

Chronic Valve Disease with Ruptured Chordae Tendineae in a Chinese Crested

Shirley Yang

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Pre-clinical Advisor: Dr. Sydney Moise

Clinical Advisor: Dr. Marc Kraus

An 11 year old spayed female Chinese Crested presented to the Cornell University Hospital for Animals (CUHA) Emergency Service for respiratory distress. Approximately 1 year ago, she was diagnosed with a grade V/VI holosystolic apical murmur but was not clinical at that time. In the last couple months, she began having occasional bouts of coughing with increasing lethargy and exercise intolerance. After eating her evening meal on the day of presentation, she had a coughing fit that lasted 15-20 minutes and was breathing rapidly and with difficulties.

On presentation, the patient was quiet, alert, and responsive. She had an elevated pulse (HR = 200 bpm) and elevated respiratory rate (RR = 80 bpm) with an increased respiratory effort. A grade V/VI systolic plateau murmur was ausculted on the left side at the apex of the heart. Her femoral pulses were strong and synchronous and oral mucous membranes were muddy pale pink and moist with a CRT <2 seconds. Bilaterally, the patient had coarse diffuse pulmonary crackles on inspiration and expiration. Radiographs revealed a left sided cardiomegaly and pulmonary edema. Echocardiogram confirmed advanced chronic valve disease with severe left atrial enlargement. Additional findings included mitral and tricuspid valve regurgitation, and pulmonary hypertension. The patient was discharged the next day with Furosemide, Benazepril, and Pimobendan. This case presentation will discuss the diagnosis, treatment, and prognosis of chronic valve disease.

References:

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