogs were male neutered and 13 dogs were female neutered. 28 dogs (68%) had metastasis to the loco-regional lymph nodes, of which 7 dogs (17%) also had distant metastases. 14 dogs were hypercalcaemic (34%). 5 dogs (13%) presented with bilateral tumours. Median survival time was 265 days (range: 76–670 days). Dogs treated only with surgery had the highest median survival time (433 days), and multiple surgeries were associated with longer survival. 16 dogs were treated with toceranib phosphate. Overall clinical benefit was seen in 10 dogs (63%). The median duration of response was 91 days (range 30–382 days).

STATEMENT (CONCLUSIONS)

This study suggests that surgery is the most effective treatment for ASAC. Overall clinical benefit was seen using toceranib phosphate in >60% of dogs treated for a median duration of 3 months.