Poster presentations

represented with acute paraparesis and trembling, MRI and a second CT were performed.

RESULTS

The second CT illustrated progression of lumboaortic lymphadenomegaly which was consistent with further advancement of metastatic disease. MRI showed left sided spinal cord compression due to a contrast-enhancing extradural mass located at the level of T11–T12, T12 and T12–13. The dog was euthanised. Post-mortem

examination confirmed our suspicion of left sided ASAC and metastasis to the spinal cord and vertebral infiltration.

STATEMENT (CONCLUSIONS)

Metastatic spread of ASAC to the spinal cord is scarcely reported in the veterinary literature, and this is the first case report to illustrate the advanced imaging findings of this rare metastatic site. Increased awareness of this metastatic site may allow for earlier diagnosis and potential treatment in these cases.

Infiltrative canine haemangiosarcoma of the right ventricular free wall with pulmonary metastasis

**Nekesa Morey, Kelley Zimmerman,
Mikaela Mueller Mueller, Kevin Choy**

Seattle Veterinary Specialists, Kirkland, USA

OBJECTIVES

To report the first documented case of canine haemangiosarcoma infiltrating and extending through the right ventricular free wall.

METHODS

The dog had an acute history of hyperpnoea, inappetence and diarrhoea. Two-view thoracic radiographs were performed, which showed a marked patchy heterogeneous interstitial pattern within the pulmonary parenchyma. Some regions of the lung had well-defined nodular interstitial densities while other regions were

indistinct. Radiology review suggested the pulmonary pattern may reflect metastatic disease with regional pulmonary haemorrhage. Two-dimensional echocardiography was performed revealing an invasive, irregular, heterogeneous mass, extending from the right ventricular free wall. There was no observed association of the mass with the right atrium and right auricle in multiple echocardiographic views.

RESULTS

Hospice care was elected for the patient with Yunnan Baiyou (2 capsules, PO, q12). Two days following discharge, the patient was euthanized due to progression of clinical signs and poor prognosis. A post mortem examination was carried out. The mass was described to originate from the right ventricular free wall, extending into the lumen of the right ventricle. There was notable infiltration of the mass through the right ventricular musculature. Histopathological evaluation of both heart and lung section was most consistent with canine haemangiosarcoma, with multifocal pulmonary haemangioasarcoma metastases.

STATEMENT (CONCLUSIONS)

Although canine haemangiosarcoma commonly arises, either as a primary tumour or as metastasis, from the right auricle, this is a rare location for the tumour to occur. This case highlights the importance of multiple imaging modalities and diagnostic tools to appropriately diagnose a patient on an emergency basis.

A poorly differentiated ureteral sarcoma treated with surgical excision, nephrectomy and adjuvant doxorubicin-based chemotherapy: a case report

**Katarzyna Purzycka^{1,2}, Gabriel Manso-Diaz²,
Samantha J. Nightingale², Daniel J. Brockman²**

- 1 Anderson Moores Veterinary Specialists, Winchester, United Kingdom
- 2 Royal Veterinary College, London, United Kingdom

OBJECTIVES

A 4-year old, male neutered, Labrador presented for evaluation of a palpable, caudal abdominal mass and dysuria.

METHODS

Abdominal ultrasound and subsequent computed tomography (CT) revealed the presence of a caudal