Have You Got The Gall?



When is extrahepatic biliary tract disease a surgical problem?

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- Understand the pertinent anatomy of the biliary system and understand the relevant species differences between dogs and cats
- Describe the diagnostic approach to extrahepatic biliary tract disease in dogs
- Understand the indications for surgery in dogs with gallbladder mucocoeles
- Understand the indications for surgery in cats with extrahepatic biliary tract disease
- List the expected outcomes following extrahepatic biliary tract surgery in dogs and cats

Outline



1. Anatomy

- 2. Diagnostic investigation for extrahepatic biliary tract disease in dogs
- 3. Gallbladder mucocoeles in dogs

4. Cats with extrahepatic biliary tract obstruction

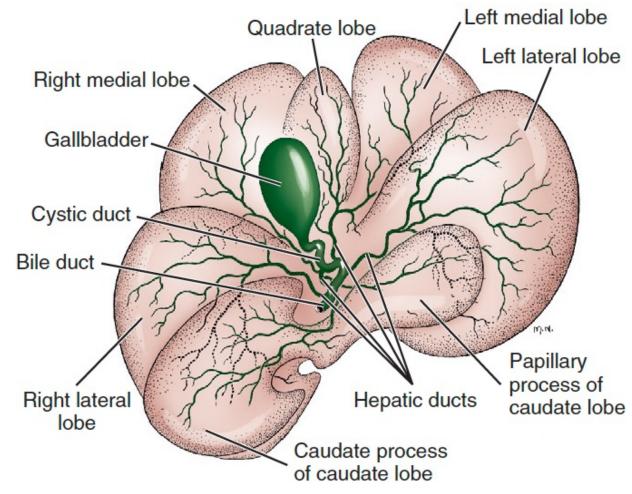
Outline

waves Zoetis

1. Anatomy

Anatomy – Biliary System



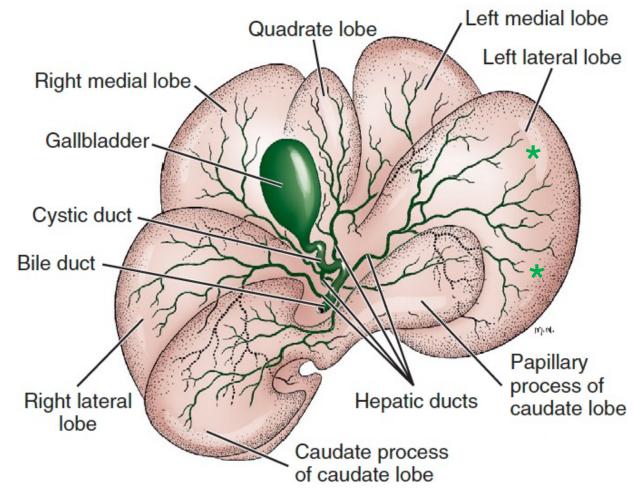


Anatomy – Biliary System: Intrahepatic



→ Bile canaliculi

→Biliary ductules



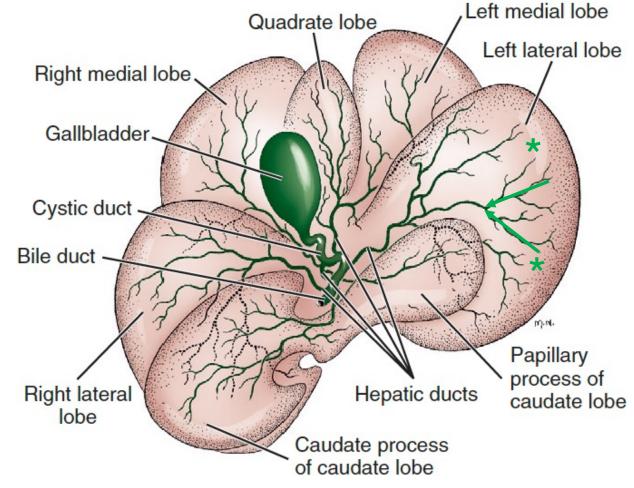
Anatomy – Biliary System: Intrahepatic



→ Bile canaliculi

→Biliary ductules

→Interlobar ducts



Anatomy – Biliary System: Intrahepatic

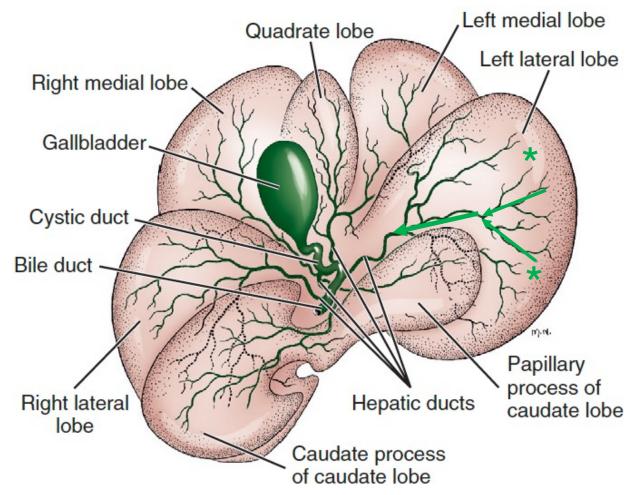


→ Bile canaliculi

→Biliary ductules

→Interlobar ducts

→Lobar ducts



Anatomy – Biliary System: Extrahepatic



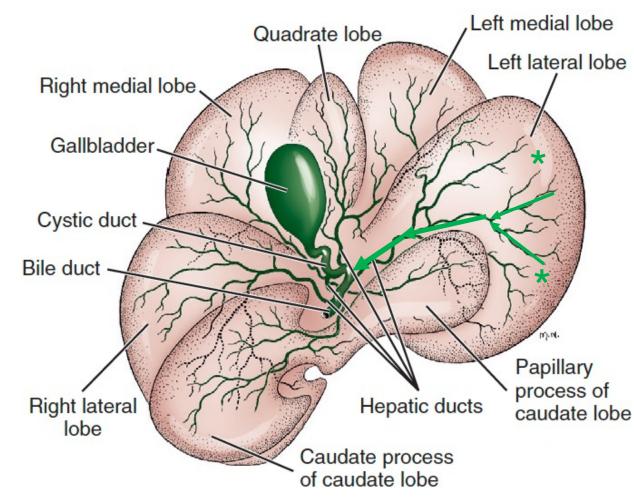
→ Bile canaliculi

→Biliary ductules

→Interlobar ducts

→Lobar ducts

→Hepatic ducts



Anatomy – Biliary System: Extrahepatic



→ Bile canaliculi

→Biliary ductules

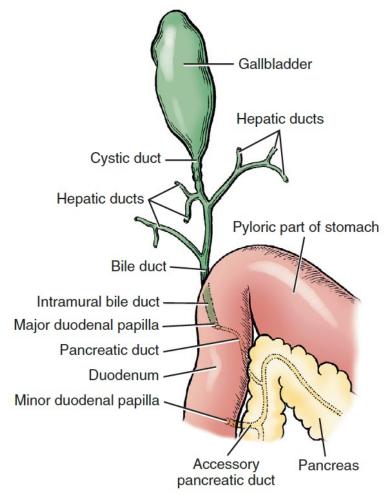
→Interlobar ducts

→Lobar ducts

→Hepatic ducts / gallbladder / cystic duct

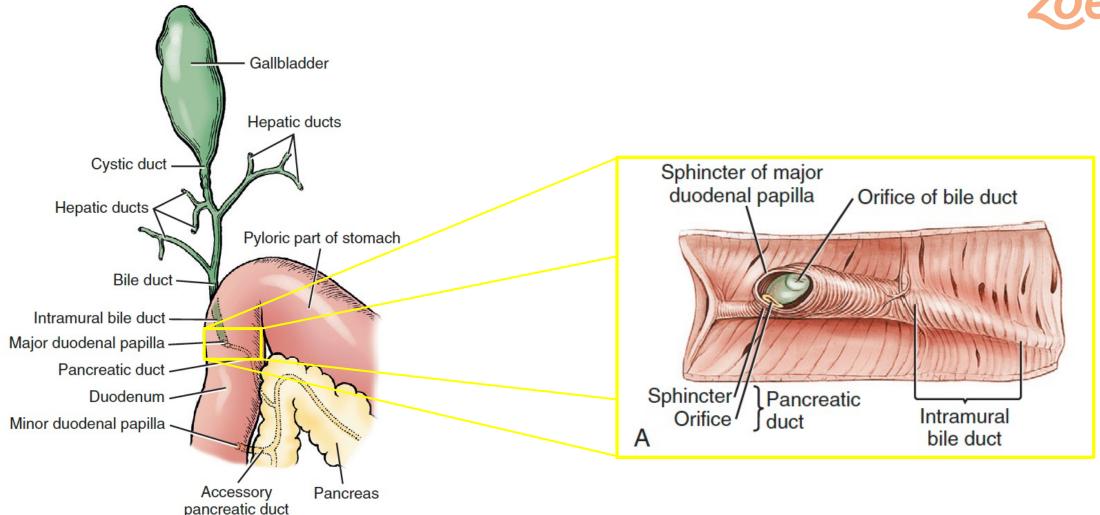
→Common bile duct

→Duodenum



Anatomy – Biliary System: Extrahepatic





Outline



1. Anatomy

2. Diagnostic investigation for extrahepatic biliary tract disease in dogs

Extrahepatic Biliary Tract Disease



- Non-specific signs
- Waxing and waning signs over days to weeks
- Clinical signs
 - Vomiting, lethargy, anorexia, diarrhoea, abdominal pain, jaundice
 - Bile peritonitis, SIRS +/- septic peritonitis

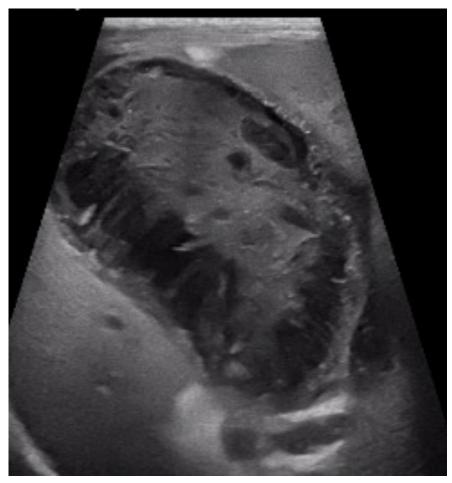
Diagnostic Investigation - Bloods



- CBC:
 - Leukocytosis
- Biochemistry
 - ↑ ALT, ALP, GGT, cholesterol, bilirubin
 - ↓ Albumin
- Coagulation profile
 - Variable

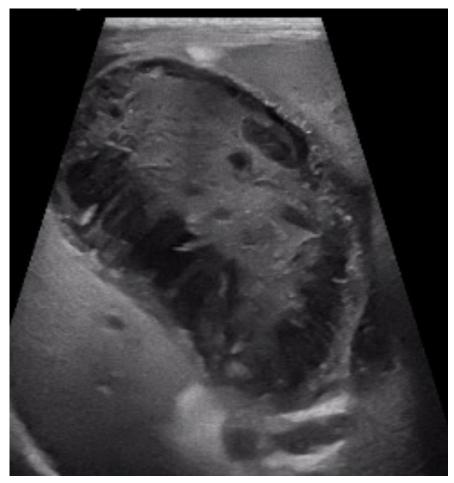


Abdominal ultrasound



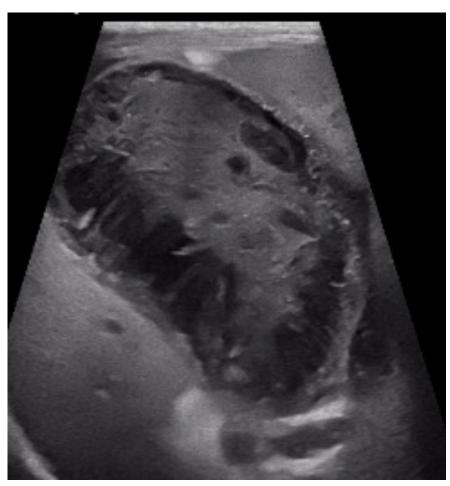


- Abdominal ultrasound
 - Diagnosis of mucocoeles



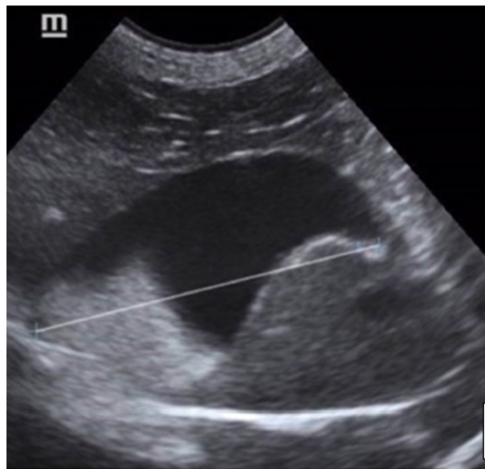


- Abdominal ultrasound
 - Diagnosis of mucocoeles
 - Distended common bile duct
 - >3-4 mm
 - Dilated within 48 hours of obstruction
 - Distended hepatic ducts
 - Dilated within 1 week of obstruction
 - Monitoring change over time



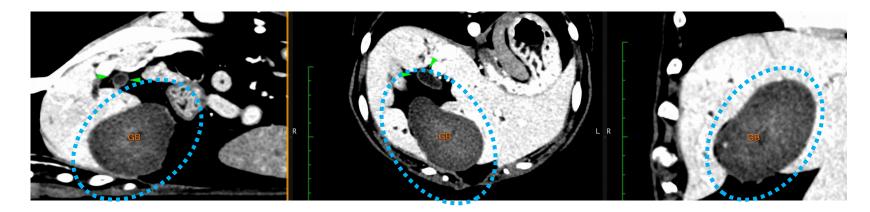


- Abdominal ultrasound
 - Gallbladder ejection fraction
 - Non-gravity dependent sludge
 - ~40% reduction in volume normal
 - <25% reduction in volume 2 hours postprandial = dysmotility
 - Hills a/d 30-60g/kg



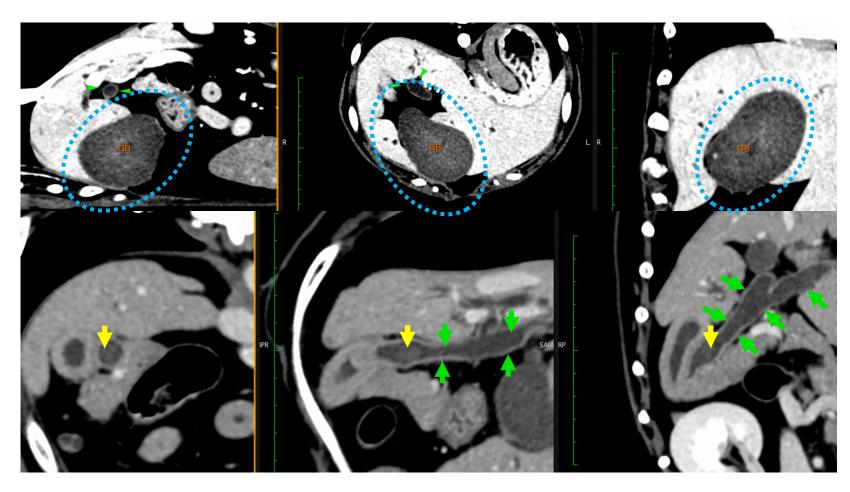


- CT
 - Hyperattenuating bile
 - Mineral distribution





- CT
 - Hyperattenuating bile
 - Mineral distribution
 - Hepatic, cystic and common bile duct dilation
 - Choleliths, choledocholiths



Outline



1. Anatomy

2. Diagnostic investigation for extrahepatic biliary tract disease

3. Gallbladder mucocoeles in dogs

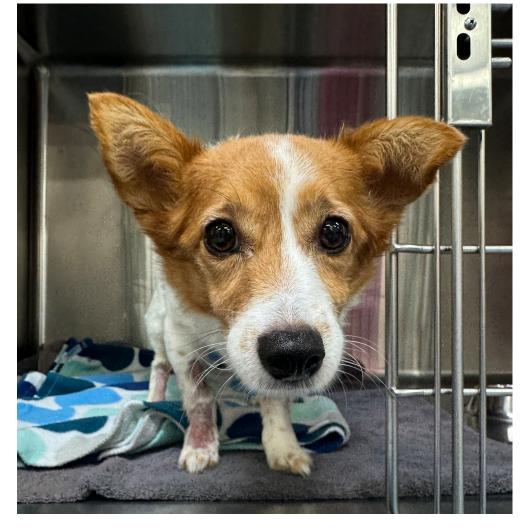


- 3-week duration
- Reduced appetite
- Diarrhoea
- Lethargy/exercise intolerance
- PU/PD
- Vomiting
- Dark urine and orange faeces

• Examination

- Mild cranial abdominal pain
- Soft yellow faeces on rectal





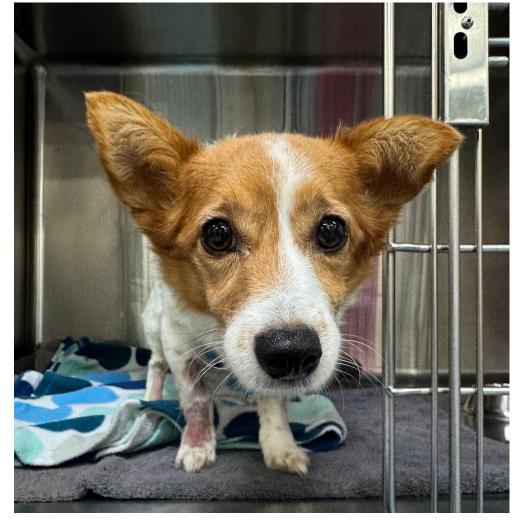


- Stress leukogram
- ALT 6379 U/L
- ALKP 1837 U/L
- GGT 33 U/L
- Tbil 90 umol/L

• POCUS

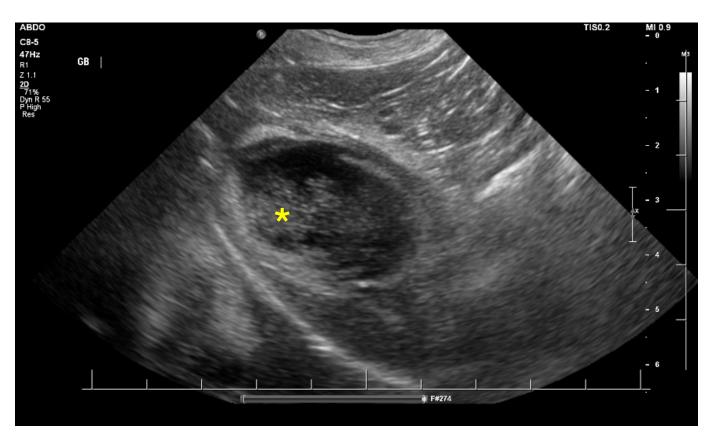
- Suspected gallbladder mucocoele
- Peri-gallbladder inflammation







- Abdominal ultrasound
 - Gallbladder distension
 - Non-gravity dependent sludge
 - Diffuse gallbladder wall thickening
 - Peri-gallbladder steatitis
 - CBD ~3.4 mm



- Abdominal ultrasound
 - Gallbladder distension
 - Non-gravity dependent sludge
 - Diffuse gallbladder wall thickening
 - Peri-gallbladder steatitis
 - CBD ~3.4 mm
- Cholecystectomy
 - Multifocal gallbladder wall necrosis
 - Thick mucinous bile within CBD
 - Cholecystitis with extensive necrosis

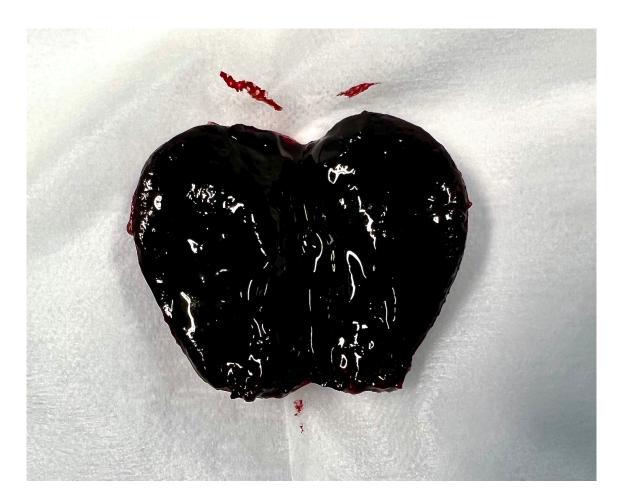




Gallbladder Mucocoeles



- Immobile, mucinous bile
- Gallbladder distention



Gallbladder Mucocoeles

- Immobile, mucinous bile
- Gallbladder distention
- Wall necrosis, rupture, extrahepatic biliary tract obstruction

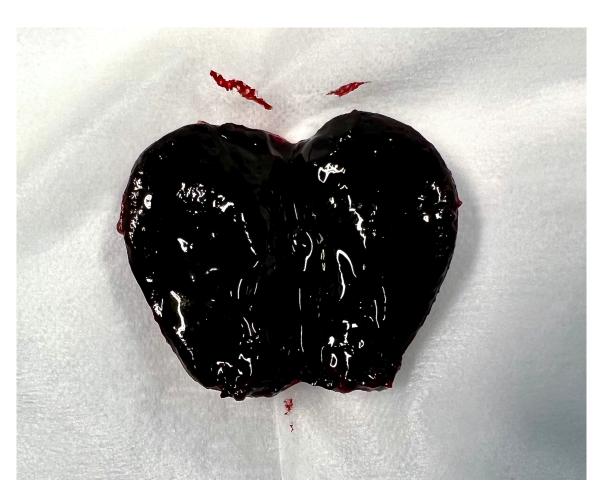




Gallbladder Mucocoeles – Aetiology

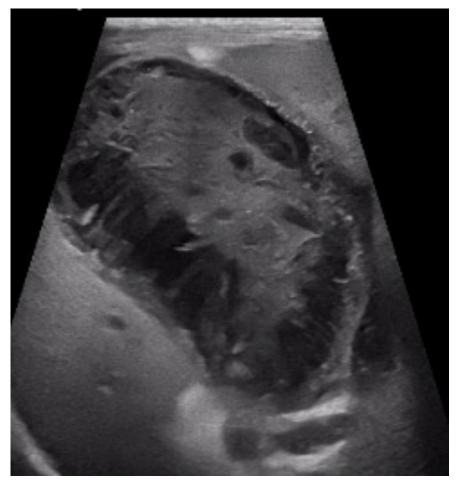


- Cystic mucosal hyperplasia
- Cholestasis
- Cholecystitis
- Bile composition
- Breed
- Hyperadrenocorticism
 - 29x odds of mucocoele
 - No causative relationship identified
 - ~10% of dogs undergoing cholecystectomy



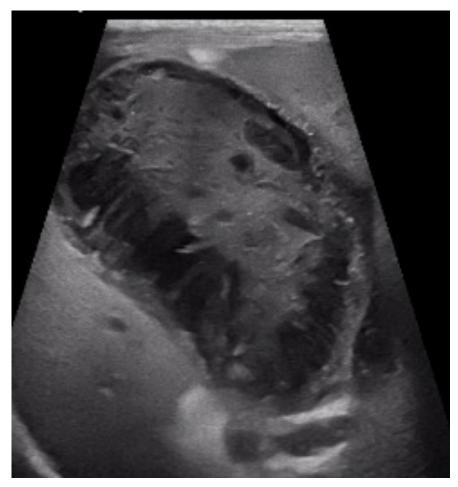


- Clinical
 - Vomiting, lethargy, anorexia, diarrhoea, abdominal pain, jaundice
 - Extrahepatic biliary tract obstruction
 - Bile peritonitis





- Clinical
 - Vomiting, lethargy, anorexia, diarrhoea, abdominal pain, jaundice
 - Extrahepatic biliary tract obstruction
 - Bile peritonitis
- "Incidental"
 - No reported clinical signs





- Abdominal ultrasound
 - 6 types

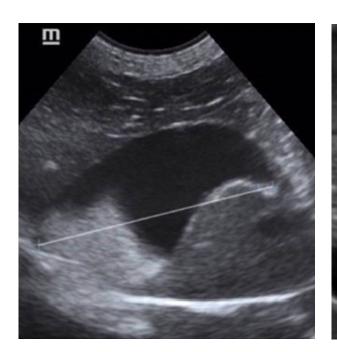


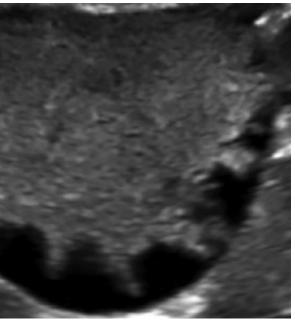
- Abdominal ultrasound
 - 6 types
 - Non-dependent sludge





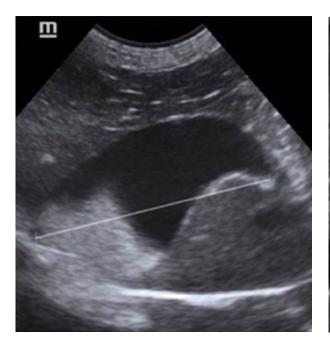
- Abdominal ultrasound
 - 6 types
 - Non-dependent sludge → stellate

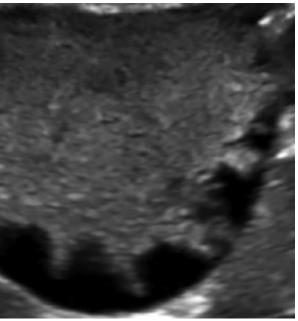


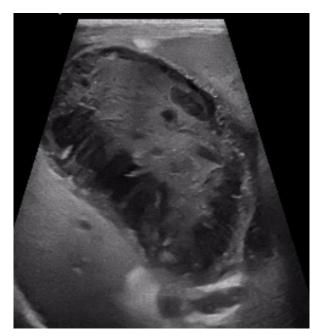




- Abdominal ultrasound
 - 6 types
 - Non-dependent sludge → stellate → partial "kiwifruit"

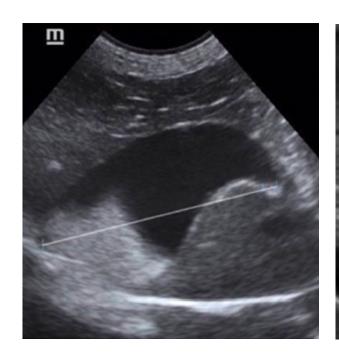


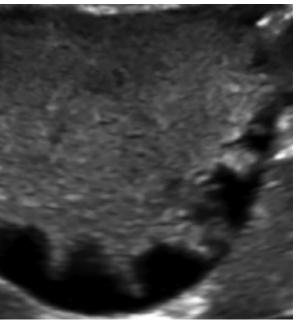




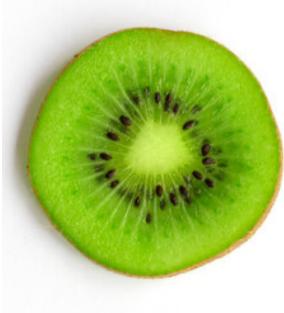


- Abdominal ultrasound
 - 6 types
 - Non-dependent sludge → stellate → partial "kiwifruit" → "kiwifruit"



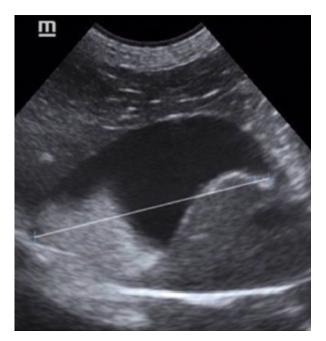


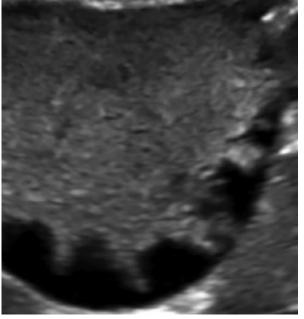


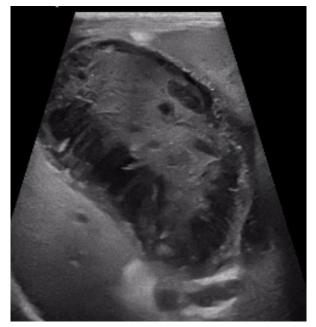


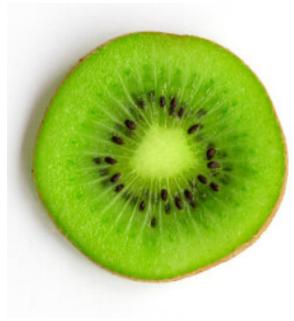


- Abdominal ultrasound
 - 6 types
 - Non-dependent sludge → stellate → partial "kiwifruit" → "kiwifruit"
 - Type may be associated with clinical signs











Cholecystectomy





- Cholecystectomy
 - Non-elective
 - Mortality 17-23%





- Cholecystectomy
 - Non-elective
 - Mortality 17-23%
 - Elective
 - Mortality 2-6%





- Cholecystectomy
 - Non-elective
 - Mortality 17-23%
 - Elective
 - Mortality 2-6%
 - Clinical features associated with death
 - Age
 - Owner-assessed jaundice
 - Bilirubin
 - Hyperadrenocorticism



Outline



1. Anatomy

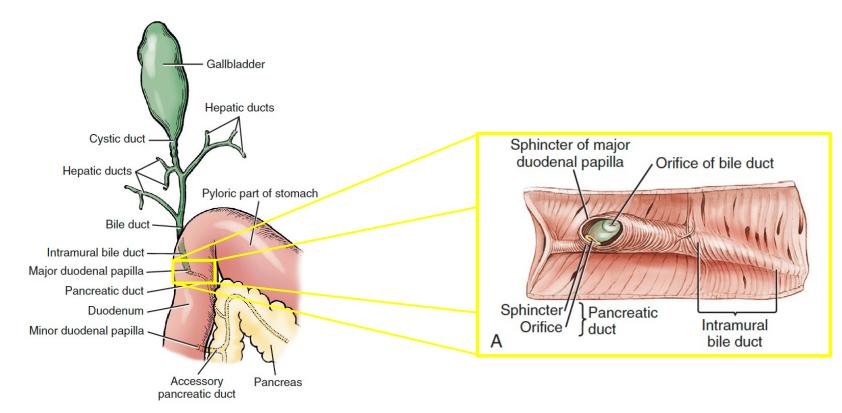
- 2. Diagnostic investigation for extrahepatic biliary tract disease in dogs
- 3. Gallbladder mucocoeles in dogs

4. Cats with extrahepatic biliary tract obstruction

Extrahepatic Biliary Tract Disease in Cats – Anatomy



Cats are not small dogs

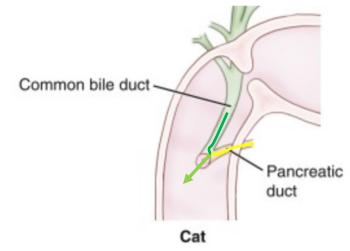


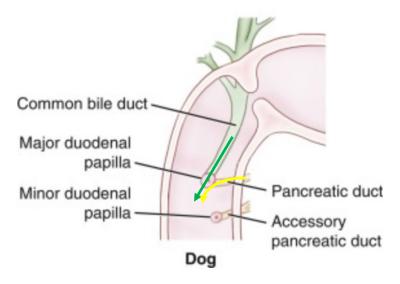
From Evans HE, de Lahunta A: Miller's anatomy of the dog, ed 4, St Louis, 2013, Saunders/Elsevier

Extrahepatic Biliary Tract Disease in Cats – Anatomy

waves zoetis

- Cats are not small dogs
- Common bile duct and pancreatic duct fuse prior to entering duodenum

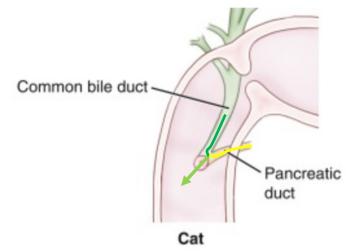


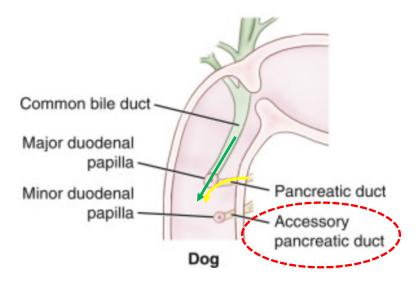


Extrahepatic Biliary Tract Disease in Cats – Anatomy

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- Cats are not small dogs
- Common bile duct and pancreatic duct fuse prior to entering duodenum
- Only 20% of cats have an accessory pancreatic duct





Extrahepatic Biliary Tract Disease in Cats – Aetiology

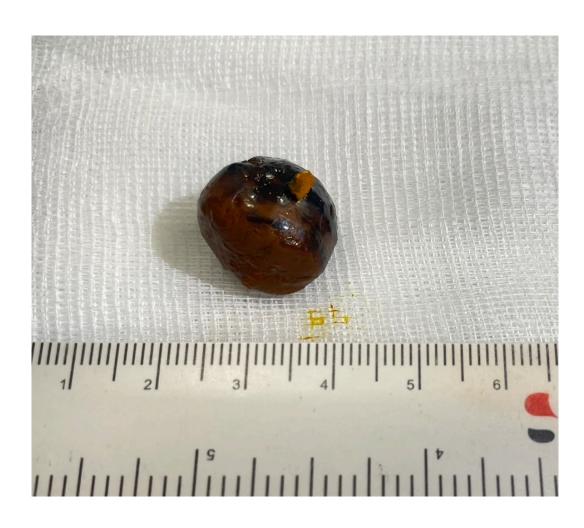


- Inflammatory disease
 - Cholangitis (neutrophilic, lymphocytic)
 - +/- extrahepatic biliary tract obstruction

Extrahepatic Biliary Tract Disease in Cats – Aetiology



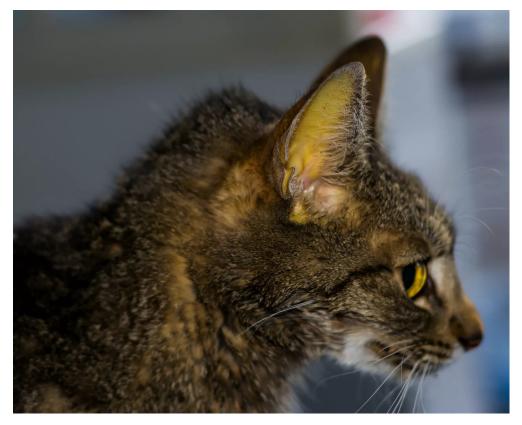
- Inflammatory disease
 - Cholangitis (neutrophilic, lymphocytic)
 - +/- extrahepatic biliary tract obstruction
- Cholelithiasis
- Cholecystitis
- Neoplasia
- Mucocoeles uncommon



Extrahepatic Biliary Tract Disease in Cats – Diagnosis



- Clinical signs
 - Vomiting, icterus, abdominal pain, lethargy, anorexia
 - Chronic waxing and waning vs fulminant disease

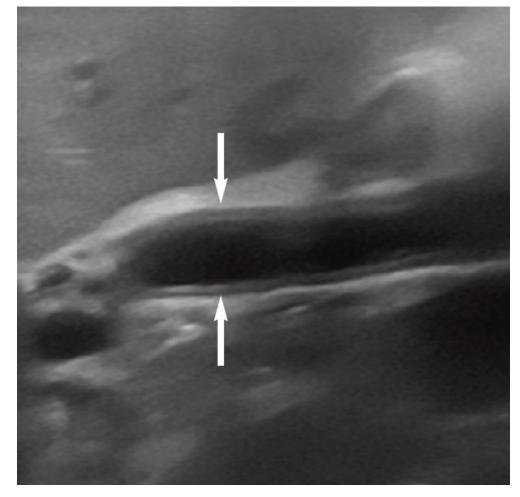


https://www.thesprucepets.com/jaundice-in-cats-5186415

Extrahepatic Biliary Tract Disease in Cats – Diagnosis



- Clinical signs
 - Vomiting, icterus, abdominal pain, lethargy, anorexia
 - Chronic waxing and waning vs fulminant disease
- Diagnosis
 - CBC: +/- anaemia and leukocytosis
 - Biochemistry: ALT, ALKP, GGT, Tbil, SBA
 - Ultrasound
 - CT
 - Cytology, histology, cultures



Low D, Williams J. Surgical Management Of Feline Biliary Tract Disease: Decision-making and techniques. Journal of Feline Medicine and Surgery. 2023 Nov;25(11):1098612X231206846.

Extrahepatic Biliary Tract Disease in Cats – Treatment



- Surgical biliary tract disease uncommon
- Indications for surgery
 - Extrahepatic biliary tract obstruction
 - Cholelithiasis
 - Cholecystectomy, re-routing, choledochotomy
 - Inflammatory
 - Re-routing, choledochal stent
 - Neoplasia
 - Cholecystectomy

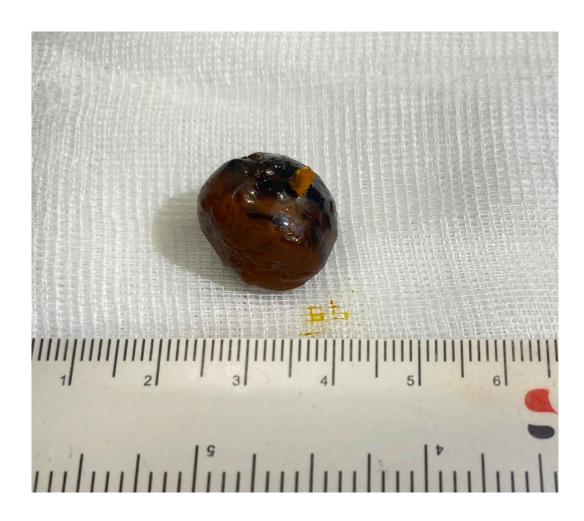


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Extrahepatic Biliary Tract Disease in Cats – Treatment



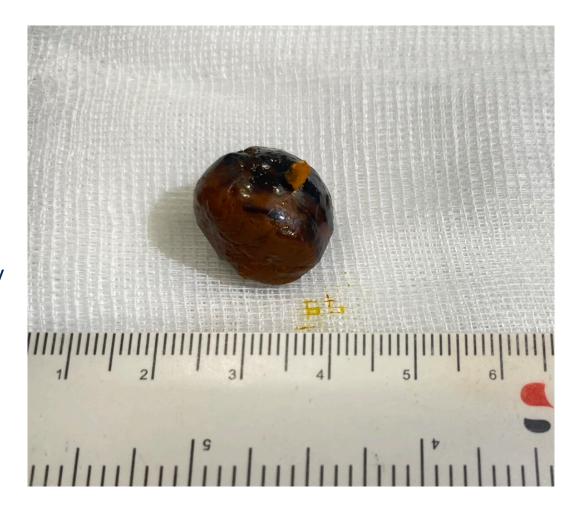
- Surgical outcomes
 - High mortality reported
 - Up to 40% for non-neoplastic lesions for cats undergoing rerouting procedures
 - Recurrence of signs in surviving cats



Extrahepatic Biliary Tract Disease in Cats – Treatment



- Surgical outcomes
 - High mortality reported
 - Up to 40% for non-neoplastic lesions for cats undergoing rerouting procedures
 - Recurrence of signs in surviving cats
 - 22% in cats undergoing cholecystectomy (+/- choledochotomy +/- stenting) for cholelithiasis
 - Excellent long-term outcomes







- Understand the pertinent anatomy of the biliary system and understand the relevant species differences between dogs and cats
- Describe the diagnostic approach to extrahepatic biliary tract disease in dogs
- Understand the indications for surgery in dogs with gallbladder mucocoeles
- Understand the indications for surgery in cats with extrahepatic biliary tract disease
- List the expected outcomes following extrahepatic biliary tract surgery in dogs and cats

Key points



- 1. Gallbladder mucocoeles are a surgical disease in dogs
- 2. Elective cholecystectomy has a better prognosis than non-elective in dogs (2-6% versus 17-23%)
- Complete, refractory extrahepatic biliary tract obstruction in cats is an indication for surgery

Questions?



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