

REPORTING SERVICE: MRI

Report number: VETCT-77133Report date: 25/05/2017Referring Veterinarian: xxxxxxReferring Practice: xxxxxxEmail address: xxxxxxOwner: xxxxxPatient: xxxxxSpecies: EquineBreed: WarmbloodSex: Female EntireAge: 10 years, 4 monthsAssociated cases: VETCT-77135, VETCT-77145, VETCT-77441

Clinical History:

Lame behind

Questions to be answered:

Number of series / images: 45 / 253

Study dated: 23/05/2017

Study received: 23/05/2017

Anatomic regions: Tarsus/foot

Details of study and technical comments: MRI proximal metatarsal region. Images are of diagnostic quality.



t. (UK) +44 (0)1223 422251
t. (Australia) +61 (0)8 9336 7632
www.vet-ct.com
e. info@vet-ct.com
Co Number 6955449
Registered Office in UK St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK
ABN 24601862220
Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia
This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It must therefore only be interpreted by a currently licensed and registered veterinary surgeon responsible for the care of this patient.

Diagnostic interpretation:

Right limb:

- The lateral and medial lobes of the suspensory ligament are moderately enlarged. The muscle bundles have irregular margins and asymmetric signal intensity in T2W FSE just distal to the origin. At this level, the medial bundle has lower signal intensity compared to the lateral. The collagenous portion of the ligament is poorly visualized plantar to the medial bundle.
- There is mild periosteal reaction with small enthesophyte formation in the axial plantar aspect of the third metatarsal bone at the origin of the suspensory ligament. The cortex of the bone is mildly thickened on the lateral aspect and shows endosteal irregularities.

Left Limb:

- The lateral lobe of the suspensory ligament is enlarged and its plantar margin is irregular. An area of hyperintense signal is visible within the lateral lobe extending slightly dorsally to the margin of the lobe into the plantar cortex of the third metatarsal bone. The plantar cortex at this level is thickened and has an irregular endosteal surface.
- In T2W FSE there is increased signal intensity within the lateral lobe and there is poor visualization of the collagen portion of the ligament surrounding the muscle bundle.

Conclusions:

- Bilateral moderate to severe suspensory ligament desmopathy.
- Bilateral entesopathy at the origin of the suspensory ligament



Right limb T1W GRE transverse. Note the irregular thickening of the lateral cortex of the third metatarsal bone (arrowheads) and the enlarged lateral lobe of the suspensory ligament (arrows).



t. (UK) +44 (0)1223 42251
t. (Australia) +61 (0)8 9336 7632
www.vet-ct.com
e. info@vet-ct.com
Co Number 6955449
Registered Office in UK St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK
ABN 24601862220
Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia
This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It must therefore only be interpreted by a currently licensed and registered veterinary surgeon responsible for the care of this patient.



Right limb T1W GRE and T2W FSE transverse. Note the enthesophyte on the axial plantar cortex of the third metatarsal bone (arrowheads) and the asymmetric singal intensity within the muscle bundles of the suspensory ligament (arrows).



Left limb: T1W and T2*W GRE transverse. Note the enlarged lateral lobe of the suspensory ligament (red arrows), the focal thickening of the plantar cortex of the third metatarsal bone (red arrowheads) and the focal hyperintensity within the dorsal portion of the lobe (green arrowhead).



t. (UK) +44 (0)1223 422251
t. (Australia) +61 (0)8 9336 7632
www.vet-ct.com
e. info@vet-ct.com
Co Number 6955449
Registered Office in UK St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK
ABN 24601862220
Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia
This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It must therefore only be interpreted by a currently licensed and registered veterinary surgeon responsible for the care of this patient.



Left limb; T2W FSE transverse showing the increased signal intensity in the lateral lobe of the suspensory ligament.

Additional comments:

Lesions are worse in the left limb where the signal extending into the plantar cortex of the third metatarsal bone might be suggestive of partial avulsion.

The asymmetric signal within the muscle bundles in the right limb likely represent change in composition of the bundles due to fibrosis (medial lobe) which is supportive of chronic lesion.

Reporting Radiologist:

xxxxxx DVM, PhD, DipECVDI, MRCVS European Specialist in Veterinary Diagnostic Imaging RCVS Specialist in Veterinary Diagnostic Imaging

If you have any queries regarding this report then please "Add a comment" on the VetCT platform or contact <u>info@vet-ct.com</u>



t. (UK) +44 (0)1223 42251
t. (Australia) +61 (0)8 9336 7632
www.vet-ct.com
e. info@vet-ct.com
Co Number 6955449
Registered Office in UK St John's Innovation Centre Cowley Road Cambridge CB4 0WS UK
ABN 24601862220
Registered Office in Australia Suite 11, 185-187 High Street Fremantle WA 6160 Australia
This report is based on the available history and radiographic interpretation only and not on a physical examination of the patient. It must therefore only be interpreted by a currently licensed and registered veterinary surgeon responsible for the care of this patient.