Presentations: Consider pyometra in ANY intact bitch or queen with nonspecific illness

1.) Sick intact older bitch (> 4 y) in DIESTRUS (influence of progesterone)
2.) Sick intact younger bitch, hx of injection w/ estrogens or progestins
3.) Sick intact bitch or queen, Hx of estrus in last 2 months

Other sx: Lethargy, depression, dehyd, anorexia, PU/PD, vom, +/- fever

Test of choice: Abdominal US (DDx large fluid-filled uterus vs pregnancy)
  • +/- Abdominal radiographs (but rads can’t Dx pregnancy if < 45 days)

Rx of choice: CLOSED Pyo = LIFE THREATENING surgical emergency

Supportive: IV fluids + Antibiotics (broad spectrum, bactericidal), +/- Pain mgt (ie: Buprenorphine)
Surgical: OVARIOHysterectomy (OVH)

Medical: Only w/ valuable breeding animal (PGF-2α + dopamine agonist or progesterone antagonist)
  • +/- Transcervical endoscopic cath. technique (TECT) hastens uterine evacuation (Dog)
Post- medical Rx, breed next cycle to prevent recurrence

Prognosis: Good with OVH or successful medical Rx

After successful medical Rx for open pyometra 90% of bitches, 70% of queens are fertile
  • ADVISE OWNER: 70% recurrence of pyometra in bitches within 2 yrs

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Classic Question

A 7 year-old intact female schnauzer is presented. The owner has noted a lot of drinking and some urinary "accidents" in the house in the last week and that the dog "hasn’t seemed herself" either.

Yesterday she vomited twice. On physical exam the dog appears depressed and listless, has dark injected mucous membranes and a distended tender abdomen.

T=104.9 F (40.5 C) ..[N=99.5-102.5 F]
HR=100 bpm.....[N=110-120]
RR=30 brpm......[N=15-34]

What diagnosis is of most immediate concern?