Gastrointestinal bleeding in dogs with pituitary-dependent Cushing’s disease

Study objectives

Sustained glucocorticoid administration can cause occult gastrointestinal bleeding in dogs and people. Gastrointestinal bleeding increases the risk of thromboembolism and death in people 5-fold, potentially because bleeding is a strong trigger of platelet activation. Occult gastrointestinal bleeding in dogs with pituitary-dependent hyperadrenocorticism could contribute to hypercoagulability, clot formation and death.

The purpose of this study is to determine whether dogs with pituitary-dependent Cushing’s disease have occult gastrointestinal bleeding. Bleeding will be assessed using capsule endoscopy - a non-invasive gastrointestinal imaging technique.

Inclusion criteria

Dogs must have:
- Weight $\geq$ 10 lbs
- Increased ALP activity and $\geq$ 2 clinical signs of Cushing’s
- $\pm$ Positive test for Cushing’s disease

Exclusion criteria

- Prior or current medical treatment for Cushing’s
- Systemic disease associated with gastrointestinal bleeding (protein-losing enteropathy, liver insufficiency, etc.)
- Evidence of a systemic coagulopathy
- Receipt of medications that cause or treat gastrointestinal bleeding (nsAIDS, omeprazole, etc.)
- Adrenal mass or infiltrative gastrointestinal disease on imaging
- Inability or unwillingness of the owner to monitor the dog’s feces for collection of the endoscopy capsule

Study benefits

Involvement in the study requires 2-3 visits within a two week period. Benefits provided at no cost for qualifying dogs include:

- Labwork as needed to complete minimum database
- Coagulation testing
- Adrenal function testing
- Limited abdominal ultrasound

Note: Capsule endoscopy will be performed but results will not be available until completion of the study.

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