



Diagnostic Exercise

From The Davis-Thompson Foundation*

Case #: 96 Month: May Year: 2018

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Clinical History: This 13-year-old mare presented with clinical signs of colic including restlessness, anorexia, bloody nasal discharge and rolling on the ground. The abdomen was firm on palpation. The horse died acutely and the owner requested a post mortem exam. Other animals from the farm were clinically normal. The horses had access to a water reservoir (dam).

Necropsy Findings: The horse was in good body condition. A firm, 20 cm long mass was observed at the beginning of the jejunum (Figure 1). It was covered by omentum and had multifocal serosal hemorrhages. The cut surface of the mass revealed a segmental, transmural and circumferential thickening of the intestinal wall (Figure 2). The thickened wall was white and firm, with multifocal yellowish areas that were friable and well demarcated (Figure 2, arrows). The content of the small intestine was hemorrhagic.

Microscopic Findings: The histologic appearance of the jejunal mass is illustrated in Figures 3 and 4.

Gross and Microscopic Images:



Figure 1



Figure 2

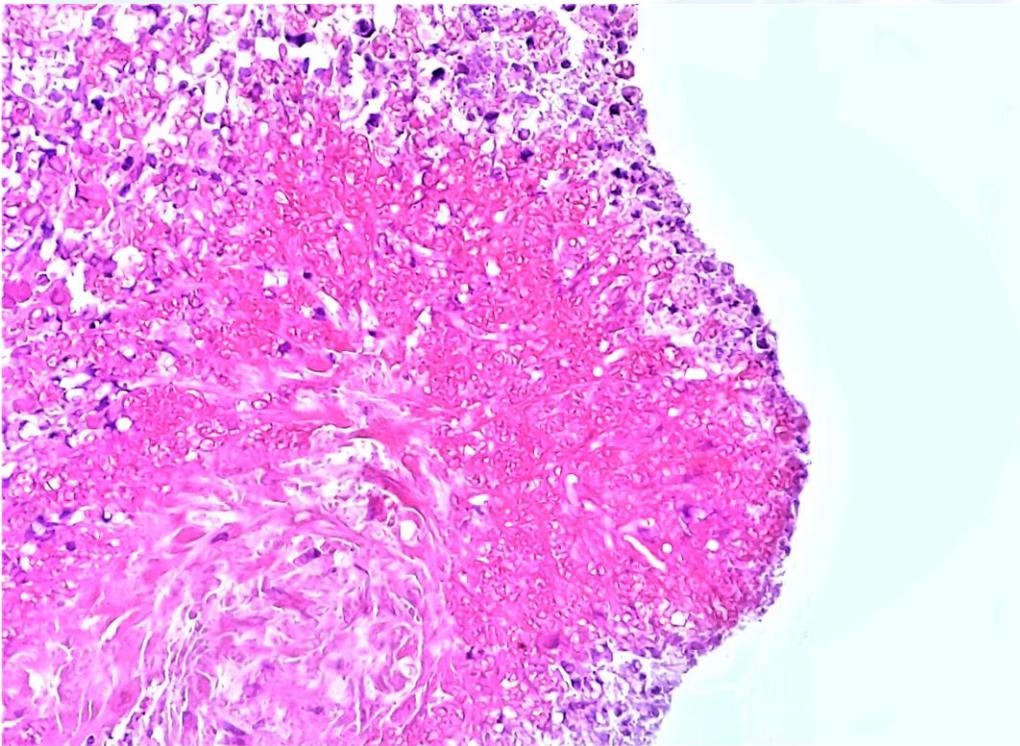


Figure 3

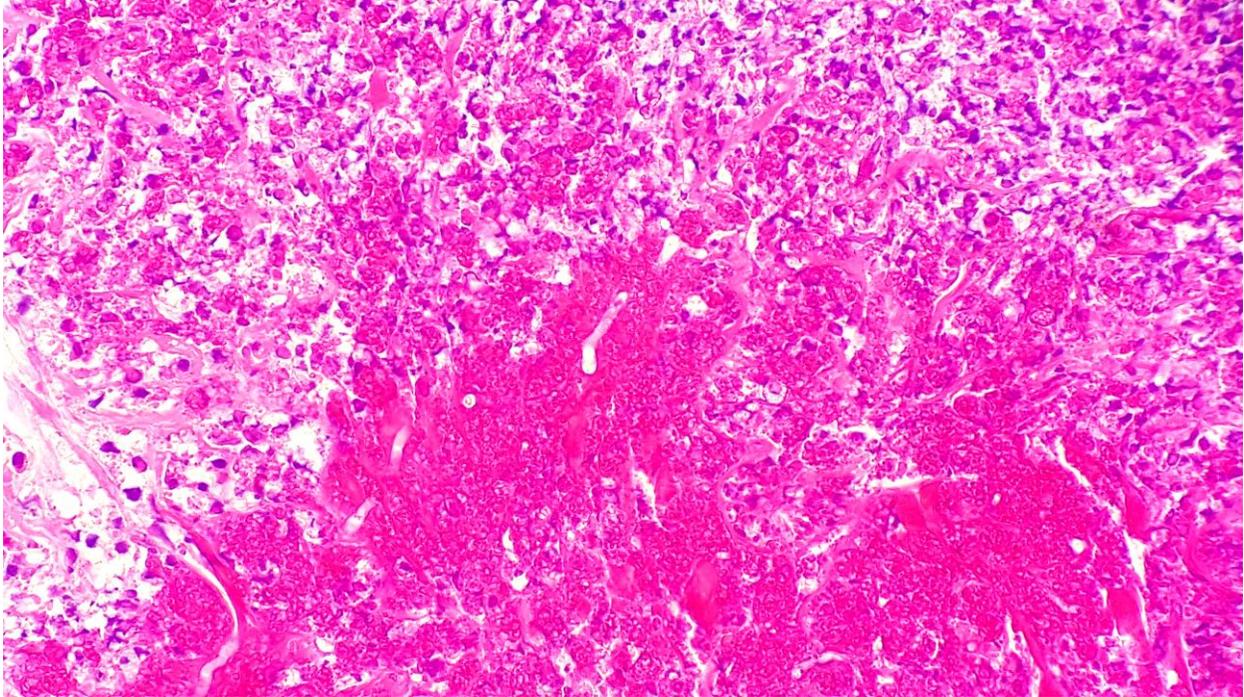


Figure 4

Follow-up questions: Based on the above gross and histologic pictures, what is the most probable cause (agent)? How do we call the yellow, friable, well-demarcated structures observed in the intestinal wall (Figure 2, arrows)? What is the most probable source of infection of this horse with this pathogen? Describe the classic presentation of this disease in horses.

*The Diagnostic Exercises are an initiative of the **Latin Comparative Pathology Group (LCPG)**, the Latin American subdivision of The Davis-Thompson Foundation. These exercises are contributed by members and non-members from any country of residence. Consider submitting an exercise! A final document containing this material with answers and a brief discussion will be posted on the CL Davis website (http://www.cldavis.org/diagnostic_exercises.html).

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