on the vulva both consistent cytologically with pyogranulomatous inflammation that did not improve with anti-inflammatory doses of steroids.

Immunosuppressive doses of prednisone were initiated in conjunction with oral cyclosporine and a complete resolution of clinical signs was observed following 14 days of treatment.

RESULTS

Failure to demonstrate a causative agent, the histiocytic nature of the inflammatory infiltrate and the excellent

response to immunosuppressive drugs supported an immune-mediated aetiology.

STATEMENT (CONCLUSIONS)

This disease should be considered as a differential diagnosis in young dogs with thickening of the nictitating membranes and generalized lymphadenopathy. Response to treatment is excellent.

Comparison of short-term treatment of dogs with non-regenerative immune-mediated anaemia, treated with prednisolone alone or in combination with azathioprine or ciclosporin

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OBJECTIVES

To assess whether the addition of azathioprine or ciclosporin at the onset of treatment improves short-term

response rates and times in dogs with non-regenerative immune-mediated anaemia compared to the use of prednisolone alone.

METHODS

A multi-centre (n = 6) retrospective study. A database search identified dogs undergoing bone marrow aspiration and core biopsy between June 2007 and March 2018. Dogs diagnosed with primary non-regenerative immune-mediated anaemia treated with prednisolone alone or in combination with azathioprine or ciclosporin, started within seven days of diagnosis were included. Treatment response was assessed using the following variables; number of dogs achieving a 5% improvement in haematocrit, time to 5% improvement in haematocrit, number of dogs achieving remission (haematocrit >0.37L/L) and time to remission.

RESULTS

Sixty-eight dogs were included; 26 received prednisolone alone, 22 prednisolone and azathioprine, 20 prednisolone and ciclosporin. There was no significant difference in signalment, haematocrit on presentation or bone marrow findings between treatment groups. Overall treatment response rate was 68% (62%, 64% and 80% respectively) and overall remission rate was 53% (54%, 50% and 55% respectively). Median time to 5% increase in haematocrit was 23 days (range 0–375); 20, 25 and 25 days respectively. Median time to remission was 57 days (range 0–432); 52, 96 and 55 days respectively. There was no significant difference in response time, response rate, remission time or remission rate between treatment groups.

STATEMENT (CONCLUSIONS)

The addition of azathioprine or ciclosporin at the onset of treatment did not significantly improve short-term outcome in this population of dogs with non-regenerative immune-mediated anaemia.