

Anal Gland Cancer

Bonnie is a 6-year-old Border Collie who we have treated for urinary incontinence. She was constantly dribbling urine, licking her lady parts and getting secondary UTI's that were frustrating to clear up. She was started on oestrogen in August to successfully treat her urinary incontinence and has had no problems since.

Bonnie was seen recently for "scooting" in September, whereby the dog drags its rear end along the ground, often letting go a pungent smell. Not great if your dog decides to do this on the carpet! She then presented again in November for scooting and on examination of the anal sacs, a 5 x 5mm nodule was palpated in the left anal gland.

Scooting can be associated with allergic skin disease (food or environmental allergies), anal sac disease (impacted, infected, abscessed anal glands), gastrointestinal disease (worms, colitis, diarrhoea), perianal irritation (faecal contamination, parasites, matted fur) rectal or anal pathology (anal sac tumours, polyps, foreign bodies) or less commonly orthopaedic causes (lumbosacral disease, pelvic pain)



Bonnie gets a little anxious so she is mildly sedated to administer the chemo

Apocrine gland adenocarcinoma of the anal sac is a malignant neoplasm, and clinical staging is recommended. Regional lymph node metastasis is common, especially to the sublumbar nodes, and is often present prior to detection of the primary mass. Distant metastasis occurs most commonly to the spleen, liver, and lungs. Bilateral disease has been reported in up to 10% of cases. Paraneoplastic hypercalcemia is seen in >25% of cases and may resolve with complete excision; in these cases, re-emergence of hypercalcemia may suggest tumour recurrence. Bonnies ionised calcium was within normal limits.



IV catheter placement is so important to make sure the chemo drugs go intravenously.

It was recommended that we take Bonnie to surgery to remove BOTH her anal glands and submit the glands for cancer staging. This gives us a clue as to how malignant this cancer is and what options we have for **Chemotherapy** at a later date. Dr Richard Lucy also performed abdominal ultrasonography to check for spread of the cancer. Luckily for Bonnie and her owner, no gross pathology was found.

Bonnie was a real star and breezed through her surgical day, recovering uneventfully. She was so pleased to see her owner at home time.



Our staff are suitably gowned up to ensure the safe delivery of the drug

Post operatively the recovery is relatively easy - pain medications, anti inflammatories, and gastrointestinal food for 7-10 days. Exercise is restricted to a leash and no swimming or bathing allowed until the sutures are removed. These dogs can struggle to pass the first bowel motion post-surgery, hence why a high fibre, gastrointestinal food is recommended.

After much discussion with Bonnie's owner, it was decided that Bonnie would undergo an intensive 14-week protocol of injectable chemotherapy to reduce the risk of the cancer popping up in other places. Bonnie was booked in with Dr Kirsty Thompson for her chemotherapy treatments and to date has been doing well. The chemotherapy drugs can cause diarrhoea and inappetence symptoms but these are well controlled with medications like probiotics and anti-nausea medications, should they occur. Bonnies white blood cells are checked weekly to make sure she's not getting too immunocompromised.

The two take home messages here are

- Anal Gland Cancer is more common than you think. Checking anal glands periodically should be part of a clinical exam, especially in an older dog.
- We offer a comprehensive chemotherapy service at MMH vets for many different types of cancer. We deliver safe chemotherapy (whereby the injectable medications are delivered through a syringe driver) and patients are often only in for a morning. Kirsty will advise on diets and homecare medications if needed. For a chemotherapy consultation please call McMaster & Heap and make an appointment for Dr Kirsty Thompson.

Dr Michele McMaster



Chemotherapy set up- we follow strict protocols when it comes to delivery of cancer drugs.

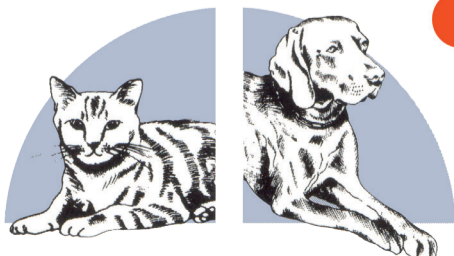


Bonnie preparing herself for her 2nd round of chemotherapy today

Anal sac disease is the most common cause of scooting and other clinical signs to note are biting the anal area, straining to defecate, difficulty sitting properly, a fishy odour detected, diarrhoea or softer stools.

The only way to check and evacuate the anal sacs is by digital palpation. Most dogs tolerate this well in the consultation. A digital rectal exam is the only way to effectively completely empty these sacs and then you can check for abnormal pathology like masses or thickening's present.

It was decided to biopsy Bonnies anal gland mass to determine if we were dealing with a metastatic cancer. The histology came back suggesting it was an "apocrine gland adenocarcinoma".



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