LADIS Case of the Month
April

Provided by Dr. Laura Axiak and Dr. Natasha Werpy, Dipl. ACVR
Signalment & History

- 9 year old Hanoverian Gelding
- History
  - Grand Prix Dressage Horse
  - Poor Performance
  - Left Hind Ligament Injury 3 months Prior
Diagnostic Imaging

- Horse referred for whole body nuclear scintigraphy with soft tissue phase of proximal metatarsal region
Soft Tissue Phase
Proximal Metatarsal Region
Bone Phase
Front Feet
Carpi
Hind Feet
Tarsi
Palmar and Plantar Feet
Shoulders and Stifles
Lateral Spine
Cervical Spine
Dorsal Spine
Nuclear Scintigraphic Findings
Increased Radiopharmaceutical Uptake of the Following Areas:

- Soft Tissue Phase of Proximal Metatarsal Region
  - No abnormalities identified
• Bone Phase
  • Left Front Fetlock, Dorsal Aspect, Moderate and Focal
• Navicular Bones:
  • Right Fore, Mild and Focal
  • Left Fore, Mild and Diffuse
Front Feet
Palmar and Plantar Feet
• Bone Phase
  • Proximal Metacarpal Region, Right and Left Fore, Focal and Moderate
  • Mid Metacarpal Region, Medial Aspect, Moderate and Diffuse
• Bone Phase
  • Hind Fetlocks, Dorsal Aspect, Left Hind > Right Hind, Moderate and Focal
Hind Feet
• Bone Phase
  • Left Tarsus, Focal and Moderate, Distal Tarsal Joints, Region of Central Tarsal Bone
• Bone Phase
  • Dorsal Spinous Processes at the Level of the Withers, Mild and Diffuse, Several Sites Affected
  • Vertebral Bodies, Ventral Aspect, Caudal to the Withers, Moderate and Diffuse, Several Sites Affected
Lateral Spine
• Bone Phase
  • Cervical Articular Facets, Left C6-C7, Mild and Diffuse
Cervical Spine
Dorsal Spine
• Bone Phase
  • Right Sacroiliac Joint, Mild and Diffuse
Pelvis
Impressions

• Radiographs recommended for:
  • proximal aspect of the right and left third metacarpal bones
  • vertebral bodies of the thoracic spine caudal to the withers
  • left tarsus
• Additional areas that should be evaluated, and further imaging could be considered if clinically indicated:
  • right sacroiliac joint
  • caudal cervical spine
  • left front fetlock
• These findings should be clinically correlated.
Further Imaging Workup

• Radiographs of Thoracic Spine