

IT'S YOUR CASE

Species: Rabbit months

Breed: Netherland Dwarf

Sex: Female Neutered

Age: 2 years, 4

Clinical History:

Chronic dacrocystitis Non responsive to topical treament

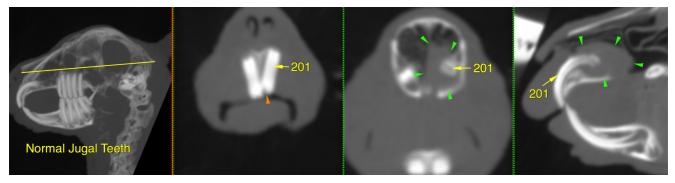
Details of study and technical comments: A CT of the head is evaluated. Transverse image series are provided before and after injection of positive contrast media into the left nasolacrimal duct with cone beam CT reconstruction algorithms. Images are of diagnostic quality.

Diagnostic interpretation:

HEAD:

The mandibular and maxillary molars and premolars are considered to be normal, with no evidence of reserve crown elongation, malocclusion, periodontal disease, or clinical crown erosions.

The left maxillary incisor (201) is abnormal, with the reserve crown being dorsally displaced and the occlusal surface being angled medially (orange arrowhead). There is a large, fairly well delineated soft tissue swelling surrounding the reserve crown of 201 (green arrowheads) with the germinal layer of the reserve crown being slightly irregular in margination.





Reported by VetCT

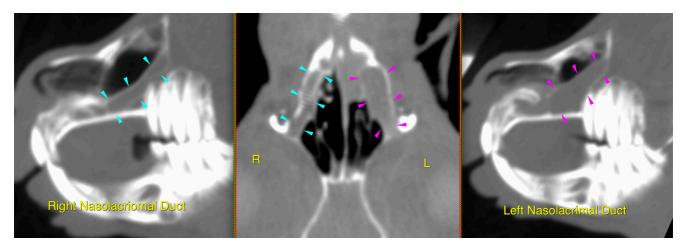
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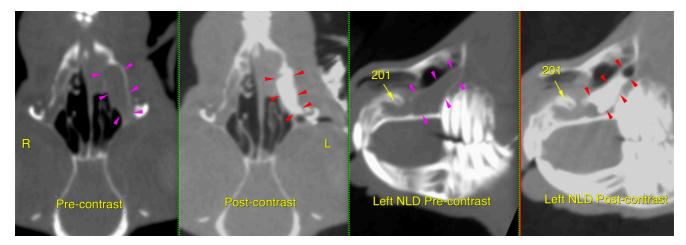
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The left nasolacrimal duct (pink arrowheads) is moderately dilated, especially distally, to the level of the soft tissue lesion surrounding the 201 reserve crown. The right nasolacrimal duct (blue arrowheads) is normal in appearance. No mineral calculi are identified within either of the nasolacrimal ducts.



On the dacryocystorhinography series, positive contrast media is identified filling the lumen of the left nasolacrimal duct (red arrowheads), but then abruptly stopping at the level of the soft tissue swelling surrounding the 201 reserve crown.

The remainder of the head, including nasal cavities, cranium and brain, tympanic bullae, temporomandibular joints, and discernible salivary glands and lymph nodes is within normal limits.



Conclusions:

• Probable tooth root abscess associated with the 201 reserve crown, causing secondary incisor malocclusion and obstruction of the left nasolacrimal duct.

Additional comments:

The soft tissue swelling surrounding the 201 reserve crown is presumed to represent an abscess or granuloma. A neoplastic process such as odontogenic tumor or fibrosarcoma is considered less likely given the lack of notable surrounding osteolysis, but tissue biopsy would be necessary for definitive diagnosis.

Dilation of the left nasolacrimal duct is attributable to obstruction by the 201 lesion, as the positive contrast within the duct lumen abruptly stops at the level of the soft tissue swelling surrounding the 201 reserve crown.



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