

Gastric dilation and volvulus with splenic torsion in a Siamese cat

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Gastric dilation and volvulus (GDV) is a rare condition in cats, with only 10 cases reported to date. A correlation between GDV and traumatic diaphragmatic rupture has previously been reported. Spontaneous GDV has been documented, occurring most commonly in elderly cats.

Case presentation

- 14-year-old female neutered Siamese
- Acute onset non-productive retching/coughing two hours after feeding

Physical examination findings:

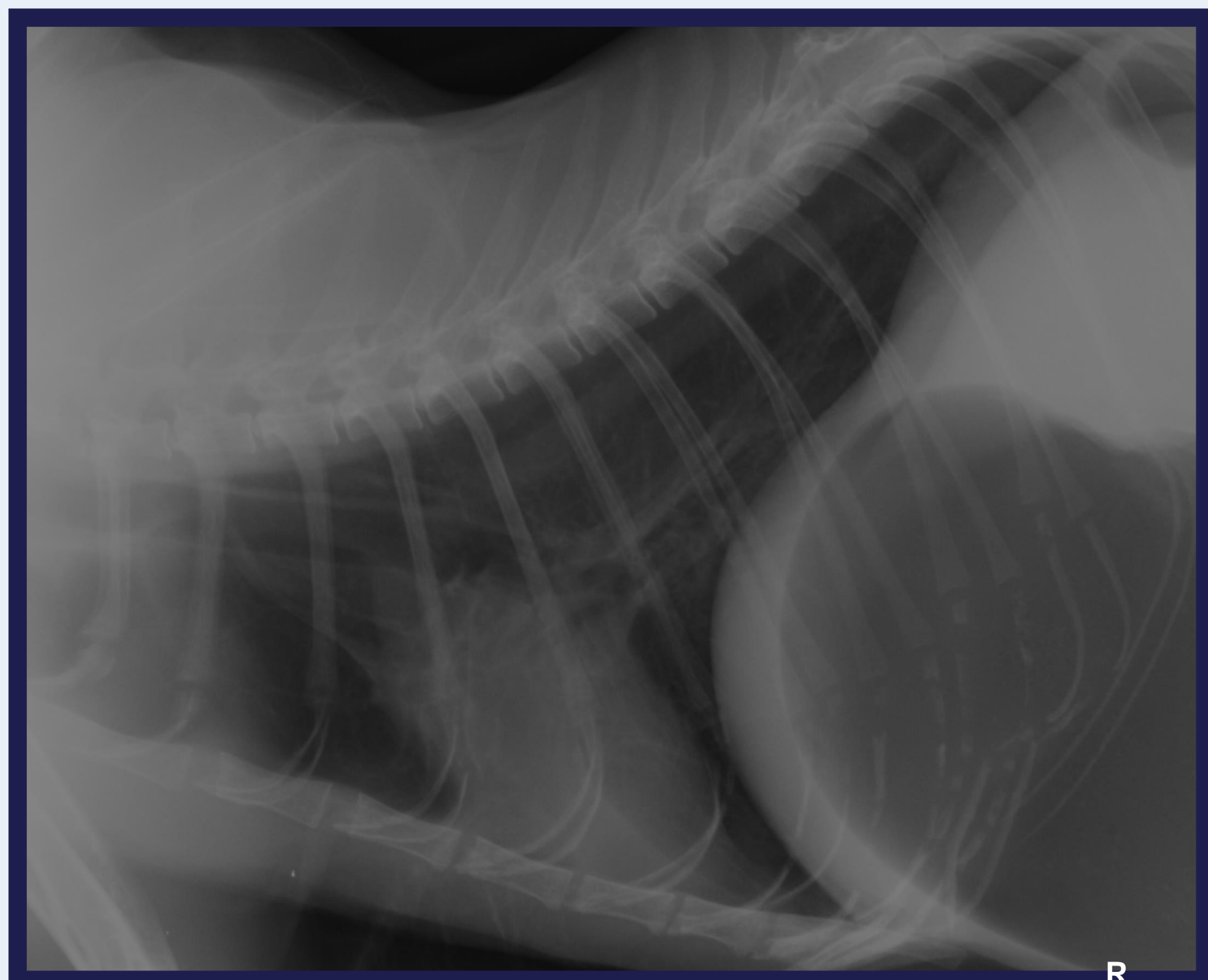
- Collapsed and obtunded, BCS 3/9
- Pale and tacky mucous membranes, CRT 1s
- Heart rate 140 bpm
- Femoral pulses synchronous but weak
- Respiratory rate 60 bpm with increased effort, no adventitious lung sounds
- Abdominal distension and discomfort
- Rectal body temperature 35.0°C

Investigation

Significant laboratory findings			
Parameter	Result	Units	Reference interval
Packed cell volume	30	%	30 - 45
Total solids	89	g/L	50 - 80
Blood glucose	15.39	mmol/L	3.9 - 8.8
Serum potassium	2.5	mmol/L	3.5 - 5.8
Serum urea	15.0	mmol/L	5.7 - 12.9

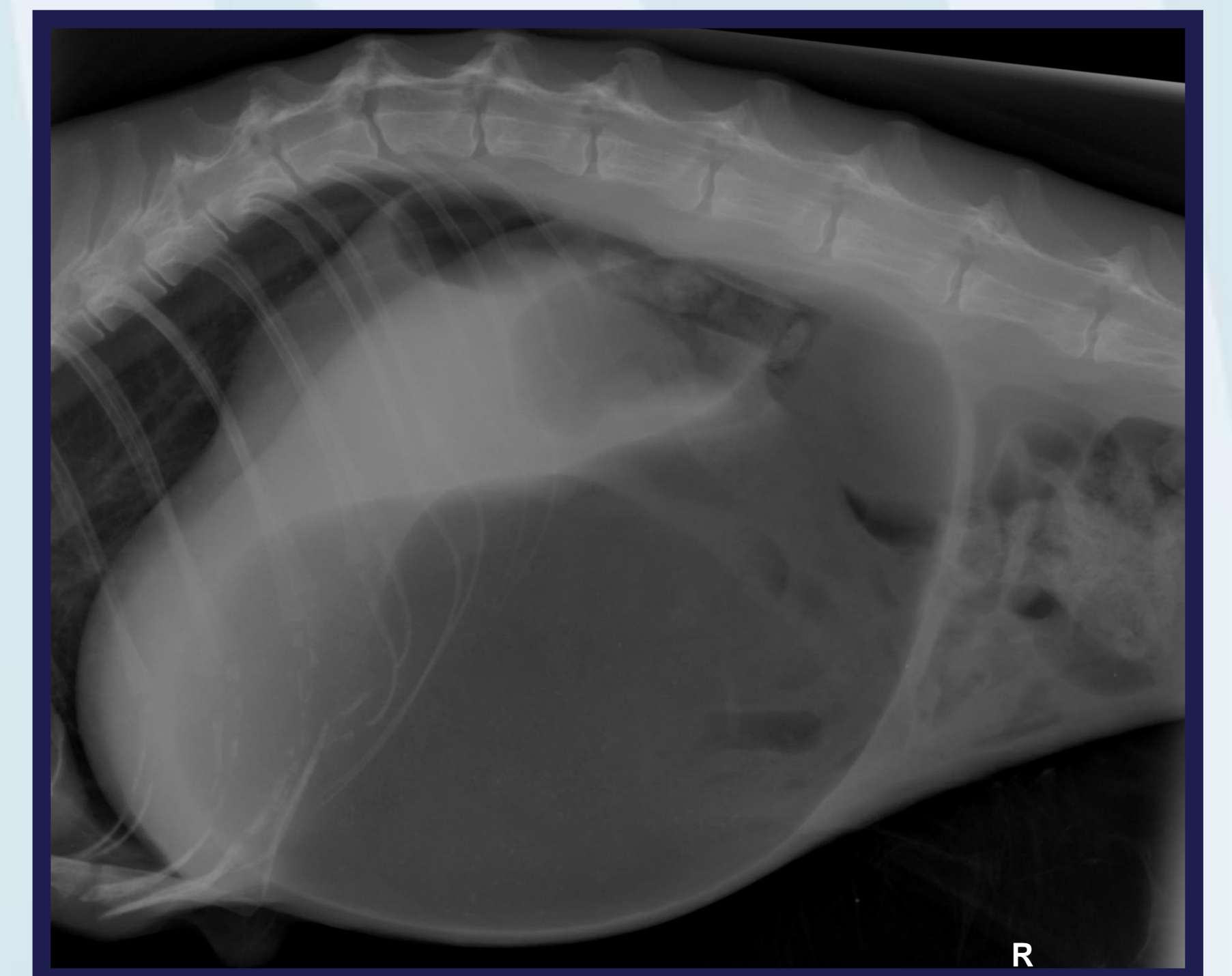
Point of care abdominal ultrasound

- A large heterogenous, mass-like structure in the mid-cranial abdomen
- Splenomegaly with mixed echogenicity
- No free abdominal fluid



THORACIC RADIOGRAPH

- Microcardia
- Hypovascular lung pattern

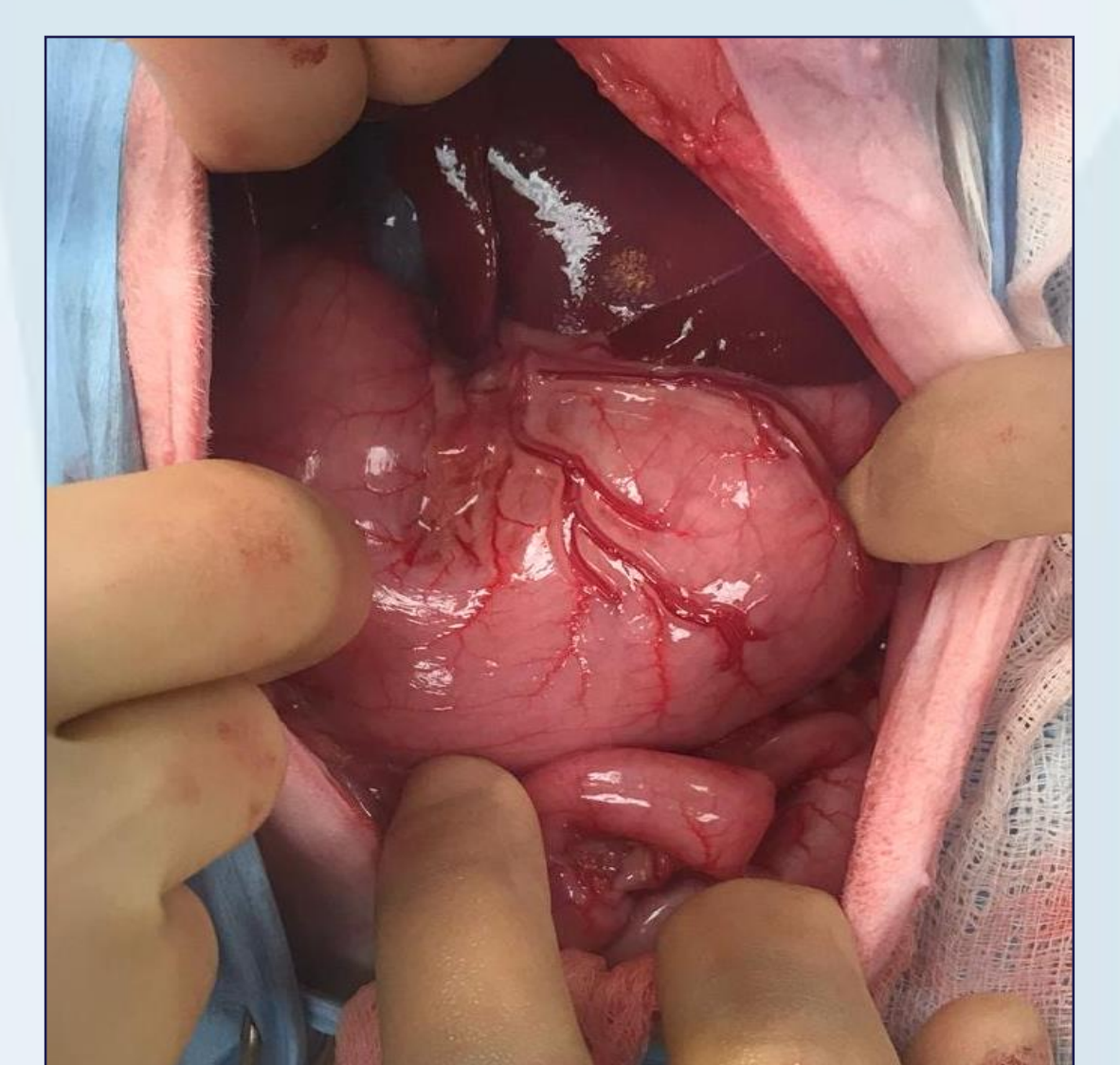


ABDOMINAL RADIOGRAPH

- Gastric distension and displacement
- Compartmentalisation

Therapy

- Fluid resuscitation, analgesia and oxygen therapy
- Stomach decompression with 20 G intravenous catheter
- **Exploratory celiotomy findings:**
 - Splenic torsion (identified intraoperatively)
 - Anticlockwise 180° gastric volvulus
- Hilar splenectomy facilitated stomach de-rotation followed by routine incisional gastropexy



Discussion

To the authors' knowledge this case is the first reported GDV in a cat with a 180° anticlockwise volvulus and concurrent splenic torsion. This case illustrates the importance of a logical and complex approach to our patients to prevent misdiagnosis.

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