





FALL 2021 NEWSLETTER

VRCC WELCOMES THE FALL SEASON!

After a super busy and fun-filled Summer, we are ready for Fall here at VRCC! Bring on the beautiful Colorado colors, the extra cuddles with the furries, and the delicious smells of the season!

This issue of the VRCC newsletter highlights our Oncology department, one of our amazing veterinary technicians, and has a case study written by one of our technicians.

It also provides up-to-date information and news about the hospital, including a Dermatology clinical trial for dogs with atopic dermatitis.

Learn more about Jayne, one of the fabulous CVTs with the VRCC Cardiology team, in the Staff Highlight section just to the right on this page.

Sadie Watson, one of technician Supervisors with VRCC Oncology, presents this edition's case study about Teagan, a dog with a pituitary carcinoma.

Learn more about VRCC Oncology & Radiation Therapy in the Specialty Highlight Section below.

With warm & cozy wishes this fall season,
Your VRCC Team



SPECIALTY HIGHLIGHT: ONCOLOGY

VRCC Oncology is a comprehensive cancer center for your patients. We offer both medical oncology and radiation therapy treatment options to patients and their families.

Receiving a cancer diagnosis of a beloved pet is scary and can be difficult to navigate. At VRCC, the Oncology Team will work with each pet owner and their pet, to develop both an individual diagnostic plan and treatment plan that best suits them. Treatment options vary from palliative to definitive intent and are developed after thorough conversation and understanding of client goals.

Specialty Highlight . . . Continues on page 2

STAFF HIGHLIGHT: CARDIOLOGY

Jayne Lennan, CVT Cardiology

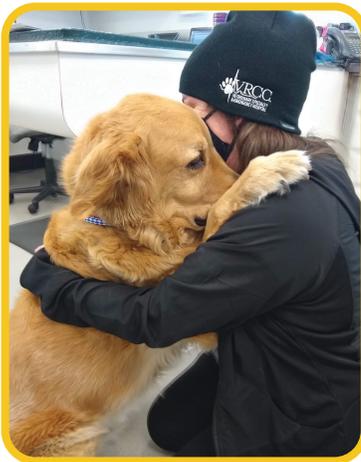
Jayne received her AAS in Veterinary Technology at Front Range Community College and completed an internship at CSU Veterinary Teaching Hospital. As a young child, Jayne loved animals. She began volunteering at her local humane society and veterinary hospitals to gain



experience in the field that she would later choose as her career. After completing her schooling, she went on to emergency medicine where she eventually began working at VRCC patient care in July of 2018. She later found her primary interest in Veterinary Cardiology. She has been with the Cardiology Service at VRCC since September of 2019. Jayne loves getting to know our patients and helping guide our clients in their pet's healthcare of course, their cuteness!

Jayne was raised in the gorgeous Rocky Mountains. She grew up in Eagle, Colorado and enjoyed skiing and snowboarding since she was three years old. She often refers to Beaver Creek as her "home mountain," as that was her favorite place to hit the slopes since her youth. Since moving to Denver, when Jayne isn't working, she enjoys continuing to explore the beautiful state of Colorado, snowboarding in the winter and hiking in the summer. When she can't be outside, she loves reading, drawing, painting, discovering new music and playing video games. Since graduating high school, Jayne has had Milo, the now 9 year old Corgi miniature Australian Shepherd mix by her side. She also had three cats at home, Lucipurr, Khaleesi, and Oliver.

VRCC Cardiology can be reached by calling 303-874-2094, or emailing cardio@vrcc.com.



One of our Oncology patients, Charlie, giving CVT Ally a hug

The oncologists work closely with other specialties within VRCC including Cardiology, Dermatology, Emergency & Critical Care, Internal Medicine, Neurology, Ophthalmology, and Surgery. VRCC staffs two board certified anesthesiologists available to all VRCC patients, and will often help out with radiation patients who will have multiple anesthetics for their treatments. The VRCC Oncology Service is open Monday through Saturday from 8am – 4pm, with new patient appointments available on all open days. Radiation treatments are ongoing Monday through Friday, with new radiation appointments offered Monday through Thursday. The team of oncologists offer phone consultations to veterinarians who have questions about a case, or are planning to refer a patient. When you call for a consult, a message will be taken for the specialist to call you back - please make sure to leave an after-hours number in addition to your daytime phone number. VRCC Oncology & Radiation Therapy can be reached by phoning 303-874-2054 (Medical Oncology) or 303-874-3225 (Radiation Oncology), and by emailing oncology@vrcc.com.



CLINICAL TRIAL ALERT

VRCC Dermatology has enrollment opportunities into a clinical trial for dogs with atopic dermatitis. The dogs must not have received Cytopoint at any time in the past. After initial review of the medical records, the screening visit and/or study visits (once enrolled), plus study medication will be paid for by the clinical trial. The owners – and referring veterinarians are also potentially eligible for a study stipends/payment.

Please email lmessinger@vrcc.com for more information, or call VRCC Dermatology directly at 303-874-2078.

VRCC NEWS & ANNOUNCEMENTS

 Is your hospital set-up in the NEW rVetLink portal to get patient records? As you are aware, we converted to Cornerstone at the end of August, so the rVetLink portal got a re-boot! You should have received a welcome letter with a new username and temporary password the last week of August. Make sure to add vrcc@vrcc.com to your safe senders list. If you did not receive your new username, or are unable to login to the portal, please reach out! You can email our referral liaison, Ruby Post at rpost@vrcc.com, or call her at 303-874-2053.

 October 17th - 23rd is National Veterinary Technician Appreciation week! At VRCC, we are blessed to have an amazing team of technicians and assistants! Veterinary technicians are a vital part of our industry and do so much for our clients and patients. "THANK YOU!" to all Colorado veterinary technicians and assistants for all of your hard work!

 All VRCC Specialty Departments will be closed on Thursday, November 25th in observance of Thanksgiving. Specialty departments will have limited hours on Black Friday, please call for availability. VRCC Emergency is available 24/7/365.



CASE STUDY: RADIATION ONCOLOGY



Sadie Watson, CVT
Oncology Supervisor
VRCC Radiation Oncology

Pituitary Carcinoma

Teagan, a 9 year old, female spayed, Golden Retriever, presented to the radiation oncology service at VRCC on May 20, 2021 after meeting with the Aspen Meadow Neurology service for evaluation of behavioral changes. These changes included: lethargy, excessive sleeping and loss of enthusiasm. Teagan had also begun to hold her head and tail low. As time passed, these signs progressed to circling and overall dull mentation.

An MRI revealed a large contrast enhancing mass in the area of the pituitary, which is consistent with pituitary carcinoma. With this finding, Teagan was given injectable Dexamethasone and started on oral Prednisone. Her owners reported mild improvement with these medications.

Pituitary tumors are often benign (pituitary adenomas), however, Teagan's tumor had an aggressive tendency suggestive of a carcinoma. Pituitary tumors can cause the endocrine disorder, Cushing's disease, and neurologic symptoms such as changes in behavior/mentation, seizures, circling and head tilts. These symptoms result from pressure a pituitary tumor puts on the surrounding brain tissue. In Teagan's case, the tumor was non-functional.

These tumors are often diagnosed with advanced imaging of an MRI or CT scan. Biopsy is rarely used to confirm diagnosis because these tumors can be invasive to the surrounding tissues and can carry a high risk of side effects. Pituitary tumors are generally regarded as incurable, unless surgery (hypophysectomy) is performed. However, they can be very well managed with longevity if treated with radiation therapy. The average survival time with conventional

radiation therapy is 2 years. The goal of this therapy would be to stabilize the tumor and in Teagan's case, improve neurologic signs. This treatment protocol consists of fractionated radiation delivered daily (M-F) for 20 total fractions, and requires a radiation planning CT scan. With this treatment plan, of the patients with severe neurologic signs, 15% will pass away during the course of treatment. Of the patients who complete therapy, ~90% will experience improvement in neurologic signs within weeks to months following therapy (50% will have improvement during treatment).



Teagan under anesthesia;
positioned for radiation treatment

For patients and families where conventional radiation therapy may not be compatible, stereotactic radiation therapy is a reasonable alternative. Stereotactic radiation is a high precision method of radiation that can be delivered in a shorter period of time. This is a viable option for patients who may not be candidates for daily anesthesia, however, literature suggests a survival time of 10 months vs. the 2 years with conventional radiation.

Side effects of conventional radiation can include:

Early-Delayed: In the first 5 months following treatment, there is risk of worsening neurologic signs. This is typically mild-moderate and manageable with symptomatic care.

Late: In ~2% of patients will develop progressively worsening, generally untreatable, and irreversible neurologic deficits.

Teagan continued to respond to steroid therapy and her family chose to pursue conventional radiation therapy. A radiation planning CT was completed and a plan was made to have Teagan stay in the hospital throughout treatment to monitor for seizures. As we began treatment, Teagan was very depressed, she was not eating well on her own and needed assistance walking outside to eliminate. She required additional nursing care and more frequent walks to maintain muscle mass and mobility. Her anesthesia protocol consisted of Propofol, Isoflurane gas and was given Mannitol as needed. Her blood pressure and ETCO2 were closely monitored. At fractions 10-14 we began to see improvements in Teagan's mentation, and she became more eager to eat on her own. As she progressed through her treatment plan, she began to walk on her own more, her circling decreased and she began to show interest in her surroundings. In her third week, she became acutely lethargic and had developed aspiration pneumonia. Her treatment was delayed for 2 days and antibiotics were started. When her lethargy had improved, treatment was resumed.

Teagan completed all 20 fractions of radiation without major complications. We have seen her for post radiation evaluations 3, 6 and 9 weeks after completing her treatment protocol and she has continued to do well. We have worked with her Neurologist during this time to determine her Prednisone dose and taper.



Sweet Teagan when she came in for a recheck exam post radiation treatment.