

METROPOLITAN VETERINARY ASSOCIATES NEWSLETTER

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TOOTH RESORPTION

Corinne Durand, DVM / Dentistry

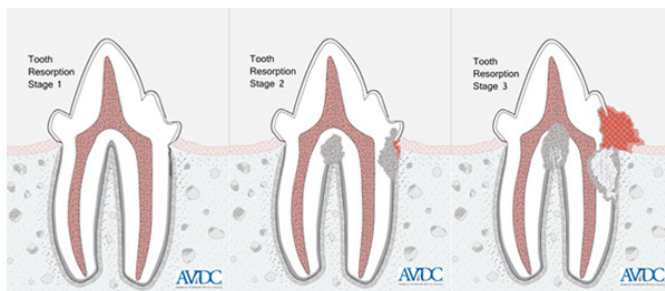
Tooth resorption, formerly known as feline odontoclastic resorptive lesions (FORL) is the second most common dental disease process seen in cats. Over 70% of the cat population will have at least one resorptive lesion in its lifetime. This occurs most commonly in cats over the age of 4 but can occur in younger cats that are more prone to periodontitis. It is also important to note that if a cat has developed a resorptive lesion, it is more likely to develop more lesions in the future. The consensus is that tooth

resorption is not directly related to periodontal disease nor caries and the etiology is unknown.

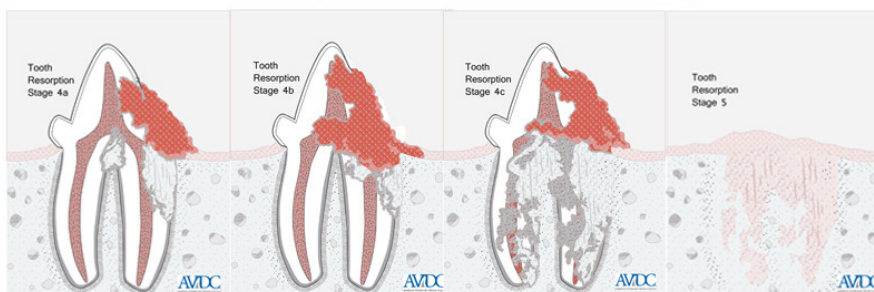
Tooth resorption can develop in any tooth and in any location (crown, root, both) though lesions are commonly noted around the cemento-enamel junction at the gingival margin. Clinical signs of tooth resorption include halitosis, focal gingivitis, focal areas of hyperplastic gingival tissue, oral discomfort when eating, dropping food, head shaking or inappetence.



Dr. Corinne Durand



Tooth Resorption - AVDC Classification of Clinical Stages



A complete oral exam under anesthesia including probing and dental radiographs are necessary to fully diagnosis and accurately treat tooth resorption. Tooth resorption is broken down into 5 stages dependent on the severity of disease progression within a tooth.

The stages are as follows:

Stage 1: mild dental hard tissue loss within the cementum and/or enamel

Stage 2: moderate dental hard tissue loss extending into the dentin but not into the pulp chamber.

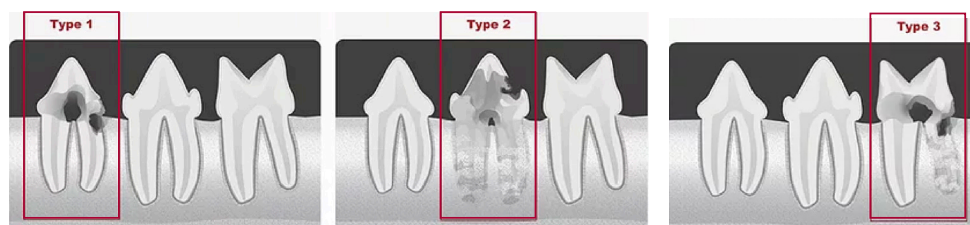
Stage 3: deep dental hard tissue loss extending into the pulp chamber; most of the tooth retains its integrity.

Stage 4: deep dental hard tissue loss extending into the pulp chamber compromising the tooth's integrity. This is further broken down into: 4a: crown and root equally affected, 4b: crown is affected more than the root, 4c: root is affected more than the crown.

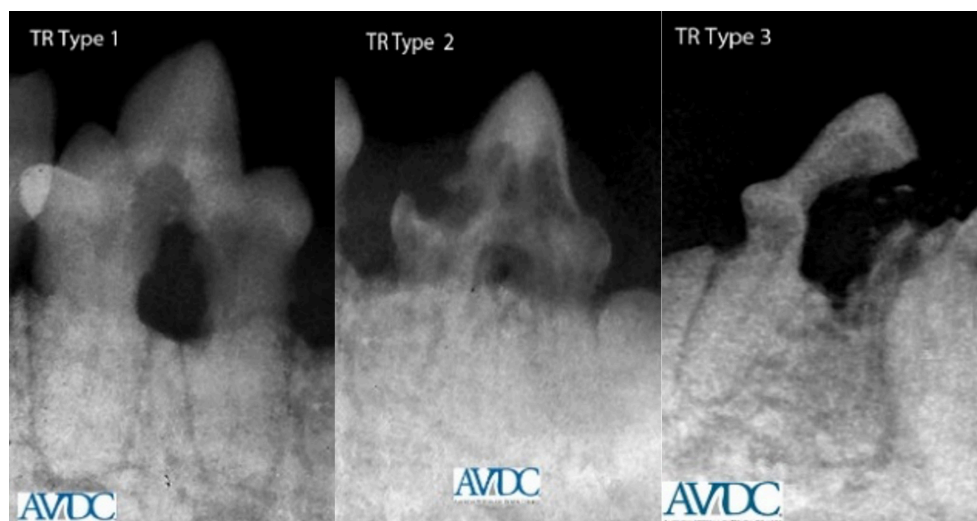
Stage 5: remnants of dental hard tissue only visible as irregular radiopacities with complete gingival covering.



Types of Tooth Resorption



Radiographic Examples of Types of Tooth Resorption:



Though there are many stages of tooth resorption, the types of tooth resorption seen on dental radiographs are what determine the treatment necessary. Without dental radiographs, treatment of tooth resorption could be achieved properly. Type 1 tooth resorption are clear "holes" within the crowns, root or both the crown and root of teeth that have not affected the periodontal ligament around the roots. These teeth must be surgically extracted. Type 2 tooth resorption has a more "moth-eaten" appearance on dental radiographs resulting in the obliteration of the periodontal ligament and these teeth can be crown amputated. Type 3 tooth resorption occurs in multi-rooted teeth where one root has a clear periodontal ligament and the other does not. The root with the ligament must be extracted while the other can be amputated.

Cats with tooth resorption require annual oral exams to check for any newly developed lesions to avoid painful episodes and a compromised quality of life. It is important to educate clients on daily dental home care to have them accustomed to performing oral exams at home. There is no way to prevent tooth resorption, but by controlling the overall level of inflammation, any focal areas of gingivitis would be identifiable as a concern. The VOHC website, www.vohc.org, is a good source of information on current dental products and diets available to provide a healthier mouth. 🐾

References:

1. Senn et al. Immunohistochemical Localization of Osteoclastogenic Cell Mediators in Feline Tooth Resorption and Healthy Teeth; J Vet Dent June 2010;27(2): 75-83.
2. Girard et al. Feline Tooth Resorption in a Colony of 109 Cats. J Vet Dent Sept 2008; 25(3):166-174
3. Niemiec, B. Feline Tooth Resorption. Today's Veterinary Practice. September/October 2012; pp59-63.
4. Wiggs, R. Veterinary Dentistry: Principles and Practice. Limppincott-Raven, 1997; pg487-496.
5. www.avdc.org



BEHAVIOR VIRTUAL LUNCH AND LEARN

Schedule a virtual lunch and learn for your clinical team with the newest addition to our behavior service, Dr. Hagar Hauser. Possible topics of discussion below:

- Triaging a behavior case
- How to pick a trainer for your clients
- Psychopharmaceuticals 101
- Low stress veterinary visits
- Cooperative care
- Feel free to suggest a topic best suited to your hospital!

Lunch will be delivered to your hospital to enjoy during the meet and greet. To schedule, call Sarah Spurgeon at **610-666-1050** or email sspurgeon@metro-vet.com.

SPECIALIZED SERVICES

BEHAVIOR

Hagar Hauser, DVM
Jacqueline Wilhelmy, MS, VMD, DACVB,
CCBC-KA

CARDIOLOGY

Marc Kraus, DVM, DACVIM (Cardiology)
Michael Miller, MS, VMD, ABVP
Megan Poad, VMD, DACVIM (Cardiology)
Risa Roland, DVM, DACVIM (Cardiology)

DENTISTRY

Corinne Durand, DVM

DERMATOLOGY

Katherine Backel, DVM, DACVD
Karen B. Farver, DVM, DACVD

EMERGENCY AND CRITICAL CARE

James Buckman, PhD, VMD
Allison Buysse, VMD
Jason Chamberlin, VMD
Kathleen Crossman, DVM
Cierra French, DVM
Robert Gaunt, VMD
Jennifer McGough, VMD
Rachel Morgan, DVM, DACVECC
Katie Slade, VMD
Marisa Suvannavejh, VMD
Katrina Tumielewicz, DVM, DACVECC
Sarah Wilson, DVM

INTERNAL MEDICINE

John V. DeBiasio, DVM, DACVIM
James F. Dougherty, MS, VMD
Tabitha A. Hutton, DVM, MTR, DACVIM (SAIM)
Leslie A. Kuczynski, VMD, DACVIM

NEUROLOGY

Lisa Lipitz, VMD, DACVIM (Neurology)
Daniella Vansteenkiste, BVetMed

ONCOLOGY

Corinne Durand, DVM
Kendra Hearon, VMD, DACVS-SA
ACVS Fellow, Surgical Oncology
Jacqui Niles, BVETMED, SAS, DACVS
Suzanne Rau, DVM, DACVIM (Oncology)

OPHTHALMOLOGY

Amanda Corr, VMD, DACVO
Chloe Spertus, DVM, DACVO

RADIOLOGY

Robert McLear, VMD, DACVR
Lisa Suslak, VMD, DACVR

SURGERY

Kendra Hearon, VMD, DACVS-SA
ACVS Fellow, Surgical Oncology
A. Jon Nannos, DVM
Jacqui Niles, BVETMED, SAS, DACVS
Catherine Popovitch, DVM, DACVS, DECVS
Timothy M. Schwab, VMD, DACVS-SA
Rebecca Wolf, VMD, DACVS-SA

COMPASSIONATE CARE SERVICE NOW AVAILABLE AT MVA

Jennifer Durn | MSW, LSW — Compassionate Care Coordinator

For our shared clients, we're pleased to announce that the Compassionate Care Service is now available. To learn more about this service please contact Jennifer Durn at **610-666-1050**, or email jdurn@metro-vet.com.

How the service could benefit our shared clients — Many individuals share a deep connection with their pets and consider them to be beloved members of the family. MVA acknowledges the remarkable relationship people share with their furry loved-ones and offers a compassionate care service for clients who are faced with challenging circumstances regarding their pets.

Some Benefits of the Compassionate Care Service Include:

- Offer a listening ear during moments of concern and uncertainty.
- Assist clients with processing and making difficult treatment and care decisions.
- Provide a calming presence during testing, treatment, and euthanasia.
- Support clients as they navigate end-of-life decisions.
- Serve as a liaison between the client and veterinary team.
- Help guide conversations with parents and children.
- Lend support following the loss of a pet.
- Connect clients to community resources, when necessary.



VIRTUAL SUPPORT GROUP

Our pet loss support group meets once or twice a month. Meetings begin at 7 pm and end at 8:30 pm. Out of respect for other attendees, please be on time and plan to stay the duration of the meeting. It is not necessary to RSVP, although, if you would like to please contact 610-666-1050.

For questions or further information please call 610-666-1050 or e-mail us at info@metro-vet.com.

Jennifer Durn | MSW, LSW – Compassionate Care Coordinator

Jennifer Durn obtained a master's degree in social work from Marywood University, Scranton, Pennsylvania, in 2013. Deeply impacted by losing her own cat, Sunset, to cancer she was inspired to make a difference for other individuals. While in graduate school, she participated in internships within the fields of hospice and oncology and studied international social work in South Korea. During her second year of graduate school, Jennifer created her own internship within a small animal hospital where she supported clients and staff through emotionally challenging situations. Following graduate school, she received a postgraduate Veterinary Social Work Certificate from the University of Tennessee at Knoxville. Jennifer's undergraduate degree is in mass communication (Mansfield University, Mansfield, Pennsylvania).

Before joining Metropolitan Veterinary Associates in the Fall of 2020, Jennifer developed and guided another program for over five years within a veterinary specialty hospital to assist families during pet illness, crisis, and loss. Throughout her career in veterinary social work, she has presented programs on pet loss, caregiver stress, supporting children through pet loss, compassion fatigue, and suicide awareness and prevention. Jennifer is fortunate to share her home with two dynamic cats named Bridger and Gannett who bring great joy to her life. 🐾

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