

## **Reproductive remnants, mammary sequelae, and renal agenesis in a domestic short hair cat**

Audrey Kelleman

University of Florida, Department of Large Animal Clinical Sciences  
College of Veterinary Medicine, Gainesville, FL

A 10 year old domestic short hair cat was evaluated for chronic recurrent estrous behavior. Reportedly, the cat had been spayed prior to adoption as a kitten. Approximately 2.5 years prior, during an exploratory surgery, tissues obtained from the right side of the abdomen were excised; there was histopathological confirmation of a portion of uterus, an ovary and also a mammary nodule consistent with hyperplasia. Two weeks prior to presentation, the cat was in estrus. Cat was bright and alert, but fractious and therefore was sedated. Body condition, rectal temperature, pulse, and respiration were normal. All mammary glands were severely affected by multifocal large fluid filled (cystic) structures cranially and solid nodules caudally. Abdominal palpation was normal and vaginal epithelium was noncornified based on cytological examination. Complete blood work and chemistry were normal. Serum progesterone was 11.4 ng/ml. Abdominal ultrasonography revealed a uterine stump, segmental cranial left uterine horn remnant, left ovary, and mammary cysts and nodules. Right kidney was identified, but not the left. Ultrasound guided aspiration cytology of a solid mammary nodule was non diagnostic. Full body radiography findings were normal, except for the mammary pathology. Surgical management was performed by the oncology service and included exploratory laparotomy with surgical excision of the left ovary and segment of adjacent left uterine horn and initial unilateral right sided radical mastectomy. Subsequently, left radical mastectomy was performed. Histopathological evaluation confirmed uterine tissues affected by lymphohistiocytic endometritis and hyperplasia, a left ovary containing corpora lutea and follicles, and multifocal mammary adenocarcinoma with adjacent cystic and fibroadenomatous changes with glandular hyperplasia. Three days after surgery, the cat returned for suture line bandage removal and there was evidence of adequate recuperation. The owner failed to return the cat for the left side mastectomy. Ipsilateral presence of an ovary, but with renal agenesis, has previously been reported in cats with discovery of uterine anatomic anomalies at laparotomy, e.g. segmental aplasia or hypoplasia.<sup>1</sup> Identification and removal of the ovary is important in these cases, so that ovarian remnant syndrome does not occur.

**Keywords:** Feline, ovarian remnant, segmental aplasia, renal agenesis, mammary neoplasia

### **Reference**

1. McIntyre RL, Levy JK, Roberts JF, et al: Developmental uterine anomalies in cats and dogs undergoing elective ovariohysterectomy. *J Am Vet Med Assoc* 2010;237:542-546.

