

Hepatic Hematoma in a Dog with Pituitary-Dependent Hyperadrenocorticism

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Abdominal masses can be assumed by displacement of adjacent organs and change of soft tissue density. Ultrasonography and computerized tomography is useful diagnostic modalities for identifying the mass origin.

In this case, 11-year-old, Yorkshire terrier, spayed female dog showed clinical signs of distended abdomen and tachypnea. Serum chemistry, radiography, ultrasonography and computerized tomography were performed. We found high to marked increases in serum liver enzyme activity and other levels are nonspecific by biochemistry. We found the mass of soft tissue density in abdomen by radiography. The mass pushed away small intestine, stomach and liver. Radiopaque calculi were visible in bilateral kidneys. Abdominal ultrasonography findings include heterogenic mass, small amount of ascites, mild hydronephrosis and bilateral renal calculi. In computerized tomography, abdominal mass originated right lobe of the liver. The abdominal mass was surgically removed. It showed clotted blood nodules. We found degenerative change and hemorrhage of hepatocytes, sinusoidal congestion, existence and necrosis of adipose cell by biopsy. Hepatic hematoma was diagnosed. Although Post-operative care continued until 1 month, polydipsia, polyuria and laboratory findings include constantly increased ALP and GGT. In pituitary-adrenal function test, it was diagnosed pituitary-dependent hyperadrenocorticism(PDH). Although this case has unknown causes, it may be unusual case that the hematomas was caused by a leakage of blood from vascular hepatopathy in a dog with Pituitary-dependent hyperadrenocorticism.

Especially computerized tomography from imaging procedures is considered to be a useful method for identifying the abdominal mass origin

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