Safety profile of methylprednisolone acetate epidural injection in dogs treated for lumbosacral disease

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OBJECTIVES
To report side-effects after methylprednisolone acetate epidural injection in dogs treated for lumbosacral degenerative stenosis. Side-effects caused by inadvertent systemic administration of methylprednisolone acetate during epidural treatment has been reported in humans to range from 9 to 32.8%, however data in the canine population is limited (n = 15 to n = 38) and highly variable (0 to 50%).

METHODS
Computer records at a single referral institution in the UK were searched for dogs with MRI confirmed lumbosacral degenerative stenosis who were treated with at least three methylprednisolone acetate epidural injections between April 2012–May 2018. Details on side-effects reported by owners at re-check examination approximately two weeks after treatment were analysed.

RESULTS
A total of 730 methylprednisolone epidural injections were analysed within a population of 150 dogs. After excluding cases without full follow-up information (n = 249), this resulted in a total of 481 cases. The following temporary side-effects were reported: 4.9% (n = 24) systemic side-effects including polyuria, polydipsia and/or polyphagia; 2.1% (n = 10) clinical deterioration or subdued temperament, 0.8% (n = 4) urinary incontinence and 0.8% (n = 4) diarrhoea. All side-effects resolved within a few days after treatment without intervention. No major or permanent side-effects were reported.

STATEMENT (CONCLUSIONS)
Epidural methylprednisolone acetate injection is a relatively safe medical treatment option for lumbosacral degenerative stenosis in dogs. Our retrospective analysis revealed an incidence of 8.6% transient side-effects that resolved without further intervention. This is comparable to human literature. No major catastrophic side-effects were noted.

A case management Framework for complex decisions in a shelter setting

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OBJECTIVES
To provide a clear management framework for complex cases between veterinary professionals and other experts within a shelter environment. To aid collaboration and communication between multiple stakeholders.

METHODS
A simple framework established through an iterative process assists in case decisions. This allows for a careful balance between progressions within veterinary science and ethical assessments, inclusive of situational factors. A complex case may arise when a dog has more than one problem to tackle or where there may be a lack of accessible resources for their ongoing care. Animal welfare and logical clinical decision making provides the basis of the Complex Case Management (CCM) framework to evaluate individual cases across multiple interdisciplinary teams arriving at a solution.

RESULTS
The CCM Diagram (Figure 1) provides broad topics (problem list, solutions, ability for the dog to cope and resources available) within the CCM Framework (Figure 2) comparable against expert opinions (behavioural
or veterinary problem elements) leading to a clear approach for multifactorial decision making.

Time-frame for treatment or recovery as well as the impact that each solution may provide must be included. Success of a solution may crucially rely on specific resources being available (personnel, pain medication or vet skills).

**STATEMENT (CONCLUSIONS)**

Using this approach, pragmatic and welfare focused decisions can be made for individual animals where both circumstance and resource may be influential. Providing clarity in a decision process can reducing the stress and easing the burden for all parties when a sensitive decision may be required.

Surgical management and outcome in a male puppy with urethrorectal fistula associated with type 1 atresia ani

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**OBJECTIVES**

To describe the first reported case of a male puppy with congenital urethrorectal fistula and type 1 atresia ani.

**METHODS**

Congenital urethrorectal fistulae have been associated with anorectal malformations in the human, equine and feline literature, with atresia ani being reported most frequently. In contrast, such an association has not been reported in the canine literature. The clinical presentation, diagnostic findings, surgical management and outcome are described for a puppy diagnosed with a congenital urethrorectal fistula and type 1 atresia ani.

**RESULTS**

A four-month-old German short-haired pointer was presented for investigation of tenesmus and production of urine and faeces from a common perineal opening. A positive contrast retrograde urethro-cystogram identified a urethrorectal fistula, an abnormal distal trajectory to the caudal rectum and stenosis of the penile urethra. Abdominal ultrasound, haematology and biochemistry were unremarkable. Urine culture identified a heavy mixed bacterial growth. A 3.5F urinary catheter was placed retrograde into the fistula to aid identification and the fistula was ligated and transected via a perineal approach. The atresia ani was addressed by surgical ano-plasty and a scrotal urethrostomy was performed to bypass the urethral stenosis. Postoperatively, resolution of the tenesmus and long-term satisfactory urination through the urethrostomy site was achieved.

**STATEMENT (CONCLUSIONS)**

Surgical management of a urethrorectal fistula and associated atresia ani in this dog was successful, with resolution of clinical abnormalities. Surgical correction should be considered as a potential treatment option in similar cases.