



**McMASTER & HEAP**  
VETERINARY PRACTICE

## MOOSE'S MISADVENTURE

Meet Mr Moose, a 7 week old White Swiss Shepherd who our vet Kirsty saw on Saturday for anorexia, straining to defecate and vomiting for the past 24 hours. Moose had Giardia as a wee puppy and was treated whilst at the breeders. On examination Moose was alert and interactive but extremely painful on palpation of the abdomen, hunching and crying when touched. Kirsty didn't feel he was constipated. He was very lean and dehydrated. Being so young, Kirsty was concerned at his level of pain so he was admitted for Intravenous fluids, pain medications and xrays to determine the cause of his pain.



Plain radiographs didn't show much initially so we went straight into contrast studies, administering barium orally. The xrays looked pretty and we had a hunch he either had an intestinal foreign body, an intussusception or severe gastroenteritis. The pain relief we had administered hadn't really settled him at all. His blood testing revealed an anemia and an inflammatory response.

After close consultation with the owners, Kirsty felt it the right option to anaesthetise Moose and have a look inside to see what was going on. She didn't feel he was improving and that it wouldn't be right to wait another 24 hours.



On surgical examination, Moose was diagnosed with a jejunojejunal intussusception – this is where an inflamed section of bowel has slipped inside another segment of bowel (prolapse), effectively obstructing and restricting the movement of ingesta through. This can happen in any part of the gastrointestinal tract. It is more common in younger animals and often occurs in association with a worm burden, recent diarrhoea, a foreign object in the gut, intense gastrointestinal contractions or recent bowel surgery. Moose did have Giardia as a young puppy and was treated for this.



Gastrointestinal intussusceptions are serious with severe complications if not corrected surgically. These can be electrolyte imbalances, severe dehydration, death (necrosis) of bowel tissue due to constriction of the blood supply and severe toxemia. Clinically these dogs present with bloody diarrhoea, straining to pass faeces, weight loss, occasional vomiting and loss of appetite.

Luckily for "Moose" our vet Kirsty was onto it late on a Saturday afternoon. Waiting another 24 hours for surgery could have been too late for Moose. Kirsty easily reduced the prolapsed bowel and checked the entire gastrointestinal tract for any other abnormalities. The bowel looked essentially healthy. Kirsty biopsied a piece of bowel

tissue just in case there is an underlying cause as it why this occurred. We are still awaiting these results.

Moose has recovered very well from his big ordeal. He needed to spend a few nights at our After Hours clinic for around the clock monitoring, basically due to him undergoing major surgery at only 13 weeks of age. He was discharged on pain medication, antibiotics

and gut protectants. We are awaiting bowel biopsy and fecal testing results to see if a cause can be attributed to the intussusception. He's back on his food, maintaining his weight and healing well. He's simply adorable and very huggable.

Well done Kirsty for another great surgical success. Steve and I are very proud of our staff, always going the extra mile for their patients, regardless if these patients are seen over a weekend or late at night.

Dr Michele McMaster

**OPEN 7 DAYS**

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