Surgical Resection of Ovarian Tumors in Dogs: 5 cases

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Signalment: Five dogs having abdominal distension and unknown masses were referred to SNU

VMTH. The clinical signs included pain, PU/PD, intermittent vomiting, weight loss and abnormal

estrus.

Results: Radiologic and ultrasonographic examinations revealed ovarian or abdominal mass. Two

cases were unilateral and three cases were bilateral. Cytologic evaluation of masses showed

neoplastic cells and so ascites did. CT scan was performed to assess grades of invasiveness and metastasis in only 2 cases. One had a solitary, ill-defined mass and the other had a huge mass

with hepatic metastasis and severe compression of other organs. On surgery, three cases spread to

great omentum, mesentery, small intestine, urinary bladder and liver. Ovariohysterectomy and partial

mass resection were performed for these tumors. 5 cases of ovarian tumors were 2 cases of

epithelial cell tumors, 2 cases of germ cell tumors and 1 case of sex-cord stromal cell tumor. The

prognosis was good when single tumors were completely excised at surgery, but if there was any

evidence of metastasis, the prognosis was poor.

Clinical relevance. All ovarian tumors did not be detected early because of nonspecific clinical

signs. So, most tumors were usually already spread to regional lymph node, mesentery, great

omentum, peritoneum, liver and other abdominal organ at the time of surgery. It should be checked

the metastasis to other organ or invasion to great vessels with computed tomography preoperatively.

The prognosis of ovarian tumors is not good if metastasis progressed.

Key words: ovarian tumor, dog, surgery

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