

CASE NUMBER: O16867

DATE: 12.9 2017

PATIENT: Rottweiler, male, 5 years old

NECROPSY REPORT

MACROSCOPIC FINDINGS:

1 § Post mortal changes: Discrete

2 § Nutritional status: Normal

3 § Excretions from natural orifices and visible mucosal areas:
No significant pathological changes.

4 § Fur coat, skin, subcutaneous tissues and lymph nodes of the trunk and head:
No significant pathological changes.

5 § Muscles, bone structure, joints and adipose tissue:
No significant pathological changes.

6 § Topography of internal organs, contents of body cavities, serosal surfaces:
No significant pathological changes.

7 § Organs of the head (oral cavity, tongue, teeth, salivary glands, sinuses, pharynx & larynx): Pathological findings: bilateral mucosal hyperplasia within the larynx at the level of the vocal cords.

8 § Circulatory organs (heart & pericardium, spleen, thymus, blood, bone marrow, vessels and lymph nodes of the internal organs): No significant pathological changes.

9 § Respiratory organs (lungs, pleura and trachea): No significant pathological changes.

10 § Digestive organs (oesophagus, forestomachs, stomach, gut, mesenterium, liver, gallbladder, bile ducts and pancreas): Pathological changes: mild increase in hepatic texture; surface and cut sections mildly multifocally indented by pale whitish tissue (multifocal fibrosis/ chronic hepatitis).

11 § Urogenitals (kidneys, bladder, ureters, male and female genitals and mammary gland):
No significant pathological changes.

12 § Endocrine organs (adrenals, thyroid, parathyreoid, etc.):
No significant pathological changes.

13 § Central nervous system: No significant pathological changes.

HISTOLOGICAL FINDINGS:

Larynx: mild chronic diffuse lymphoplasmacytic and hyperplastic laryngitis.

Cervical spinal cord: focal meningeal and peri-radicular fibrosis with mild multifocal myelophagia within the ventrolateral white matter.

Kidney: severe diffuse tubular hemosiderosis/lipofuscinosis.

Liver: moderate multifocal chronic eosinophilic granulomatous hepatitis.

Stomach: mild chronic diffuse lymphoplasmacytic gastritis with numerous *Sarcina spp*, helicobacter-like organisms and yeast on the mucosal surface.

Small bowel: moderate chronic diffuse lymphoplasmacytic enteritis.

OTHER FINDINGS (BACTERIOLOGY, VIROLOGY, and SEROLOGY):

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PATHOLOGISTS CONCLUSIONS:

The main autopsy findings are the moderate chronic inflammatory change in the small intestine, consistent with chronic inflammatory enteropathy (CIE, former IBD), and the eosinophilic hepatitis.

Rottweilers suffer from an idiopathic eosinophilic syndrome, which include eosinophilic inflammatory infiltrates within the liver, among other organs. The syndrome often include peripheral eosinophilia. This dog's eosinophil counts were in the upper reference range.

In addition, the cervical spinal cord showed increased meningeal thickness and consecutive spinal degeneration. These changes are described in the sk Wobbler syndrome of large breed dogs, with unstable or incongruent cervical spine, leading to a reactive fibrosis and spinal cord compression in the area. Tissues not recommended for further use: liver, gallbladder, kidney, stomach, duodenum, jejunum, ileum, bone.

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