

Canine Idiopathic Megaesophagus

Thank you for your interest in our new findings in canine idiopathic megaesophagus with a subpopulation of these dogs affected with a treatable form of the disease (LES achalasia-like syndrome).

Prior to recommending treatment, we must first perform a videofluoroscopic swallow study (VFSS). This procedure is similar to an x-ray picture; however, it is a video that allows us to see liquid and food that is mixed with contrast as it is swallowed, and then as it moves through the esophagus and into the stomach. This helps us to determine why dogs are having swallowing disorders.

Our protocol uses specific types of liquids and food with particular types of contrast while the pet is allowed to feed unrestrained in a special kennel for fluoroscopic monitoring. The kennel permits the dogs to stand upright as they would when they normally eat and drink. The finding of LES achalasia requires adequate contrast and swallowing attempts and capture of the video as the food is moving from the esophagus to the stomach. We cannot interpret results of contrast studies that have not been performed here at the University of Missouri, as the protocols are different and we can't ensure that the footage noted critical events. To be satisfied with a diagnosis and move forward to the first treatment, we need to evaluate your dog here at the MU Veterinary Health Center. If we confirm that your dog has treatable canine idiopathic megaesophagus, the next step is transient treatment, which involves an intervention (either with a medication called sildenafil that needs to be given for four to six weeks or with a procedure under general anesthesia involving injections of Botox and ballooning of the lower esophageal sphincter) to assess whether there is clinical improvement. Your clinician will discuss which of those interventions is recommended after reviewing all the medical records, performing a physical examination, and seeing the results of the VFSS.

In either scenario, to determine if the intervention is successful, there must be a follow-up VFSS in four to six weeks. If there is good clinical improvement and we can document beneficial fluoroscopic changes, we will discuss the potential of a more permanent surgical procedure. Please be aware that while we have seen many dogs with dramatic improvement with this surgery, we cannot expect a complete cure. Our goal is to improve your dog's quality of life, promote an ideal body weight, diminish number of episodes of regurgitation, and reduce the risk of potentially dangerous aspiration pneumonia. If you would like to set up an initial appointment for a

University of Missouri Veterinary Health Center 900 E. Campus Drive Columbia, MO 65211 573-882-7821 vhc.missouri.edu consultation, please call (573) 882-7821. Our Call Center staff can schedule your appointment.

For the initial visit and a VFSS, the cost is approximately \$600 to \$800.

Surgery, if indicated, would cost an additional \$3,000 to \$4,000 (assuming no complications).

What to expect during your dog's initial appointment:

Plan for a one to two day stay (the second day if the intervention requires general anesthesia). Withhold food from your dog for 24 hours prior to the initial appointment. If your dog is receiving sildenafil, this must be discontinued at least two days prior to the appointment. This is necessary to determine if your dog has the clinical condition called LES-achalasia that may ultimately be amenable to surgery. Your dog may drink water and take other medications with a small treat.

Day 1:

Consultation/Exam and VFSS. Possible discharge if a sildenafil trial is initiated.

Day 2:

Anesthesia/Balloon/Botox for a subpopulation of dogs in which this intervention is selected by your clinician. This is not a "permanent" fix to the condition, but a means to assess response and likelihood your dog would benefit from surgery.

Day 30-45:

Return for a VFSS. Withhold food from your dog for 24 hours prior. If your dog is receiving sildenafil, do NOT administer the morning dose, but bring the medication with you so we can give the sildenafil exactly one hour before the VFSS.

Please be aware that we are a 24/7 emergency hospital. If an emergency case comes in, we may have to change or delay the plan without advance notice.

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