

Necrotizing meningoencephalitis in a Pekingese with congenital portosystemic shunt

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Signalment: A 14-month-old, male, Pekingese was presented to Royal Animal Medical Center with a 1-day history of acute urethral obstruction.

Results: Abdominal radiographic findings revealed urethral calculus and microhepatia. Clinicopathologic findings revealed a microcytic and hypochromic anemia, low BUN, hypocholesterolemia, hypoalbuminemia, and ammonium urate crystalluria. Fasting and postprandial bile acid levels were 41.8 $\mu\text{mol/L}$ and 194.5 $\mu\text{mol/L}$, respectively. Shunt vessel was detected by abdominal ultrasound. After Cystotomy and placement of Ameroid constrictor, he has been in a coma and status epilepticus over 4 days period. He was initially treated with phenobarbital. The dosage of phenobarbital was increased on the base of serum concentration. But he continued to have a seizure once a week, and the frequency of seizure is gradually increased. On 8 months after surgery, magnetic resonance (MR) imaging revealed hyperintense on T2-weighted images and hypointense on T1-weighted images in the lesion of brain. Finally, he died. The lesions were pathologically confirmed as a necrotizing meningoencephalitis.

Clinical relevance: This case report suggests that necrotizing meningoencephalitis may be related mainly to status epilepticus and partially to coexisting congenital portosystemic shunt.

Key words: necrotizing meningoencephalitis, status epilepticus, portosystemic shunt, dog.

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