

valere referrals

Welcome & Merry Christmas

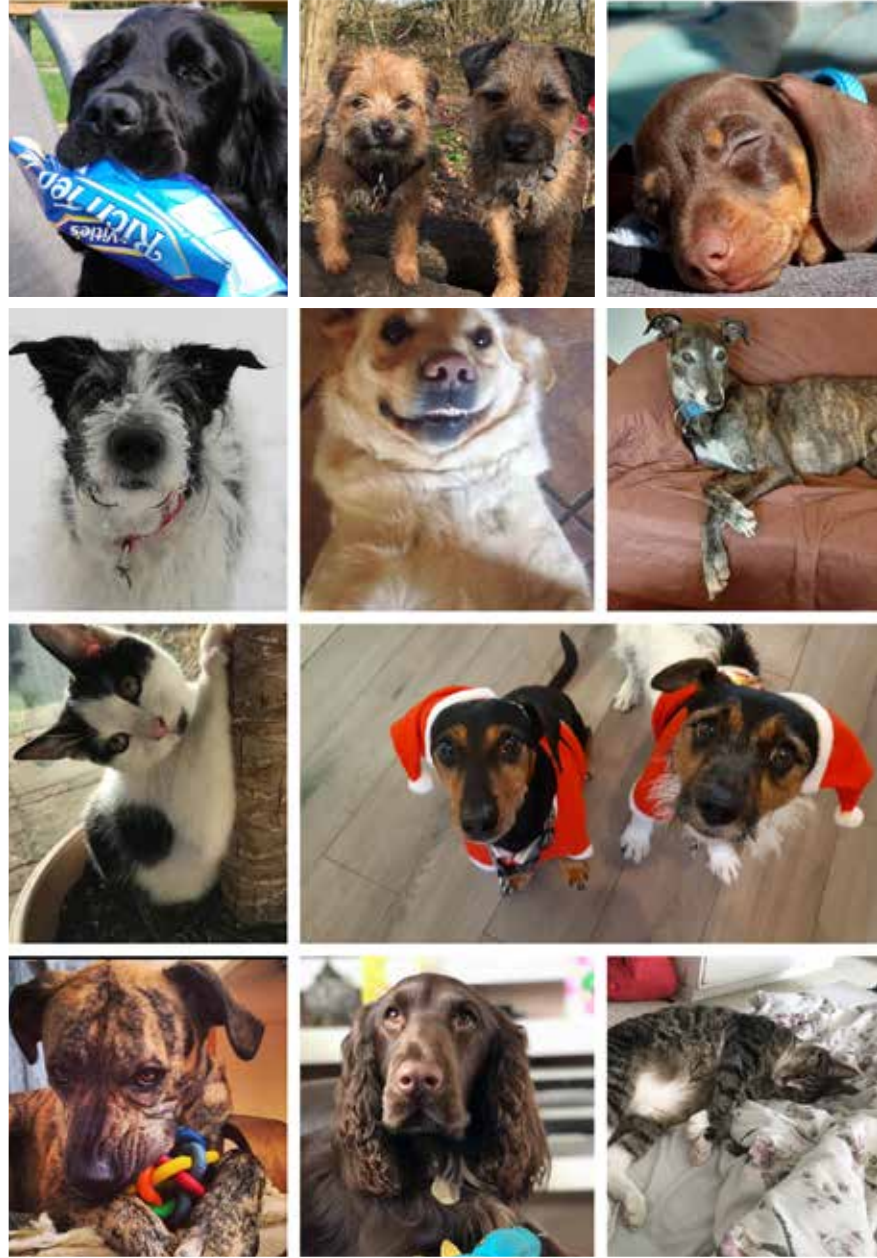
Hello and welcome to Vale Referrals winter newsletter. After a busy summer we are now well into our new school year. With a new intake of interns and some staff having left to enjoy maternity leave, we are now running full steam ahead with our team. Our cases are continuing to be challenging and interesting and plans for 2020 are progressing with some exciting times ahead for Vale. As always we would like to thank you all for your continued support and wish you and your colleagues a very Merry Christmas and Happy New Year!

New Faces at Vale

Michelle Clark BSc(Hons) BVSc CertAVP(SAM) MRCVS
 Welcome to Michelle who has joined our internal medicine team. Michelle graduated from University of Bristol in 2011 and then spent 6 years in busy first opinion practice in the Bristol area. After gaining her certificate in 2017 she then moved to a 24hr emergency and referral hospital in Manchester where she was responsible for the medicine team. Michelle enjoys all aspects of internal medicine, but has a particular interest in feline medicine and respiratory disease. Michelle lives with her partner, her cat Nelly, and two tortoises, Betty and Stella. In her spare time Michelle enjoys socialising, travelling, and can be found at Glastonbury festival most summers.



Lucy Montague joins the team as our new Nursing Manager. Lucy graduated with an honours degree in veterinary nursing from the Royal Veterinary College in 2008. Lucy started working at Fitzpatrick Referrals Orthopaedic and Neurology Hospital in Eashing where she was quickly promoted to senior nurse and started studying for her graduate diploma in professional and clinical veterinary nursing, which she passed with distinction in September 2013. Lucy says "I always strived to head up a nursing team one day and then Noel offered me the opportunity to take on the role of clinical nursing manager for Fitzpatrick's new oncology hospital. So, in October 2014 I transferred to the new service and hospital in Guildford to build and develop a new team of nurses, which has gone from 3 to 14 in two years". We are excited to have Lucy on board especially as our team and centre continue to grow. Welcome Lucy!



More Nurses!

Along with Lucy we would like to welcome new nurses Ana, Eleanor, Clare, Gemma and Claire who all join us with great knowledge and experience. You can check out their bio's on our website www.valere referrals.co.uk/meet-the-team/ If you are interested in working as part of our team at Vale Referrals or if you would like to spend a day with us, see what Vale Referrals has to offer www.valere referrals.co.uk/recruitment/



Portosystemic Shunt Management



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Whilst portosystemic shunts in dogs and cats are uncommon in day to day practice we see a significant case load here at Vale Referrals. These complex cases present a diagnostic and management challenge for both our medical and surgical teams.

Portosystemic shunt cases generally present with signs that may begin at any age from a few weeks of age up to many years old and presenting signs can be vague.

Most animals with a shunt are poorly grown compared to their littermates. Vomiting, diarrhoea, eating abnormal substances (pica) and anorexia are also common in dogs with shunts but these signs tend to be intermittent and may be put down to food intolerances or scavenging at first.

Portosystemic shunts primarily affect the blood flow from the intestines to the liver. During digestion in normal cats and dogs blood is drained from the small intestine to the liver where it is filtered and cleared of toxins and other harmful substances, before then draining to the heart, lungs and the rest of the body. Portosystemic shunts are the results of aberrant vessels which bypass the liver and drain blood full of toxins directly to the heart, lungs and the rest of the body. This results in permanent intoxication of the patient, resulting in a downward decline, which can ultimately lead to multi organ failure. Since there is more blood flow from the gut after eating, signs in dogs with shunts are often most noticeable within a few hours of a meal. Affected dogs may develop odd behaviour, signs of brain derangement (staring into space, circling, blindness or seizures) or signs of a headache, ie depression or pressing their head against a wall.

The shunting vessels may be congenital in origin, or secondary, usually as a result of portal hypertension. While the secondary shunting vessels can be desirable (as they help the patient to survive) in cases of portal hypertension, congenital portosystemic shunts results in much more harm and can result in damage to vital organs,

especially the brain. Moreover, high levels of ammonium in blood result in development of kidney stones or bladder stones leading to concurrent urinary tract disease.

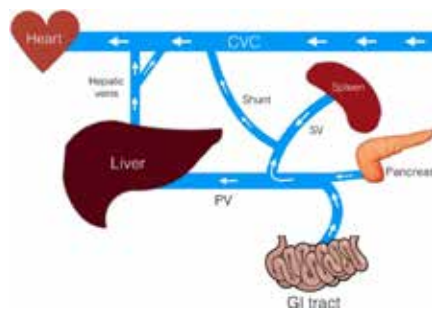


Fig1.1 Diagram showing how the PSS vessel effects the flow of blood

The complex nature of congenital portosystemic shunts patients mean that we often take a multidisciplinary approach to case management here at Vale Referrals. We have developed a treatment plan which involves you as the primary vet to help manage our patients in order to get the best possible outcome achievable. This may include all or some of the following:

1. General examination, including blood tests (specifically, but not limited to pre and post prandial bile acid levels).
2. Patient stabilisation (at least two weeks, but may be longer if the patient is not stable enough to tolerate surgery) by:
 1. diet - low protein, reduced fat
 2. lactulose laxative
 3. antibiotics to reduce bacterial overgrowth
 4. anticonvulsant (in case of seizures)
 5. and possible other treatment as needed (enemas, iv glucose)
3. CT-angiography, confirming the shunting vessel and its localisation, ruling out the possibility of two or more vessels. Thanks to CT, the surgery is no longer regarded as an exploratory, but rather an elective curative-intent procedure.
4. Surgery, based on CT results.

An ultimate goal of surgery is complete occlusion of the shunt, which in most cases cannot be achieved within a short

period of time. Since the problem is present since birth, the liver is usually not developed enough to accept a sudden large volume of blood without allowing some time to adjust. It has been proven that less than 50% of dogs can tolerate single complete occlusion of the shunting vessel without fatal consequences. Therefore, we have currently three basic options to occlude it within a longer period of time (weeks):

1. Partial primary occlusion by ligature, followed by second surgery within a few months following the first one aiming at complete ligature - this is time consuming and too large of a burden to the patient and costly.
2. Partial attenuation with sterile cellophane banding (by irritation of surrounding soft tissue causes fibrous tissue build-up and subsequent vessel occlusion) - somewhat unpredictable outcome.
3. Ameroid constrictor placement over the vessel (metal ring lined with casein within inner surface, absorbing fluid and swelling inside, reducing subsequently diameter of the ring to zero - metal ring prevents outward swelling) - closes quite predictably within 4 to 8 weeks.

At Vale Referrals we have performed all of the options above and concluded that the ameroid constrictor placement is a gold standard of care. The success rate is reaching 90% for improvement of quality of life and 60 - 80% for complete resolution of the symptoms. There is virtually no risk of sudden portal hypertension which is potentially lethal for the patient. We have reported no perioperative fatalities since starting using the ameroid constrictor technique and the early complication rate has decreased substantially.

In some cases patient will have concurrent urolithiasis. In these cases we recommend treatment of urinary stones, since they may result in life-threatening obstruction (blockage).

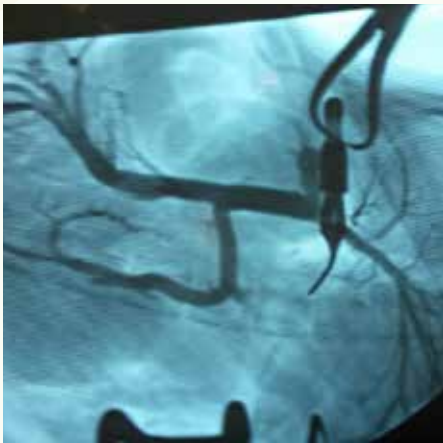


Fig 1.2 Angiography highlighting the shunting vessel

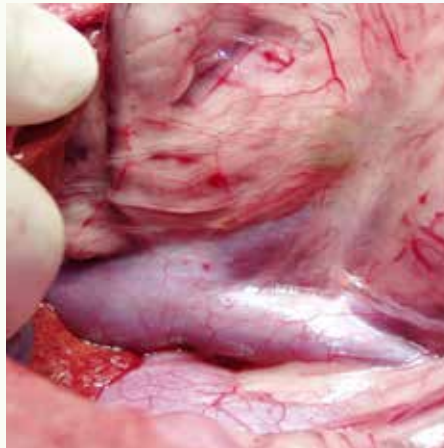


Fig 1.3 Visualisation of vessel



Fig 1.4 Ameroid constrictor (metal ring lined with casein within inner surface)

Last but not least, since portosystemic shunts are regarded as hereditary, we recommend neutering the patient at the time of surgery (whenever possible).

If you would like to discuss any cases you feel may be presenting as a portosystemic shunt then we would be happy to advise you on the medical and surgical options.

Telephone **01453 547934** or
email referrals@valevets.co.uk

Heart of the Matter

Saluki cross, Oscar was seen by our Cardiology team for investigation into reoccurrence of a pericardial effusion that had previously been drained a week earlier. Our cardiologist, Dr Mark Patteson MA VetMB PhD DVC CertVR FRCVS suspected a mass on the right auricular appendage as a primary cause of the pericardial effusion.

CT confirmed that there was a mildly

enhancing, rounded mass lesion arising from the craniodorsal aspect of the right atrium, measuring 1.4cm wide. See fig 2.1 and fig 2.2.

Oscar underwent surgery for pericardiectomy and removal of the mass.

The mass was sent for histology; due to the mildly enhancing mass being

on the right atrium / right auricle; this is most compatible with a primary neoplasm, which, sadly, is most likely a haemangiosarcoma. The good news was that CT revealed no evidence of pulmonary metastatic disease in the patient.

We wish Oscar the best for his recovery and will continue to work closely with his owners and referring vet team.



Fig 2.1 Heart mass (1.4cm wide) arising from the craniodorsal aspect of the right atrium.



Handsome Oscar, two days post surgery

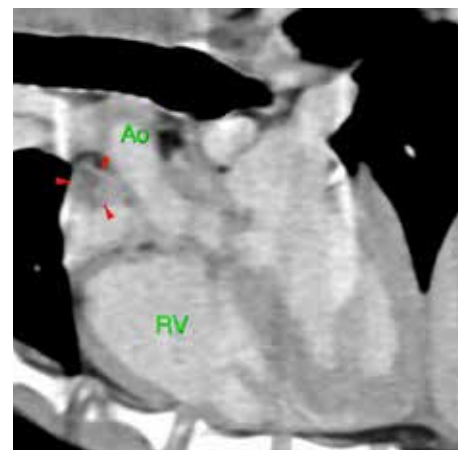


Fig 2.2 Heart mass (1.4cm wide) arising from the craniodorsal aspect of the right atrium.



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care, expertise, support

In Other News

Big Build News

Vale Referrals are excited to announce that this winter we have started expanding the footprint of our facilities. Vale will proudly have additional new theatres, extra consulting rooms and new and improved kennels, cattery and isolation wards. Our mission is to be an exceptional veterinary referral service, regarded by referring vets as having outstanding multidisciplinary care, communication and support.

This development of our centre will allow us to offer you, your client and most importantly, your patient, more readily available access to our services. We will keep you updated with regards to the build via our social media platforms and our projects team will ensure your client receives minimal disruption during their visit here. We would like to take this opportunity to thank you for your continued support, and we look forward to unveiling our new facilities later in 2020.



Remember...

You can refer a case to us via our quick and easy online referral request form www.valereferrals.co.uk/online-referral-request-form/

Outpatient CT's are available at Vale Referrals. Fixed price for 1 area is £885.

To refer an outpatient CT simply fill out our quick and easy online CT request form www.valereferrals.co.uk/ct-request/

Going Green for 2020

To do our bit for the planet we are trying to reduce our use of paper and plastics and also reduce our carbon footprint.

We will therefore stop the postage of our newsletter. If you enjoy receiving our newsletter then you need not miss out. Sign up ONLINE and receive news and updates from Vale Referrals. Sign up on our website www.valereferrals.co.uk and you will receive news and updates from us!



Client Testimonials

"This is Dudley's 3rd major surgery this year and he was well looked after. I was so grateful for his care before, during and after his surgery. Communication was excellent I think Vale Vets is a lovely kind caring environment and have lovely animal loving people working there. I am very happy and would recommend to anyone. Thank you all!!!"



"Staff at the front desk are caring and efficient. All areas are clean and tidy and I have confidence in the entire practice as a result of my interactions with staff here. The discharge pack is very welcome and an indispensable document for us as owners at handover time. Badger was happy to see us and is recovering slowly but well."

Out of hours service

For out of hour emergency advice or for emergency referral please call ☎ **01453 547934**