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B-mode ultrasonographic appearance of the globe and intraocular structures of eye in dogs

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Abstract

Transcorneal B-mode ultrasonographic scanning of 74 eyes of 37 healthy dogs of 11 different breeds of either sex was performed without any sedation, anaesthesia or analgesia to study ultrasonographic appearance of the globe and intraocular structures of eye in dogs. Qualitative echo findings of the eyes were described.

Keywords: B-mode ultrasonographic, globe, intraocular structures

Introduction

Ocular ultrasonography is a good diagnostic tool for routine ophthalmic examinations (Gorig, 2006) [12]. Ultrasonography enables the evaluation of intraocular structures and gives immediate result with excellent definition. Ultrasonography is valuable in the investigation of both ocular and orbital diseases. Ultrasonography is safe, non-invasive, well tolerated, non-toxic, rapidly performed and relatively inexpensive.

Ultrasonography is used for various purposes *viz.*, evaluation of intraocular details obscured from visualisation by the ocular media opacities, evaluation of retino-choroidal lesions especially tumors even with clear media, differentiation of solid from cystic and homogenous from heterogeneous masses, examination of retrobulbar soft tissue masses and normally present orbital structures (to differentiate proptosis from exophthalmos), identification, localisation and measurement of non-radiopaque/radio-opaque foreign bodies, detection of retinal detachment, detection of lens dislocation or rupture, detection of vitreous degeneration, guidance of fine-needle aspirates of orbital and ocular lesions, ocular biometry and pachymetry (Kealy and McAllister, 2000; Maggs *et al.*, 2008 and Ribeiro *et al.*, 2009) [16, 18, 27].

Knowledge of the ultrasonographic appearance and normal dimensions of the eye would serve as a basis for ultrasonographic examinations when ocular disease may have caused alterations in the dimensions and appearance intraocular structures (Potter *et al.*, 2008) [24].

Therefore keeping above information in mind, the present work was undertaken to study the B-mode ultra sonographic appearance of the globe and intraocular structures of eye in dogs.

Materials and Methods

In the present study, B-Mode Ultrasound of Intraocular Structures in Dogs was conducted in 74 eyes from 37 healthy dogs on clinical cases of dogs presented to Department of Veterinary Surgery and Radiology, Bikaner for routine check-up.

History of vision changes, age, any injury, time elapsed since occurrence of problem, use of recent medications and presence of diabetes was obtained from the dog owner. The eyes were checked for clarity of cornea, opacity of lens, cataract, conjunctival appearance, conjunctival vascularity and discharge, if any.

Ophthalmic ultrasonography was performed with an ultrasound machine (Fig. 1-Ultrasonix Vet, Ultrasonix Medical Corporation, Canada) using a 5-14 MHz linear transducer (Fig.2) using high frequency sound waves to produce detailed images of eye. No pre-examination drug or medication was used. All the dogs were examined using verbal and physical restraining without any sedation or anaesthesia / analgesia.

The dogs were placed in lateral recumbency facing the head towards the ultrasound machine. Eyes were thoroughly flushed with physiological saline before performing the ultrasound examination. Sterile coupling gel (Fig.3-SUJA Medical Corporation, Jaipur, Rajasthan, India).was used and directly placed on the cornea for the examination.

Transducer was directly placed on the cornea after application of coupling gel. Scanning depth was kept 4 cm while frequency was set to 14 MHz. The globes were examined in a sagittal (longitudinal) plane (Fig. 4) as standard described models (El-Maghraby *et al.*, 1995; Potter *et al.*, 2008) [24].

Optimal B-scan sonogram along the central optic axis enabled visualisation of the cornea, aqueous chamber, anterior lens capsule, posterior lens capsule, vitreous chamber, posterior ocular wall.

After examination of the eyes excess sterile coupling gel was wiped off with the help of cotton from surrounding of eye lids and margins while eyes were rinsed off with physiological saline to remove coupling gel. No other special care was taken post-examination.

Results and Discussion

Even for animals in which direct observation of intraocular structures is not possible, ultrasonography may be helpful for tumour identification, performance of measurements, and comparison of findings to those for the contralateral eye (Gonzalez *et al.*, 2001) [11]. Structures that cannot be observed by use of routine ophthalmologic examination techniques, such as ciliary bodies or retro-bulbar spaces, can be evaluated via ultrasonography (Hoffmann and Kostlin, 2004) [15].

Opening of eyes in pups was reported to be between ten to fifteen days by Paunksnis *et al.*, (2001) [22] and Ferriera *et al.*, (2003) [8]. In young pups, clinical examination of the eyes is not possible until the eyelids have opened during the first 14 days and thereafter, it is difficult because of restless behaviour, small globe size, and the incompletely developed tapetum lucidum, but these factors do not limit ultrasonographic examination of the eye which was in the agreement with the lower limit of the age in present study (Boroffka, 2005) [4].

The B-mode probe used in the present study operated at a frequency of 5-14 MHz, allowed complete evaluation of the globe which was in accordance with Ribeiro *et al.*, (2010) [26]. The scanning depth was kept 4 cm which allowed excellent evaluation of the intraocular structures and was in agreement with Whitcomb (2002) [3].

Hillyer (1993) [14] stated that transpalpebral and trans-corneal ultrasonographic techniques were useful to evaluate the normo-echoic ocular pattern of the eye. However, trans-corneal technique has some risk of corneal damage but outweighed by the enhanced image quality so transcorneal method was adopted in present study.

The present study was conducted in lateral recumbency by manual restrain and blepharostasis on unsedated dogs similar to Lee *et al.*, (2003) [17] and Bentley, (2015) [3] this allowed adequate evaluation of the eye globe, avoided rotation of eye ball and upward movement of third eyelid which were reported as the common problems faced in sedated or general anesthetized and closed eyelids by Dar *et al.*, (2014) [5], Penninck *et al.*, (2001) [23] and Mustafa (2005) [20]. Thus, sedation and general anaesthesia proposed previously by Goncalves *et al.*, (2009) [10] did not appear necessary and with these techniques, risks inherent in anaesthesia, as well as additional costs, were eliminated in present study.

Many parameters in the anterior segment may be lost in the near-field reverberation artefact as observed by Poulsen *et al.*, (2000) [25] and Nautrap *et al.*, (2000) [21] and a standoff can be used to avoid this problem as advocated by Silva *et al.*, (2010) [29] and Singh *et al.*, (2015) [30]. Conductive gel used as a standoff pad in present study as advocated by was effective

and allowed adequate evaluation of the anterior segment of the eye, as well as identification of its structures in all eyes evaluated to obtain reliable images.

After ultrasound examination, excess coupling gel was carefully wiped from the eyes as reported by El-Tookhy and Tharwat (2013) [7] and rinsed with sterile 0.9% sodium chloride solution as stated by Martins *et al.*, (2010) [19] to prevent the corneal irritation (Kealy and McAllister, 2000; Maggs *et al.*, 2008; Singh *et al.*, 2015) [16, 18, 30]; and eyes were re-examined for the identification and treatment, if necessary, of iatrogenic corneal lesions resulting from the examination as advised by Martins *et al.*, (2010) [19]. But in present study no iatrogenic corneal lesions were noticed from the examination this was in accordance with Goncalves *et al.*, (2009) [10] in dogs and cats and by Toni *et al.*, (2010) [32] in rabbits.

Normal ultrasonogram of a healthy eye of a dog has been shown in Fig. 5. The globe was observed as a round and well-delimited structure with distinct borders in bony orbit. All three primary structures in the globe, the anterior chamber, vitreous chambers and the lens, were anechogenic (Singh *et al.*, 2015) [30]. The anterior chamber filled with aqueous humour was identified as an anechoic area in B-mode ultrasound just behind the cornea while cornea was characterised by two parallel and convex hyper-echoic lines near the contact area of transducer which were in agreement with Boroffka *et al.*, (2006) [4].

In normal dogs, the iris and posterior chamber are usually difficult to distinguish from the adjacent ciliary bodies but using high-resolution transducers, the posterior chamber can be seen as an anechoic, triangular space between the lens, ciliary body, and iris as reported by Penninck *et al.*, (2001) [23] however, in present study at 14 MHz frequency it was possible to observe distinguished anterior chamber, ciliary bodies and posterior chamber as well.

The anterior and posterior margins of the lens were hyper-echoic creating a distinct delineation between the chambers and the lens. It was possible to identify the lens by identifying both anterior and posterior capsules. Anterior lens capsule appeared as convex hyper-echoic line while posterior lens capsule appeared as concave hyper-echoic line and the nucleus of the lens was identified as an anechoic area between two hyper-echoic lines of the anterior and posterior lens capsules (Williams, 2004) [35]. The iris and the ciliary body were relatively hyper-echoic structures that in reality circumferentially surround the lens. However, on ultrasonic examination they appeared at the lateral margins of the lens (Scotty *et al.*, 2004) [28].

The vitreous chamber, filled with vitreous humour, was identified as anechoic area between the posterior lens capsule and posterior pole of the eye which appears hyper-echoic (Williams, 2004) [34] and (Haraldsen, 2014) [13].

The posterior pole of the eye, which includes the retina, the choroid and the sclera, was identified as a hyper-echoic and concave structure. It was hard to differentiate retina, choroid and sclera and collectively termed as sclero-retinal rim. The optic disc appeared as a slightly brighter region that may be either raised or depressed, relative to the posterior globe, in normal eyes. The optic nerve and extra ocular muscles were hypo-echoic, relative to the echogenic retro-bulbar fat separating them just posterior to the globe surrounded by hypo-echoic ocular muscles. These structures converged toward the posterior orbital apex near the optic canal, forming a cone shape, with the base at the posterior wall of the globe (Haraldsen, 2014) [13].

In present study, the hyper-echogenicity of the optic nerve was presumably due to orientation of the beam parallel to the nerve fibers and the highly organised, homogeneous structure of the optic nerve compared to adjacent fat as reported by Potter *et al.*, (2008) [24].

The ultrasonographic appearances of present study corroborated with ophthalmologically normal eyes of dogs (Paunksnis *et al.*, 2001) [22], feline (Gilger *et al.*, 1998) [9], equine (Svaldeniene *et al.*, 2004) [31], cattle (Assadnassab and Fartashvand, 2011) [1], buffalo (Assadnassab and Fartashvand, 2013) [2] and camel (Yadegari, *et al.*, 2013) [35].

It was concluded that ultrasound can be used as a tool for ophthalmologic examination and determined normal echogenicity of the main ocular structures.



Fig 1: Ultrasonix Vet Ultrasound machine



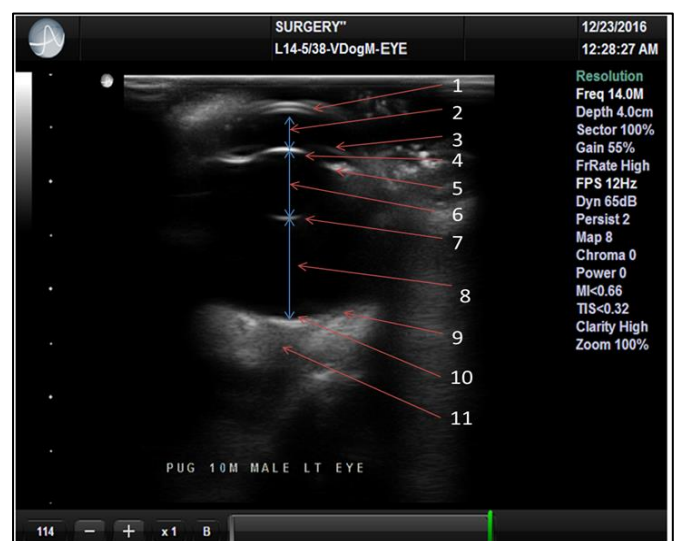
Fig 2: Linear Array Probe (5-14MHz)



Fig 3: Sterile Coupling Gel



Fig 4: A Labrador retriever adult male in lateral recumbency during ultrasonographic examination. Probe positioned in sagittal/longitudinal plane.



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|--------------------------|---------------------------|
| 1: Cornea | 7: Posterior lens capsule |
| 2: Aqueous chamber | 8: Vitreous chamber |
| 3: Iris | 9: Sclero retinal rim |
| 4: Anterior lens capsule | 10: Optic disc and |
| 5: Ciliary body | 11: Optic nerve |
| 6: Lens | |

Fig 5: Normal B - Mode ultrasonogram of left eye of 10 months old male Pug dog.

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