NOTAS E INFORMAÇÕES
NOTES AND INFORMATIONS

INTRA-LUMINAL FIBROSARCOMA IN THE CRANIAL VENA CAVA OF A DOG

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SUMMARY. The present study refers to a male animal from the canine species, of indefinite breed, about 12 years old, weighing 25 kilos, showing edema of the head, cervical region, forelimbs and sternal region. Clinical examination revealed a temperature of 39.5°C, bilateral purulent nasal discharge, mixed dyspnea, inappetence, and prostration; the animal had been treated previously with glicophysiological solution and Dexametason, showing no significative improvement. Observation of the edema’s localization led us to suspect the presence of an obstructive process at the cranial vena cava level. Radiographic examination, did not reveal the presence of tumor processes in the thorax entrance area, indicating the need of constrasting tests which were not performed due to the animal’s disease.

ANATOMO-PATHOLOGICAL EXAMINATION

The necroscopic examination showed general edema of the subcutaneous cellular tissue, more pronounced at the head and neck levels. In the cranial cava vein lumen near the heart’s base there was a whitish colored tumor formation, high to the touch, of fibrous aspect, strongly adhered to the vascular wall, measuring 4 x 2 x 2 cm and partially obstructing the vascular lumen. Attached to the neoplasia there, was a reddish colored trombotic formation, above the obstructed site. The left and right handed hearts showed a high degree of enlargement. The lungs showed hemorrhagic infarct of various sizes, located...
in the apical and diaphragmatic lobes. The other organs examined showed passive congestion and small hemorragies. Fragments of the various tissues were fixed in formol at 15 per cent, enclosed in paraffin, and cuts of 5μ were obtained and stained with Hematoxylin-eosin, Mallory's Trichrome, Wilder-Foot for reticular fibers and acid orcein for elastic fibers. Histological cuts of the tumor fragments showed a great number of cells resembling fibroblasts and fibrocytes, disposed in bundles that appeared cuted in several directions; among these cells numerous collagen and reticular fibers were observed. The cells showed intense basophilia, oval or roundish nuclei of several, sizes, with loose chromatin, showing one, two or more preminent nucleoli and countless normal and aberrant figures of mitosis, (figs. 3 e 4). It the pulmonar arterioles it was not unusual to see embolisms formed by neoplastic cells similar to those observed in the described neoplasia. The tumor was thus classified as a fibrosarcoma (Fig. 2).

DISCUSSION

There is no doubt that the location of the neoplasia histologically diagnosed as fibrosarcoma "was responsible for the appearance of the pronounced edema in the regions of the head, forelimbs, and sternum. Is should also be pointed out that secondary examinations, as simple radiography, blood and urine tests, gave no further contributions. The anatomopathological examination showed the presence of strongly adhered neoplasia to the cranial vena cava wall, histologically diagnosed as fibrosarcoma.

In our opinion the neoplasia was originated from the vascular wall since we have found no other neoplasia during the necropsy. The location is unusual, and as far as we know it have not been remarked to date in the veterinary literature. Our results agree to those described by several authors, fibrosarcomas seldom metastasizes. We would like to give special emphasis to the fact that notwithstanding the detachment of neoplastic cells, no metastasis development was noted.
FIGURA 1 — Oedema of the head and cervical region, extending to the fore limbs and sternum area.

FIGURA 2 — Fibrosarcoma (f) followed by trombotic formation, located in the cranial vena cava lumen (cc).
Figure 3 — Photomicrograph of fibrosarcoma area H & E Stain, x 160.

Figure 4 — Photomicrograph of the same fibrosarcoma area showed in fig. 3, x 400.
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