Oral presentations

The use of contrast-enhanced computed tomography for the diagnosis of hiatal hernia in brachycephalic dogs suffering from the Brachycephalic Obstructive Airway Syndrome (BOAS)

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OBJECTIVES

To assess the prevalence of hiatal hernia (HH) in BOAS dogs and review the utility of the contrast-enhanced CT in the process of diagnosing HH in those patients.

METHODS

A retrospective study was performed on the CT images obtained from 88 patients, 42 of them were contrast enhanced. All images were reviewed by 3 imagers and the presence of HH was assessed. The prevalence of HH was calculated within both the plain and the contrast-enhanced groups.

21 randomly chosen contrast-enhanced studies were initially viewed without the contrast in order to diagnose HH. Subsequently, they were re-assessed with contrast enhancement.

RESULTS

In the plain group HH was diagnosed in 28% of the cases, whereas among the contrast-enhanced studies HH was found in 50% of them. The assessment of the 21 studies showed that in 50% of the cases the presence of contrast changed the final diagnosis. Additionally, all the imagers equivocally stated that introduction of the contrast significantly increased the level of the decision confidence in borderline cases.

STATEMENT (CONCLUSIONS)

The study revealed a high prevalence of HH in BOAS-affected dogs. It also showed an increase in the detectability of HH, when the contrast CT is performed. Contrast-enhanced images allow more precise recognition of the tomographic features of HH and differentiation from other soft-tissue malformations such as esophageal diverticulum. To the author's knowledge, this is the first study in the veterinary literature that describes the tomographic features of HH.

Computed tomographic and surgical findings of retained surgical sponges in two dogs

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OBJECTIVES

The aim of this case report is to assess the relationship between the computed tomographic and the exploratory laparotomy findings in two dogs with retained surgical sponges.

METHODS

Two dogs were referred with a history of depression and chronic vomiting following previous ovariohysterectomy. Clinical examination revealed a palpable abdominal mass in both dogs. In the first dog computed tomography (CT) scan of the abdomen revealed a 36 x 44 mm well demarcated intramural small intestinal mass with air attenuating center surrounding by a soft tissue attenuating ring. In the second dog CT demonstrated a 32 x 31 mm well demarcated soft tissue attenuating peritoneal mass with no intestinal loops displacement. Enhanced CT examination demonstrated peripheral ring enhancement of the mass in both cases finding compatible with the presence of abscess or granuloma.

RESULTS

Surgical exploration was performed in both dogs. In the first dog, a retained surgical sponge was detected within the intestinal lumen and intestinal resection and anastomosis were followed. One day after surgery the dog had showed signs of intestinal dehiscence and

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