SURGICAL MANAGEMENT OF LIPOMA IN A DOG

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Introduction

Lipomas are benign tumors of fat (adipose tissue) and are common in dogs. These neoplasms are commonly encountered in dogs (Srivastava et al., 2012), occasionally identified in cats and horses, and rarely observed in other domestic species (Aiello, 1998). Lipomas generally occur in older, obese females, most commonly on the trunk and near the top of the legs. The breeds most at risk are Doberman Pinschers, Labrador Retrievers, Miniature Schnauzers, and mixed-breed dogs. Despite their benign nature, lipomas should not be ignored. Some tend to grow, and they may be indistinguishable from infiltrative lipomas or liposarcomas. Surgical removal is the choice of treatment (Aiello, 1998 and Thomson et al., 1999).

Materials & Methods

A male Doberman dog aged around ten years was brought to clinic with the history of soft swelling on lateral aspect of the left thigh. Initially, it was small in size and then subsequently increased to the football size within a period of one year. Clinical examination revealed a soft and round tumour, attached to thigh muscles at middle of the thigh region. On palpation, it was soft and painless. The clinical parameters like temperature, pulse rate and respiration rate were within physiological limits.

The dog was premedicated with Atropine sulphate 0.04mg/kg intramuscular and Xylazine HCL 1.5mg/kg intramuscular. The general anaesthesia was maintained by Ketamine administration 8-10 mg/kg intravenously. Dog was restrained on lateral recumbancy with the affected limb upside and the area around the mass was prepared for aseptic surgery. A circular incision was given at the base of the growth which was deepened by blunt dissection (Fig. 1). The attachments with thigh muscles were separated and the pathological tissue was excised completely. The muscles and subcutaneous tissue were approximated with absorbable suture material, vicryl 1/0 and skin with black braided silk in routine manner (Fig. 2).

Figure 1: Gross appearance to large sized tumour

Figure 2: Skin approximation
Results and Discussion
The routine dressing with antibiotic coverage with Ceftriaxone 500mg intramuscular, OD for 5 days with fluid therapy for 5 days lead to recovery without any complication. On gross examination the tumour was soft. The cut surface of the tumour was oily and yellowish in colour (Fig. 3).

Figure 3: Excised tumour

Histopathologically numerous polyhydral cells were seen that contained fat globule. Lipomas are usually found in older and overweight dogs and the incidence of neoplasms increase with age (Moulton 1990), as also reported old aged in present case. They may occur anywhere in the body, but commonly in the subcutis of the chest, abdomen, legs and axillae. They may appear in the orbital region, (Williams and Haggett 2006) perineal region, (Besalti et al. 2004), thigh region (Thomson et al., 1999) and in the body cavity (Mayhew & Brockman, 2002). The dog made uneventful recovery and no recurrence of the tumor was observed for up to 6 months. The reason for non recurrence in the present case might be due to its complete excision as opined by Krankefial, (1985).

References