



Palm Beach Veterinary Society NEWS

Palm Beach Veterinary Society, Inc

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FALL 2022

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Dr. Leanne Browne-Feldman

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Cushing Syndrome
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NEXT MEETING DATE

November 3, 2022

Location

**Mayacoo Lakes
Country Club**

Topic:

Solensia

6:30-9:30 pm

Entry Fee: Free to 2022 Paid
Members, \$150 Non-Member
www.pbvs.info/events

Vet Society Members

Dear Palm Beach Vet Society Members,

Happy Fall!!! Let the cool weather begin!! We are heading into the final stretch of the 2022 Continuing Education Lecture! November 3 (Solensia) and December 1 (Laverdia and Zenalpha). If you haven't heard about these new drugs (Solensia: Osteoarthritis Injection for Felines), Laverdia (oral canine Lymphoma therapy) and Zenalpha (A quick acting sedative for dogs with an analgesic effect).

As we head into the next year, we find ourselves winding down the year and all that it has brought us, left us and taken from us. This newsletter marks a year that the Vet Society continues to have no President filling the much needed seat of our Vet Society. So far, the responsibilities of the Society Board have been divided out amongst its current board members and we are all trying our hardest to maintain the Palm Beach Veterinary Society as you have known it in the past; being your voice at within the Washington and Tallahassee legislation and getting your voices heard, reaching out to various sponsors to help sponsor our dinner lectures, job postings, per-diem lists, recruit Continuing Education speakers, to include the required 'Laws and Pharmacy' lecture, going through the rigors of obtaining RACE approval of these lectures so that members can attend and maintain their veterinary licenses. We are a large community and large County with many veterinarians that together we have a strong voice in making decisions that would affect our practice (for instance; such as telemedicine). Many of us own our own practices and others work for corporate entities; these changes would affect us all. Many of us need a break and look to the Society for classified listings, updates on infectious disease outbreaks, and more... did you know the Vet Society also offers a yearly scholarship to UF Vet Students? The dissolution of our Palm Beach Veterinary Society would have each of you seeking elsewhere for all of the above.

As the days turn into months and now the months turn into a year and now moving into our second year without a President to lead this Society, we, as a Society and board members need to find someone to lead the association. Our incoming President would not be alone in their journey, as we have a very strong board with an obvious dedication to the veterinarians in Palm Beach County.

If you know someone that would be interested or if you are; please let one of on the board know and we can discuss it further with you.

Looking forward to seeing everyone at the upcoming meetings, have a safe Holiday Season!

Sincerely,
Karina Salvo DVM
Vice President



Karina Salvo, DVM



Palm Beach Veterinary Society, Inc.

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MEETING SCHEDULE - MARK YOUR CALENDAR

November 3, 2022

Solensia

1 hour RACE CE credit

December 1, 2022

Laverdia CA-1 and Zenalpha

Speaker: **Dr. Sam Gindezille,**

Professional Services

Veterinarian for Dechra

2 hours of RACE CE credit

Time: Buffet Dinner served at 6:30 pm

Lecture starts at 7:00 pm

Mayacoo Lakes Country Club

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This newsletter is published bimonthly by
Palm Beach Veterinary Society, Inc.
P.O. Box 211655
Royal Palm Beach, FL 33421

The PBVS newsletter is provided to PBVS members free of charge. **Membership is \$150.00 per calendar year.**

For more information about membership please contact: Dr. Leanne Browne-Feldman at secretary@pbvs.info To advertise in this newsletter, please contact Dr. Karina Salvo at vicepresident@pbvs.info.

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Join Us Today and Become A Member!

Thank you for taking an interest in our organization. At Palm Beach Veterinary Society, we strive to help and unite veterinarians who are dedicated in providing the best Animal care.

As a society, we provide a forum for veterinarians to further assist in the exchange of professional business relations and promote the exchange of professional information.

If you are a veterinarian and are interested in joining our society, please fill out the 2016 membership form on the last page.

Membership cost for the year is \$150.00

Membership begins on January 1st and ends on December 31st

VETERINARY MEETING & EXPO

SEE PAGE 9 FOR DETAILS

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To **TREAT** or **NOT** to **TREAT** Navigation the gray area of *Cushing Syndrome*

A veterinarian shares her approach to diagnosing and treating this puzzling disease.

By Bob Alaburda, Senior Editor DVM360)
dvm360 January 2022, Volume 53, Issue 1



Diagnosing Cushing syndrome can be frustrating. Speaking at the Fetch dvm360® Conference in San Diego, California, Kelly Cairns, DVM, MS, DACVIM (SAIM), vice president of Medical Excellence and Education at Thrive Pet Healthcare, explained that clinicians rarely encounter a textbook case of Cushing syndrome. Rather, they are often stumped by what she terms “the elusive gray-zone dog,” which is difficult to diagnose and plan treatment for.

Veterinary professionals are well versed in how to approach a dog showcasing typical signs of Cushing syndrome, but many struggle to determine the best course of action when endocrine diagnostic screening tests come back inconclusive or confusing. Cairns,

who is based in Naperville, Illinois, reviewed diagnostic and treatment options for the clinician, as well as potential complications and the client education aspect of the condition, during the session.

Cairns said success in handling “borderline” Cushing syndrome cases comes down to 4 key areas: learning how to use and interpret the available diagnostic tests accurately and efficiently, understanding the complications of Cushing syndrome, creating action plans based on predetermined criteria, and implementing a comprehensive client education communication strategy to meet expectations. By analyzing a case through the lens of these 4 principles, clinicians can better determine a course of action when dealing with

There is no one-size-fits-all solution to diagnosing and treating Cushing syndrome.

atypical or “gray area” signs of Cushing syndrome.¹

The decision to treat or watch and wait

“It comes down to treat or not to treat,” said Cairns. “Once you think you have a dog with Cushing [syndrome], that is the question.”

Cairns recommended that when determining whether to begin treatment with traditional pharmacologic therapy with trilostane (Vetoryl; Dechra Veterinary Products) or mitotane (Lysodren; HRA Pharma Rare Diseases) for Cushing syndrome, clinicians should consider the following questions¹:

- **Are there symptoms affecting the patient’s quality of life?**
- **Are there symptoms affecting the pet parent’s quality of life?**
- **Are there complications that are concerning to the clinician?**
- **Will treatment improve quality of life for the patient and/or pet parent?**
- **Will treatment decrease risk**

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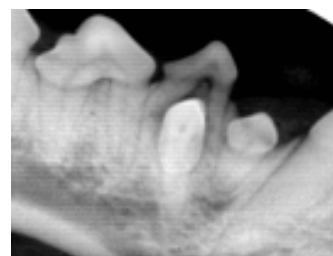
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To Treat or Not to Treat

Navigating the gray area of Cushing Syndrome



Continued from page 5

or severity of complications of the condition?

Cairns said that the decision to treat a patient with Cushing syndrome can vary on a case-by-case basis depending upon the above factors. She said that considering these factors are important in addition to diagnostics because often test results may only be clear cut for classic, textbook cases. With regard to reference ranges on diagnostics and the value of taking them in context with other information, Cairns said, "Those values were established 5000 years ago when we were only diagnosing dogs with Cushing [syndrome] that [look like the textbook presentation]."

Cairns spoke about what to do if a watch-and-wait approach is the best course of action for the patient. She advised, "At the very least, you want to address and treat any complications that currently exist, and you want to monitor for future complications that may arise."

Cairns also said that alternate therapy may be an option for those veterinarians and pet parents who are so inclined. The most common options

for these therapies include melatonin (3-6 mg orally every 12 hours), HMR lignans (10-40 mg orally every 24 hours) and/or SDG lignans (flaxseed hull, 1-2 mg/lb orally every 24 hours).²

She said that although there are many acceptable approaches, she prefers to monitor and recheck these patients frequently.

"I like to see these patients every 3 to 6 months...and I'm paying particular attention to these things on a physical exam: muscle mass, tone, orthoneuro, skin. And it's my touch base with the client," Cairns said.

Client communication and education

"More than almost any other disease, [client education about Cushing syndrome] is key," Cairns said. "We're not trying to give them a PhD in biochemistry, but they need to understand it so that they can understand the 'why' behind your asks of them."

Client communication and education are crucial in achieving optimal outcomes for the patient while setting and meeting client expectations. This means starting with the basics and explaining what

Cushing syndrome is, as well as teaching them the major effects of glucocorticoid hormones on the body. It also means making sure they're aware of the differences between annoying symptoms and serious complications so that they know when to seek help.

For pituitary-dependent Cushing [syndrome], Cairns had a stark recommendation: "I always say to the client, 'This means your dog has a brain tumor.' They need to hear that." This comment leads into a good news/bad news conversation with the patient.

"The good news is that most dogs don't die of Cushing [syndrome], studies show.... The bad news is that this is going to progress," Cairns said. "It's not goodbye, but the treatment is forever."

Cairns recommended considering handouts to support client education efforts. She also suggested have one or more technicians become the "Cushing Ambassador" for clients. These ambassadors can serve as the point person for conversations and client questions after the initial conversations with the veterinarian.

The key takeaway from Cairns' talk: There is no one-size-fits-all solution to diagnosing and treating Cushing syndrome. Multiple factors go into ensuring the case is a success from the standpoint of the patient's health as well as the client's expectations. When clinical diagnostic information doesn't provide a clear path forward, practitioners should be asking themselves these important questions to determine the best course of action for a particular case.

References

Cairns K. Is this Cushing's and do I care? Presented at: Fetch dvm360® Conference; San Diego, California. December 2-5, 2021.

Cairns K. Treatment option considerations for hyperadrenocorticism in dogs. University of Tennessee College of Veterinary Medicine. Updated January 27, 2016. Accessed December 3, 2021.

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