and albumin>25g/l or score 2 CRP>20mg/l and albumin<25g/l.

RESULTS
Median age at presentation was 7 years, with 8 males and 7 females. No breed predisposition was highlighted. 9/15 were multi-centric and 4/15 intestinal/mesenteric lymphoma. WHO stage III, IV and IV were reported in 8/15, 5/15 and 2/15 dogs respectively. 6 dogs were sub-stage a and 9 sub-stage b. B-cell and T-cell lymphomas were identified in 2/5 and 3/5 dogs respectively. GPS of 0, 1 and 2 were documented in 3/15, 8/15 and 4/15 dogs. MST for dogs with a mGPS of 0 was 277 days (range 210–1672), mGPS of 1, 164 days (range 76–1491) and mGPS of 2, 7 days (1–64 days). Kaplan-Meier analysis revealed dogs with mGPS of 2 had significantly shorter MSTs than dogs with mGPS 0 or 1. Dogs with an mGPS of 0 had significantly longer MST than dogs with GPS of 1 or 2.

STATEMENT
These results suggest the canine mGPS may provide prognostic information for dogs with lymphoma undergoing treatment with chemotherapy. Further work based on larger and defined populations is needed to assess its utility to guide treatment decisions.

Eosinophilic cellulitis (‘Well’s syndrome’) associated with lymphoma in a dog

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OBJECTIVES
Well’s syndrome is a rare inflammatory skin disease characterized by maculopapular eruptions with marked eosinophilic inflammation within the dermis. In humans, a variety of triggering factors have been documented such as insect bites, drugs, vaccination, intestinal parasitism and multiple malignancies. A similar dermatitis has been reported in dogs, suspected to be secondary to gastrointestinal disease or to be a drug reaction. To the authors’ knowledge, this is the first description of eosinophilic dermatitis associated with lymphoma in a dog.

METHODS
A 8-year old female spayed Boxed was presented for further investigations of multiple, generalized non-pruritic erythematous lesions. Physical examination revealed right scapular lymphadenomegaly. The patient was receiving chemotherapy for a multi-centric high-grade lymphoma that had been diagnosed 9 months earlier.

RESULTS
No response was seen to symptomatic treatment with corticosteroids, so skin biopsies were obtained. Histopathology revealed deep eosinophilic dermatitis. Lymph node cytology confirmed a relapse of the lymphoma. Rescue chemotherapy was commenced, which generated complete resolution of the lymphadenomegaly and of the skin lesions.

STATEMENT
The diagnosis of this syndrome should prompt extensive investigations to rule out concomitant diseases, such as multi-centric lymphoma and it is important to consider the possible association between this dermatitis and lymphoma. In human medicine, eosinophilic dermatitis can be the first clinical complaint of an underlying pathology, and equally, the onset of typical skin lesions in a dog previously diagnosed with lymphoma should raise suspicions for a possible clinical relapse.

The occurrence of proteinuria in dogs treated with masitinib

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OBJECTIVES
Evaluate the frequency and onset of proteinuria in masitinib treated dogs.

METHODS
Clinical records of masitinib treated dogs between June 2010 and July 2016 were reviewed. The incidence of proteinuria (urine protein:creatinine ratio (UP:C) >0.5) was recorded before and for 3 months following treatment commencement.
RESULTS
Twenty-eight cases were identified, 8 without pre-treatment UP:C or follow-up results were excluded.

Of 20 included cases, 3 (15%) were proteinuric (UP:C 0.66, 1.36, 4.4) before treatment. After 4 weeks of masitinib treatment, proteinuria had resolved in one and in the 2 others, UP:C remained stable.

Eleven of the remaining 17 dogs had UP:C performed 1-2 weeks post-treatment. Three had developed proteinuria (UP:C 0.54, 1.27, 8.2). After 3–4 weeks, 13 previously non-proteinuric dogs remained on masitinib treatment and 1/9 that had UP:C checked was proteinuric (UP:C 4.56). After 5–8 weeks, 10 previously non-proteinuric cases remained on masitinib treatment and 0/7 that had UP:C performed were proteinuric. After 9–12 weeks, 7 previously non-proteinuric dogs remained on masitinib and 0/5 that had UP:C performed were proteinuric.

Overall, 4/17 (24%) cases developed proteinuria within 3 months of starting masitinib. In two, proteinuria resolved despite continuing masitinib. In the other two masitinib was discontinued, proteinuria improved in 1 dog and progressed in the other. The latter case developed hypoalbuminaemia and ascites which resolved with appropriate treatment.

STATEMENT
In all dogs that developed proteinuria on masitinib, it occurred within 4 weeks and varied in severity. The only dog with severe proteinuria and adverse effects recovered suggesting reversibility with prompt, appropriate action.

Investigation of prognostic factors in canine chronic lymphocytic leukaemia
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OBJECTIVES
To assess prognostic indicators for canine chronic lymphocytic leukaemia (CLL), including immunophenotype and treatment protocol used.

METHODS
Dogs diagnosed with suspected CLL by flow cytometry between 2009 and 2013 were identified retrospectively. Univariable Cox regression analysis was performed to assess the association between haematological parameters and survival time. The log rank test was used to assess the association between treatment protocol or immunophenotype (T, B or atypical) and survival time. Data are presented as median [25th, 75th percentiles].

RESULTS
Dogs with B-CLL, T-CLL and atypical CLL lived 243 [44, 447] days (n=10), 113 [44, 500] days (n=20) and 300 [20, 318] days (n=8) respectively. However, there was no significant relationship between immunophenotype of CLL and survival time (P>0.05). Baseline lymphocyte count (P=0.634), red blood cell count (P=0.302) and platelet count (P=0.439) were not associated with survival time, although increasing neutrophil count at diagnosis tended towards a significant association with survival time (HR 1.076, 95% CI 0.988-1.172; P=0.091).

Dogs treated with prednisolone and chlorambucil had longer survival times compared with dogs receiving no treatment (300 [89, 549] days, n=14 vs. 25 [18, 36] days, n=6; P=0.027), however survival did not differ between dogs treated with prednisolone alone (318 [44, 386] days, n=6) or prednisolone and chlorambucil in combination (P=0.648).

STATEMENT
The severity of lymphocytosis or presence of cytopenias at the time of diagnosis were not found to be significantly associated with a poorer prognosis. Furthermore, in contrast to previous studies, an association between immunophenotype and survival time in canine CLL was not demonstrated.