



Clinical case: “MUVI”

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MUVI

- ◉ Mongrel dog
- ◉ Male
- ◉ 6 ys
- ◉ 6 Kg



History (since 4 weeks)

- ◉ Living in Somma Vesuviana (Naples Province, South Italy)
- ◉ Weight loss
- ◉ Depression
- ◉ < Food intake
- ◉ 2-3 weekly syncopal episodes (last 2 weeks)



CLINICAL EXAMINATION

- ◉ BCS: 3/9
- ◉ T 38 °C
- ◉ Pallor of mucosae
- ◉ Heart rate: 140 p/m
- ◉ Left side systolic murmur (II/VI)
- ◉ Systolic blood pressure: 184 mmHg
- ◉ Fundus examination: normal

DIAGNOSTIC PLAN

- ⦿ ECG
- ⦿ Cardiac/Abdominal ultrasound
- ⦿ Haematology and biochemistry
- ⦿ Urine examination

DIAGNOSIS

- ◉ Left systolic murmur (ok)
- ◉ Systolic hypertension (ok)
- ◉ Ultrasound confirmation (ok)

ACVIM consensus statement:

Mitral Valvular Disease Class Ib

Haematology

- ◉ RBC: 2.910.000
- ◉ Hgb: 6.8
- ◉ Hct: 17.9
- ◉ MCV 62
- ◉ MCH 23.3
- ◉ MCHC 37.8
- ◉ WBC: 5.9
- ◉ PLT: 175.000

- ◉ RETICULOCYTES: 1,3%

Biochemistry

- ◉ UREA: 174 mg/dl
- ◉ CREAT: 1.92 mg/dl
- ◉ ALT: 30 UI/L
- ◉ GLUC: 83 mg/dl
- ◉ TOT PROT: 7,4 g/dl
- ◉ Hypoalbuminemia
- ◉ Hyperglobulinemia

URINE EXAMINATION

- ◉ USG: 1020
- ◉ pH: 6
- ◉ Albumine: +++
- ◉ Glucose: ++
- ◉ Blood: neg
- ◉ UPCr: 1



DOUBTS : COULD SYNCOPAL EPISODES TO BE ATTRIBUTED TO MVD?

- ◉ Systolic murmur (ok)
- ◉ Systolic hypertension (ok)
- ◉ Ultrasound confirmation (ok)



ACVIM consensus statement
Class Ib

- ◉ Weight loss ?
- ◉ Severe Anaemia ?
- ◉ Proteinuria ?
- ◉ Serum protein alterations ?
- ◉ Renal failure ?
- ◉ Renal USound modification ?