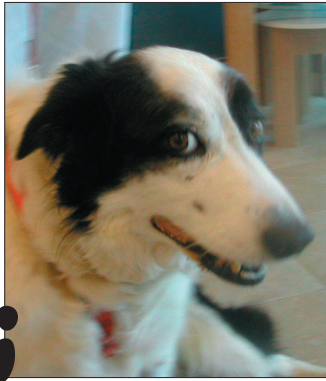




## Case Report

Dr. Lauren Chattigré



“Juniper” FS Border Collie / DOB: October 2000

Cranial cervical malformations and episodes of severe neck pain.

**Symptoms:** RF lameness since a puppy. Episodes of neck pain began summer 2004, becoming much worse in severity and frequency by spring 2005. **Rads 5/05:** moderate spondylosis T12-L2, mild remodeling R humeral head, mild bony proliferation and remodeling R elbow, mild remodeling L hock, mild remodeling middle phalanx P2 RF and P2&5 LF. **MRI 5/05:** osseous changes C1 (malformed, compressed craniocaudally, roughened irregular margins, proliferative bone edges, abnormal articulation with malformed occipital condyles) and C2 (dens malaligned projecting R of midline with adjacent associated proliferative tissue), cranial cervical spinal canal stenosis and central spinal cord inflammation. **Rx:** prednisone, codein, 6wks cage rest, neck brace.

Surgical exploration with bone and synovial membrane biopsies were declined due to potential risks. Juniper would not tolerate the neck brace and was confined to a room rather than a kennel. She presented for her first CAVM consult on July 12, 2005. Off prednisone but still on codein, she was having severe episodes of neck pain several times a day or continuously throughout the day (sometimes with sudden hindlimb collapse or twirling to the left while crying), held her head low and to the left, and was afraid to go outside with extreme anxious sensitivity to noise and other stimuli. She couldn't rest, and sometimes just stool quivering. Treatment was begun with acupuncture (initially 2x/wk\*), nutraceuticals for pain/inflammation and anxiety, a glandular for ligament support, and homeopathic remedies for her overall physical and mental state. After two acupuncture treatments she was much improved, having only a couple of minor pain episodes after being very active; she was off codein, and was back to exploring her surroundings. By early August she was doing very well with improved neck mobility and no further crying episodes despite being more playful. In mid-August she ran head-on into a door, was very painful, and was given a 2wk prednisone taper and methocarbamol as needed. There was gradual improvement until mid-September when she whipped her head around after getting stung by a yellow-jacket; by the end of the month she was doing well again with only occasional symptoms. That fall Chinese herbs were added for general stiffness as cooler weather ensued. Only 5 brief pain episodes were noticed through the end of 2005, and only 6 were reported between January and July 2006. Since then, the client has not seen any more episodes of pain or crying, nor has she seen any recurrence of her RF lameness that she'd had since she was a puppy. She continues to receive acupuncture for routine maintenance.

\*Acupuncture schedule = 2x/wk 7/05-11/05, 1x/wk 12/05-2/06, 2x/mo 2/06-3/06, 1x/mo 4/06-2/07, and once this April. Her early schedule was more intensive than usual due to her extreme situation.



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