Patch's story



Head Veterinary Nurse, Mari Griffith RVN, wanted to share with you Patch's story...

This case relates to an RSPCA case and as such may have details and photo's that you may find distressing, however it has a very happy ending.

On the 30th December 2016 at 8pm two ladies walked in carrying the apparently lifeless body of what looked to be a Staffordshire bull terrier. I

was on duty with one of the vets and we both took one look at him and sprang into action. Upon first examination Patch appeared extremely dehydrated and severely anaemic. He was covered in his own faeces, and all the pads on his feet had burns from being left in his own urine/faeces. Patch had a very full bladder (we had to empty this manually) and was unable to stand up and support his own weight. Anything Patch tried to do exhausted him, it left him breathless and with a racing heart. We estimated that for his frame and size he should weigh anywhere in-between 17 and 21Kg – Patch weighed in at 10Kg. We immediately put him on to intravenous fluids to try and combat the dehydration and to help support his weakened state. We ran some blood and urine tests for which we were able to get almost immediate results using our in house laboratory. The most significant finding at this time was the extent of Patch's anaemia. We measure how anaemic our patients are using a test called a PCV (packed cell volume) this measures the volume of blood cells circulating within the body – normal parameters for dogs are 35-55% - Patch's levels were 11%. He was hypothermic with his temperature at 36 degrees Celsius (normal is roughly 38.5-39.5). Things were looking grave and there was discussion about euthanasia as he was so poorly. I asked the vet to give me a chance to get him through the night and if he was no better by the morning then we could re visit the option – I had a tough job ahead of me!



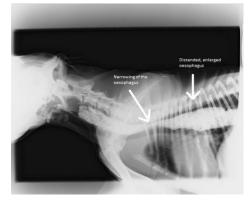






I set about cleaning the worst of the faeces off Patch but without causing further hypothermia, and sorted him out a kennel where he could begin his recuperation. He needed warming up and we needed to begin the lengthy process of building him back up. I spent the next hour warming him up with a combination of an electric heat mat, an intravenous fluid warmer (so the fluids we were giving him were warming him up from the inside out) and I made several 'hot hands' (disposable gloves filled with warm water). Pretty soon he was no longer shivering from the hypothermia. Next was the re-introduction of food. This is not as straightforward as just allowing him to eat a bowl of food straight away, as patients that have been starved for a prolonged period can go into shock if they eat too much too quickly (this is called re-feeding syndrome). I therefore had to feed Patch tiny amounts often in order to get the nutrition in to him. All was going well and Patch seemed to be becoming stronger and by the following morning he was more alert but still unable to stand unaided and definitely couldn't walk. We repeated the PCV and it was 13% which was encouraging. It seemed however that there was a nasty surprise waiting to try and catch us out. The evening of the 31st I was encouraging Patch to eat slightly larger quantities and he was showing more interest in doing so. I put a small bowl full of larger chunks into his kennel and left him to enjoy his dinner, however I soon realised that Patch was choking on his food, he had a mouth and throat full of impacted food and so was unable to breathe and had started to become cyanotic (blue tinge to his mucous membranes due to a lack of oxygen) I had to clear his throat out by hand to enable him to breathe, no mean feat when a Staffie is fighting for breath, thankfully I had just caught it in time. It seemed that this was more than a simple case of starvation.

We took x-rays of Patch's Head and neck to check for any deformities/abnormalities. Using a contrast medium we were able to highlight that Patch did have an anatomical problem, he had megaoesophagus - this is a condition in dogs where peristalsis fails to occur properly and the oesophagus is enlarged. Normally, when an animal's oesophagus is functioning



properly, it acts as a muscle and pushes the food down and into the stomach, however in affected patients the oesophagus is like a deflated balloon. It collects food and water until it can take no more, at which point the dog regurgitates all that he has just swallowed. This is not a good diagnosis as dogs will often die as a result due to being unable to take on an adequate level of nutrition or due to become excessively dehydrated. We did some further blood testing to ensure that there was no underlying disease process that was

contributing to the megaoesophagus, these all came back clear which meant we needed to find a way of ensuring that Patch was adequately fed and watered. I had previously heard about Bailey Chairs being used in the United States to try and help with feeding patients with megaoesophagus so I started doing some research into them to see whether they would be of any help for Patch. Help came in the shape of Martin, our long suffering handyman. Martin came and listened to my plans and measured Patch up for what would be a rough prototype. In regards to Patch's hydration levels I was concerned about

syringing liquid into his mouth as he could breathe it in which could have lead to aspiration pneumonia so I wondered if I could solidify his water somehow. I took to making jelly water cubes for him, this consisted of mixing water with a little chicken stock, for flavour, and some gelatin powder into icecube trays and refrigerating them overnight, Patch was able to tolerate these and seemed to enjoy them. By the following morning Martin had built the bailey chair and Patch seemed to fit in there well.



I started to feed Patch four times a day with small 'meatballs' of dog food, these were made from puppy biscuits soaked in water and then blended so that it was smooth, this was rolled into golf ball sized quantities. Patch was able to 'swallow' these whole and aided by gravity they would travel down into his stomach instead of sitting in his oesophagus. All was going well and Patch was able to keep these down as long as he was kept upright for long enough after feeding. Within a week Patch had almost gained a kilogram in weight and was able to support his own weight and take a few steps outside to allow him to wee unaided, this did leave him exhausted however, he had a lot of energy to regain. It seemed we had found the ideal way to allow Patch to be given the vital nutrition he needed. Amazingly after a few weeks it became apparent that Patch

was able to drink liquid without it needing to be gelatinised, an enormous step forward. Patch did develop two further problems, he came down with demodicosis (mange) which required weekly bathing in a medicated solution, and a persistent diarrhoea - he tested positive for campylobacter — a bacterial infection that is transferrable to people — this meant a long course of antibiotics and isolation nursing to ensure it wasn't transferred to staff or other patients. Eight weeks on from admission Patch was weighing in at 15.3Kg and was regaining his energy and personality. He was drinking water without any issues and was enjoying short walks and short periods of playing with a kong toy and a football. It was time for Patch to leave us so that he could find a new home and owners, much to our sadness, we had all become attached to him. Patch was transferred to the Southridge Branch of the RSPCA, along with his bailey chair. Within a few weeks we received news that Patch was lucky enough to have found a new home, and even better, his megaoesophagus had resolved — this is a rare occurrence and we were all thrilled to hear the news that he would no longer require feeding in an elevated position in his bailey chair. In July of this year Patch's new owner was kind enough to bring Patch to visit us so that we could see how he

had improved since leaving us.



Patch now weighs 22Kg and is full of energy, he loves swimming and still loves playing with balls. It is fair to say that Patch has made a full recovery and has settled into life in his new home with his mum Lulu, other dog friends and horses to play with.