Oral presentations

Owners and veterinary practitioners' viewpoint of the future direction of research in canine epilepsy

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OBJECTIVES

Epilepsy is the most common neurological disease in dogs with a reported prevalence of about 0.6–0.7%. It is a disorder that has a greater impact than seizure activity alone, affecting areas such as behaviour, lifespan and quality of life of both dog and owner. The objective was to investigate how owners of dogs with epilepsy, and veterinary practitioners, rank future research priorities for canine epilepsy through an online survey.

METHODS

Owners of dogs with epilepsy (n = 305), primary care vets (n = 84) and neurology specialists (n = 28) were asked to complete an online survey to rate 18 different broad areas of future research priorities related to canine epilepsy. Responses were analysed with a mixture of parametric and non-parametric statistical tests.

RESULTS

Seizure control through anti-epileptic drug (AED) therapy (both existing and new) was the most important future research priority. However, there was disagreement between the different stakeholders about the other priorities. Neurology specialists and primary care vets ranked priorities with a clinical element such as diagnosing epilepsy and seizure classification as more important. In comparison, owners ranked the effects of epilepsy on their dog's anxiety and physical capabilities as more important than both veterinary stakeholders.

STATEMENT (CONCLUSIONS)

These findings show that there are both similarities and differences between stakeholders' future research priorities. In particular, veterinary practitioners may need to widen their focus from seizure control and the goal of complete remission, to think more widely of what is also happening outside the consulting room regarding canine epilepsy.

Retrospective analysis of the diagnostic utility of cerebrospinal fluid preserved by the addition of 10% buffered formalin and EDTA

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OBJECTIVES

To examine the diagnostic utility of CSF samples collected into EDTA with and without the addition of 10% buffered formalin analysed 6h to 24h after collection.

METHODS

Retrospective study carried out at UK referral hospital. Inclusion criteria were dogs and cats presenting to the hospital between February 2018 and August 2019 with

neurological signs. CSF was submitted to an external laboratory as 2 EDTA samples; one with the addition of 1 drop of buffered formalin 10% and the other without formalin. CSF cytology, cell count and protein concentration were reviewed retrospectively by the author. Cell preservation was defined as diagnostic if enough intact cells were available to allow cytological evaluation or non-diagnostic if cell disruption precluded evaluation. Samples with no cells seen on smear were not classified. Clinical diagnosis was reviewed from clinical records.

RESULTS

133 samples from 127 dogs and 11 samples from 10 cats were included in the analysis. Final diagnosis was not reached in 25 dogs and 2 cats. Plain EDTA samples were diagnostic in 46% of dogs and 45% cats and non-diagnostic in 47% dogs and 36% cats. EDTA samples with formalin were diagnostic in 92% of canine samples and 81% feline samples and non-diagnostic in 1% dogs. In both groups, samples were not classified in 7% dogs and 19% cats. Samples had ≤ 5 nucleated cells/ μ l in 56% dogs and 64% cats.

STATEMENT (CONCLUSIONS)

1 drop of 10% buffered formalin added to EDTA provides an easy way to maintain cell viability when CSF analysis is delayed.

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