Oesophageal foreign bodies in dogs

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Abstract

The aim of the paper is to present own experience in diagnosis and endoscopic removal of foreign bodies from the oesophagus in dogs. The study was performed on 22 dogs of different breed and sex, aged 7 months to 17 years, with suspicion of a foreign body in the oesophagus. All the dogs were subjected to a radiography of the oesophagus and oesophagoscopy. The most commonly observed clinical signs were regurgitation and swallowing disorders. The best diagnostic method allowing detection of foreign bodies in the oesophagus was esophagoscopy.

Key words: oesophagus, foreign body, dog, esophagoscopy

Introduction

Foreign bodies situated in the oesophagus of dogs are clinical cases which relatively often require fast, sometimes immediate vet’s intervention. The longer foreign bodies stay in the oesophagus, the more difficult it is to remove them outside and more frequently serious complications occur including a fatal outcome. Hence, each animal with the signs of sudden choking, vomit reflexes, regurgitation, hypersalivation, dysphagia, odynophagia and cough should be suspected of having a foreign body in the oesophagus (Leib and Sartor 2008, Juvet et al 2010). The aim of the paper is to present own experience in diagnosis and endoscopic removal of foreign bodies from the oesophagus in dogs.

Materials and Methods

The study was performed on 22 dogs of different breed and sex, aged 7 months to 17 years, with suspicion of a foreign body in the oesophagus. Before oesophagoscopy all the dogs were subjected to a clinical examination, haematological and biochemical blood examination and a radiological examination. The endoscopic examination was carried out after 24-hour-fasting and a 6-hour-break in administration of water, in general anaesthesia. Oesophagoscopy was conducted using a flexible Olympus GIF XQ-20 endoscope. The foreign bodies were removed from the oesophagus using grasping forceps of the Olympus FG-49L-1 “rat’s tooth” with “alligator’s jaws” type and rigid Olympus A6997 forceps.

Results and Discussion

Foreign bodies in the oesophagus were most commonly detected in Yorkshire terriers (36.5%) and West Highland White Terriers (22.7%). The dogs with a foreign body in the oesophagus manifested the following clinical signs: regurgitation – 17 cases (the most common clinical sign), loss of appetite...
bones accounted for over 80% of foreign bodies was confirmed by own observations which showed frequently diagnosed in the oesophagus are bones. This amounted from 96 to 100%. Foreign bodies most frequently with a foreign body in the oesophagus was higher and positive results of the radiological examination in dogs. In the study by Leib and Sartor (2008) the endoscopic removal of foreign bodies from the oesophagus was successful in 80.6% of dogs and in the study by Juvet et al. (2010) – in 68.2% of dogs. In own studies the most common complication were the inflammatory changes of the oesophagus (over 80%). In other studies oesophagitis was also the most common complication (Rousseau et al. 2007, Juvet et al. 2010). In own studies the mortality rate of dogs after endoscopic removal of foreign bodies from the oesophagus was low and amounted to 4.5%. Similar mortality rates in removal of foreign bodies from the oesophagus were described by Kaiser et al. (2003) and Rousseau et al. (2007) and amounted to 2% and 5%, respectively.

In summary, it is worth noting that diagnosis of foreign bodies in the oesophagus of dogs on the basis of the clinical examination is difficult due to non-specific clinical signs which may indicate many other oesophagus diseases. In the diagnostic procedure the best method is esophagoscop as it allows for identification of each kind of a foreign body and evaluation of the oesophageal mucosa changes resulting from the presence of a foreign body in the oesophagus. Moreover, the endoscopic technique makes it possible in most cases to remove safely a foreign body from the oesophagus.

References


