



Teleradiology | Teleconsulting | Education

## IT'S YOUR CASE

Species: Canine

Breed: Boykin Spaniel

Sex: Male Entire

Age: 4 years

### Clinical History:

He has a chronic cough for the past 5 months. The cough is productive and worse at night and when excited, and with possibly wheezes. There has been regurgitation with intermittent frequency since puppy.

Symptoms were initially responsive to with prednisone, ampicillin injection, and doxycycline for one month. Subsequently there was no response to cephalixin, ivermectin, fenbendazole, and antitussives. Currently on prednisone.

**Anatomic regions:** Thorax

**Details of study and technical comments:** Three view radiographs of the thorax (three films)

### Diagnostic interpretation:

THORAX:

The cardiac silhouette and pulmonary vasculature are normal. There is a moderate, diffuse, and patchy unstructured interstitial pulmonary pattern that is more severe caudodorsally (red arrows). There is a mild and diffuse bronchial pulmonary pattern, most severe caudodorsally (yellow arrows). There is increased soft tissue opacity surrounding the carina in the region of the tracheobronchial lymph nodes (blue arrows).



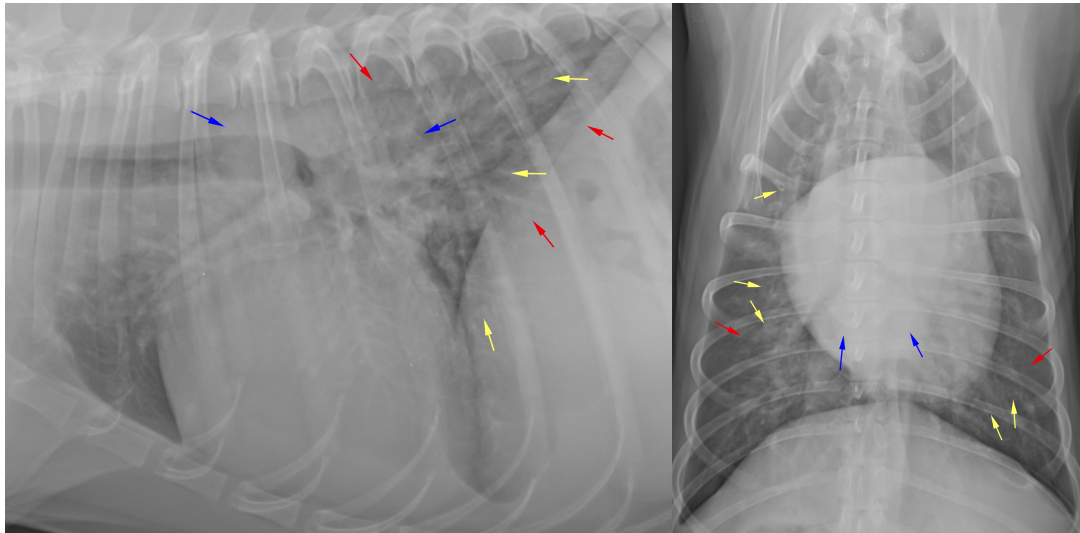
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### Conclusions:

- Mixed pulmonary patterns
- Enlarged tracheobronchial lymph nodes

When considered together, primary differentials are infectious aetiologies (pyogranulomatous disease-fungal or certain bacterial), neoplasia (round cell tumour) and bronchopneumopathy (eosinophilic or lymphomatoid).

### Additional comments:

The implication of the lungs and the lymph nodes is an important distinction in this study as it narrows the categories of disease to infectious, neoplastic, or inflammatory/immune modulatory. Infectious causes specifically comprise pyogranulomatous agents including fungal (histoplasmosis, blastomycosis, etc) and some bacterial (mycobacterium) infections. Neoplasms are limited to round cell tumours such as lymphoma or histiocytic sarcoma. Bronchopneumopathies are less common but an important differential.



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