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P12**Fibrosarcoma of the mandible in Sharplanina mountain dog – Case report**

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Introduction: Tumors involving bones in dogs could occur both on the axial and the appendicular skeleton. Usually they manifest lameness (if the appendicular skeleton is affected) and regional mass. Among the canine bone tumors, the osteosarcoma (OS), is most common, and accounts for approximately 85% of skeleton malignancies and approximately 5% of all canine neoplasms. Oral osteosarcoma manifests pleomorphic mesenchymal cells with marked anisocytosis and anisokaryosis. Multilobular osteochondrosarcoma (MLO) is a rare tumor that generally arises from the flat bones of the canine skull. Histologically, this tumor is composed of multiple nodules each containing a core of cartilaginous or bony matrix surrounded with thin layer of spindle cells. MLO primarily occurs in older and medium-to large-breed dogs and occasionally in small breeds, like Pekingese dog. Chondrosarcoma (CS) is the second most common canine primary bone tumor (5-10% of all primary bone tumors in dogs), and is characterized histologically by anaplastic cartilage cells with cartilaginous matrix. Hemangiosarcoma of bone is a rare tumor (less than 5% of all bone tumors), and affects middle-aged to older dogs of any size, although there is evidence of breed-related predispositions in German Shepherd dogs. Primary fibrosarcoma (FS) is also a rare tumor in dogs (less than 5% of all bone tumors) and it is difficult to distinguish it from fibroblastic OS histologically. It more often affects the axial skeleton than the appendicular skeleton, and is more common in young dogs.

Material and methods: A four-year old, male, Sharplanina Mountain Dog was presented at the University Veterinary Hospital within the Faculty of Veterinary Medicine in Skopje. It had a history of wounding in the apical region of the mandible. He had received common treatment (antibiotics and corticosteroids). Soon, at the site of the lesion, the gingiva proliferated and formed a mass. After the clinical examination, further diagnostic tests were performed: radiography, blood testing, cytology (FNA, Diff-Quick straining) and pathohistology analysis.

Results: The radiographic finding showed splitting of the apical region of the mandible, so surgical treatment was recommended. The FNA aspirate manifested small number of mesenchymal cells which showed signs of malignancy, with dark-violet colored cytoplasm. Nuclei

showed anisocariosis, light-violet color and many prominent nucleoli, which are a feature of the malign fibrosarcoma cells. This finding was confirmed with pathohistology analysis.

Conclusion: Surgical treatment included amputation of the apical region of mandible, including canine teeth and incisive teeth.

P13**The usage of erythropoietin (EPO) in nonregenerative anemia as a result of chronic renal failure caused by chronic ehrlichiosis in dogs: Case report**

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Introduction: Anemia is characterized as insufficient concentration of hemoglobin due to decreased production, increased destruction or loss of red blood cells. It can be expressed as a packed cell volume (PCV), hematocrit, red blood cell (RBC) count, or hemoglobin level under the reference rates. Anemias can be caused by blood loss, hemolysis or inadequate production of red blood cells and are classified as: a) regenerative and b) nonregenerative. Ehrlichiosis, known as canine hemorrhagic fever is caused by rickettsia - *Ehrlichia canis*, usually transmitted by the infected ticks, *Rhipicephalus sanguineus* sp. that affects circulatory system, particularly the monocytes. Bleeding, anemia, lymphadenopathy, anorexia, depression, renal failure, are few of the clinical symptoms characteristic for Ehrlichiosis. Chronic renal failure occurs as irreversible and progressive nephrons damage which leads to reduced production of erythropoietin, a hormone that controls the production of red blood cells.

The aim of this report is to present a successful administration of recombinant human erythropoietin as a supplement of endogenous erythropoietin for stimulation of red blood cells production in patients due to renal failure.

Material and methods: The patient, 4 years old female, Maltese poodle was admitted in our clinic on 25.07.2013 due to signs of vomiting, lethargy, loss of appetite and weakness. Clinical examination revealed pale mucous membranes, normal body temperature 38.4°C, increased heart and respiratory rate and normal lymph nodes. Haematology, biochemistry, peripheral blood smear to exclude Babesiosis, antigen rapid tests of *Leishmania* and *E. canis* were performed.

Results: Laboratory examination revealed pancitopenia (RBC 3,35x10¹²; WBC 6.5x10⁹; Hgb 87 g/dl; Hct 26 %) highly increased levels of urea, phosphorus and creatinine (65,1 µmol/L; 2,7 mmol/L; 403 µmol/L) and positive rapid