

Calcinosis cutis in a dog with Iatrogenic Hyperadrenocorticism

Sunhwa Ji, Mangil Han, Jaehee Lee, Insung Jeong*

*Department of Veterinary internal medicine
Royal Animal Medical Center, Seoul, Republic of Korea*

Signalment: A 6.2 kg, 5-year-old, intact male Shih-Tzu was admitted with skin calcification and alopecia to Royal Animal Medical Center. He has a 3-month history of treatment of otitis externa with prednisolon.

Results: On physical examination, moderate multifocal areas of alopecia and symmetrical circular calcification were observed on pre-auricular, shoulder, axillary, inguinal, perianal region. Skin biopsy specimens were taken from 2 sites along the back. Histopathology revealed calcification. Biochemical profile were elevated alkaline phosphatase (ALP), alanine transferase (ALT), aspartate transferase (AST) and r-GTP. The urine specific gravity was 1.010. Baseline cortisol levels of this dog was at the lower end of the reference range and post-ACTH cortisol was no response to adrenocorticotrophic hormone (ACTH) stimulation. It was diagnosed as iatrogenic hyperadrenocorticism on the basis of history, physical examination, histopathology, blood examination, urine examination, adrenocorticotrophic hormone (ACTH) stimulation test. The dog was treated with medical management of corticosteroid withdrawal, regular ear canal cleaning, and antibiotics. The time to show initial improvement of clinical signs after corticosteroid withdrawal was 7 days, and the signs was almost remission in 16 weeks.

Clinical relevance: This case report suggests that serious disease such as calcinosis cutis could be resulted from long-term steroid therapy and the long-term steroid therapy needs more caution for serious complications.

Key words: iatrogenic hyperadrenocorticism, calcinosis cutis, dog

* Corresponding author: jung4545@korea.com