

Rabbit dyspnoea



Lucia Sanchini, from Batt Laboratories, presents a clinical case of a rabbit with dyspnoea.

The patient

Rosa, a 5-year-old female neutered Angora rabbit, presented with an episode of acute dyspnoea after a jump. Rosa had a 20 day history of tachypnoea and an occasional cough, previously treated with antibiotics

with no improvement. In the last week, she developed exophthalmos.

Diagnostic work-up

Left lateral and dorsoventral view chest X-rays revealed a 4 cm mass in the cranial mediastinum displacing the trachea dorsally. Ultrasound detected a dishomogeneous, hypoechoic mass cranial to the heart. A fine-needle aspiration was performed.

Differential diagnoses for mediastinal masses

- Thymoma
- Mediastinal lymphoma
- Mediastinal abscess

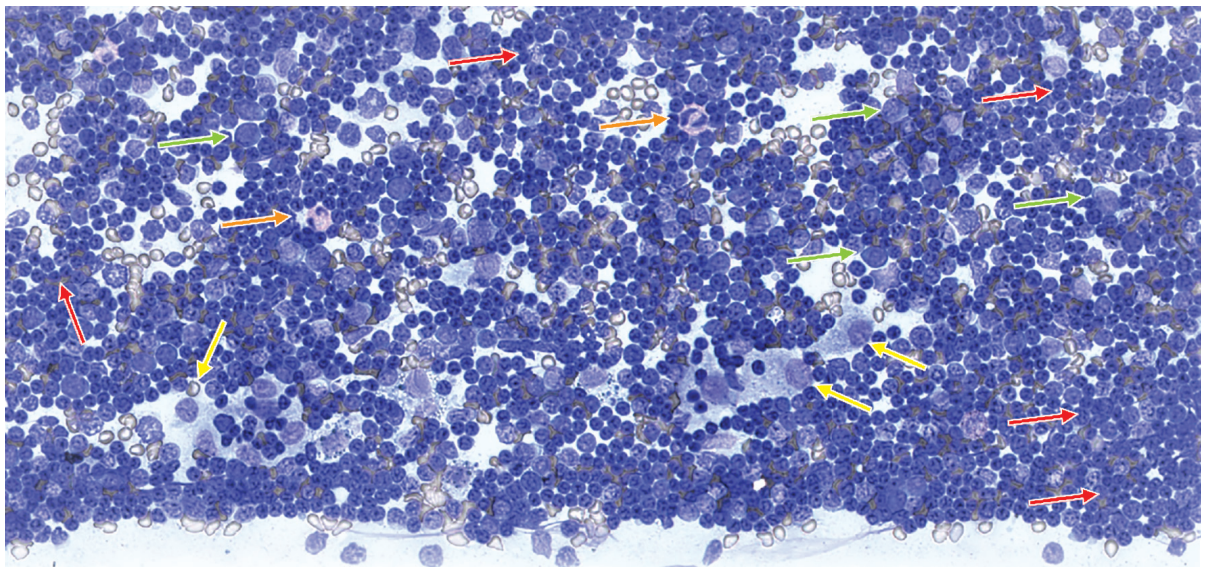


FIGURE 1: Fine-needle aspirate from a mediastinal mass of a rabbit (Wright-Giemsa, 20x magnification). Polygonal epithelial cells (yellow arrows); small lymphocytes (red arrows); intermediate lymphoid elements (green arrows); heterophils (orange arrows).

- Thymic carcinoma
- Thymic hyperplasia

Cytology findings

On a basophilic background with moderate haemodilution, there are numerous large cohesive clusters of polygonal epithelial cells (yellow arrows), with abundant basophilic cytoplasm, round to oval nuclei with finely granular chromatin and multiple round nucleoli. Anisocytosis and anisokaryosis are mild to moderate. High numbers of small lymphocytes are also noted (red arrows) with lower numbers of intermediate lymphoid elements (green arrows). Rare heterophils (orange arrows) are occasionally seen.

Cytological diagnosis

- Thymoma

About thymoma

Thymoma is a rather uncommon neoplasia affecting mature rabbits. It is a slow-growing tumour; however, being a space-occupying lesion, it may cause severe clinical symptoms such as dyspnoea, exophthalmos, pleural effusion or oedema. Metastases have been rarely reported and may involve the pleura or other thoracic organs. Surgery and radiation therapy are currently the preferred choices of treatment. Reported survival rates after surgical excision vary from 25% to 50% due to perioperative and postoperative complications. Thymoma is sensitive to radiotherapy and a reduction in size has been reported even after a single treatment. Therefore, it might be chosen instead of surgery with locally invasive masses, critically ill patients or as follow-up treatment after excision. However, radiation-induced complications such as alopecia, pneumonia, pulmonary fibrosis and cardiac disease may occur.

Good to know

- In rabbits, the thymus does not regress with age and it occupies a large portion of the anterior thorax
- Bilateral exophthalmos is due to chronic or intermittent obstruction of the vena cava leading to engorgement of the retrobulbar vascular plexus
- Reported paraneoplastic syndromes associated with thymoma include exfoliative dermatitis, hypercalcaemia and haemolytic anaemia 📄

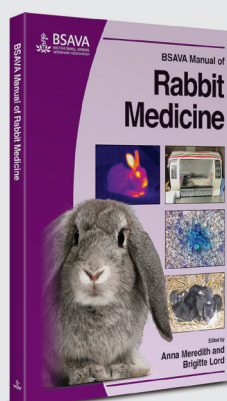
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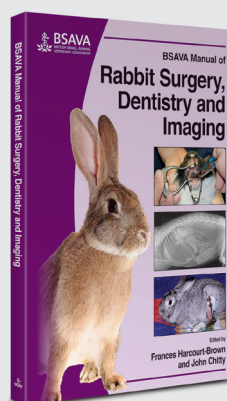
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