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# Aortic Thrombosis in the Feline

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**4****Aortic Thrombosis in the Feline.**

On Oct. 11, 1958, a 5-year old male, domestic feline was admitted to Stange Memorial Veterinary Clinic with the following history. The owner had let the cat into the basement at 5:00 or 6:00 on the same morning. Later in the morning the owner found that cat paralyzed in the rear quarters. There was no previous known history of an injury or accident. Furthermore the cat walked into the basement in the morning showing no signs of lameness or paralysis.

The patient was examined. There was posterior paralysis with no sensation in the legs or tail. The tail itself was flaccid. The femoral pulse was not taken. The rectal temperature was 98.6. The pupils were dilated and both hindlegs felt cold to the touch. Drs. E. C. Jensen and P. T. Pearson diagnosed the condition as on aortic thrombosis in the area of the external iliac arteries. The patient was made comfortable, covered with a towel to keep the hindquarters warm and kept quiet. There is no known treatment for aortic thrombosis besides quiet and rest. One cc. Antibiotic Combination No. 1 (Corn States Lab. penicillin and streptomycin) was given intramuscularly as a prophylactic agent in case a systemic infection was developing.

The cat was found dead the next day and the owner granted permission to do a necropsy. An aortic thrombus was found at the termination of the aorta. It extended anteriorly to the level of the kidneys. There were old renal infarcts in both kidneys but no thrombi were seen in the lungs or brain.

**Andris Zervins '59**

**5****Abdominal Cryptorchid in the Bovine.**

A male Hereford calf about 4 months old was brought into the Stange Memorial Clinic Dec. 12, 1958. The owner gave the history that it had only one testicle. Upon thorough external physical examination only the right testicle could be palpated which was in its normal position in the scrotum. A cryptorchid was suspected after this exami-

nation. A further search was made under the skin in the area of the scrotum as quite often in the bovine the testicle is ectopic (in the subcutaneous tissue) when it is not present in the scrotum. It may be located beneath the skin alongside the penis, along the ventral surface of the abdomen or out in the fold of the flank. Subcutaneous fat, connective tissue or the penis should not be confused with a testicle.

The calf was placed on his back and the surgical area prepared. The scrotum was incised on the right side and the right testicle was removed. The spermatic cord was then severed with an emasculator. Through this incision the left side of the scrotum was further palpated to determine if the testicle was present or located in the general area, but it could not be found. It was then decided that the testicle was not ectopic but this was an abdominal cryptorchid. The left flank was prepared for surgery and the abdominal cavity was entered. Using the left hand, the area around the internal inguinal ring was palpated as it was suspected that the testicle may be located in this region. A band of tissue about four inches long was found attached at the opening of the internal inguinal ring. The testicle was on the free end of this band of tissue. This allowed free movement of the testicle and it was located among the small intestines. The testicle was brought near the incision with a long forceps. An ecraseur was placed over the testicle and worked down the cord. The cord was severed and the testicle was removed from the abdominal cavity. A routine closure of the flank incision was made. The calf was discharged from the clinic the same afternoon in apparently good condition.

An abdominal cryptorchid in the bovine is quite rare. Occasionally it will be found and should always be kept in mind in cases where the testicle cannot be found in the scrotum or under the skin. The operation to remove the testicle in this condition is "major surgery" but is not so difficult that it could not be attempted by the practitioner in the field.

**Donald Sime '59**