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NEWS FROM THE WORLD OF ONCOLOGY

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FELINE LYMPHOMA – UPDATE

Last week, I spoke at the VEC Veterinary Appreciation Day about three emerging forms of lymphoma in cats.

Lymphoma (LSA) is one of the most common forms of cancer seen in the cat. It is a cancer of the immune system. Lymphoma is usually described in cats based on the location of the disease. Gastrointestinal, nasal, renal and mediastinal are all forms of LSA noted in cats. Recently, three forms of LSA have been reported more commonly. Gastric Lymphoma, Hodgkin's-Like Lymphoma and Lymphoma of the Hock are all forms of LSA more commonly being noted.



Gastric Lymphoma: Traditionally LSA of the stomach has been included as a form of gastrointestinal LSA. However, it has become clear that LSA of the stomach has the potential to behave very differently from LSA of the GI tract occurring distal to the pylorus. Gastric LSA must be diagnosed by biopsy, most often this would be via gastroscopy. Gastric LSA is usually not considered to be amenable to surgery. The recommendation is for treatment with multi-agent chemotherapy. When cats are treated with aggressive chemotherapy protocols, very long survival times have been noted. While a median survival time of 10 months is often discussed, this number appears to be most relevant for non-gastric GI LSA. It is not unusual for cats with gastric LSA to have survival times in the order of years. In fact in some cases cure may even be considered possible, though common thought now is to never speak of immune system cancers in terms of cure, but in terms of long term management or remission.

Hodgkin's-Like Lymphoma: Most types of LSA in cats would be considered non-Hodgkin's; aggressive, not curable and with a relatively guarded prognosis. Hodgkin's-Like LSA of the cat, similar to Hodgkin's Lymphoma in people, appears to be localized in the head and neck region. In most cases, there is a solitary lesion, usually on the neck. The diagnosis is made by biopsy. In order for the diagnosis to be made, the Reed-Sternberg cell must be reported on histopathology. This is the pathognomonic finding for Hodgkin's-like LSA. The approach to this form of LSA in the cat is unusual. The first step is to surgically remove the LSA. In most cases the disease is localized as a mass or lymph node in the neck. Once the surgery has been completed, the next step is to continue treatment with multi-agent chemotherapy. This therapy is recommended due to the fact that LSA is an immune system cancer, and still will have the potential to spread. With the combined therapies, the prognosis is excellent. Prolonged survival is reported, often in the order of years.

Lymphoma of the Hock: This is an usual form of feline LSA. The usual presentation is as a painful, hairless, near circumferential mass of the hock. Most cats present with lameness. The mass can be rapidly progressive. The method of diagnosis is by biopsy. Often the pathologist will have difficulty differentiating between LSA and sarcoma, and immunohistochemistry is necessary to make the final diagnosis. This form of LSA has proven to be very difficult to treat and appears resistant to chemotherapy and, surprisingly, radiation therapy. The current recommendation is to amputate the effected limb and to follow surgery with multi-agent chemotherapy. This is a relatively new recommendation. A median survival time has not been reported. Current experience with chemotherapy, radiation therapy or both has been very unrewarding. It is for this reason that a more aggressive course of action to include local and systemic control is now recommended.

Dr. Kevin Finora is a board certified Oncologist and Small Animal Internist. He sees patients Wednesday (including evenings) to Saturday at VEC/RC South. Please do not hesitate to contact Dr. Finora if you have any cancer related questions.

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