

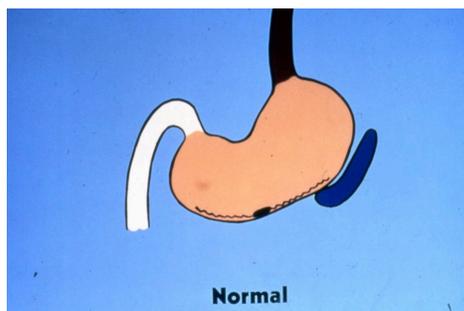
Gastric Dilation and Volvulus (GDV)

GDV which is commonly referred to as “bloat” is gas distention and rotation of the stomach. This is a life threatening condition that needs **immediate** medical and surgical intervention. The cause of GDV is unknown, but some contributing causes have been investigated. Stress, first degree relative, temperament, position of food bowls, type of food, motility disorders, and weight have been investigated as predisposing factors for development of GDV. However, having a first degree relative with a history of GDV is the only factor with a strongly associated with an increased risk of GDV. GDV usually occurs in large, deep-chested middle-aged to older dogs.

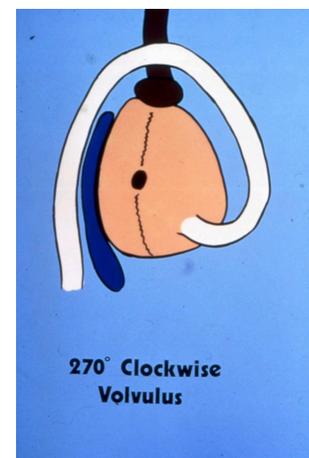
Clinical signs associated with GDV are progressively distending abdomen, nonproductive retching, salivation, and restlessness. Some dogs are found recumbent and unable to ambulate. Immediate medical attention is needed if any of these signs are noted in your pet.



Radiograph of a dog's abdomen with a GDV - note the enlarged food and air filled stomach



Diagrams showing the relationship of the esophagus (black), stomach (tan), spleen (blue) and intestine (white) in a normal dog (above) and a dog with a GDV (right).



Medical treatment is initially performed in patients with GDV to stabilize their cardiovascular system. A bolus of intravenous fluids will be given and then the stomach will be decompressed. Gastric decompression can either be performed by trying to pass a tube into the stomach through the mouth or by inserting a large bore needle into the stomach from the outside. Medical treatment only relieves the symptoms, it does not relieve the cause. Once the pet is stabilized, surgical correction is advised. Surgical treatment includes a celiotomy to explore the abdomen. The goal of surgery is to correct the malposition of the stomach and perform a gastropexy. Gastropexy is the creation of a permanent adherence of the stomach to the abdominal wall to prevent subsequent episodes of GDV. At surgery, the stomach is thoroughly inspected for any signs of necrosis or perforation. This can be common and a portion of the stomach may need to be removed (gastrectomy). The spleen can also become secondarily involved and become injured requiring its removal (splenectomy).

Complications associated with GDV include sepsis and peritonitis if the stomach has undergone any necrosis or has perforated before surgical intervention. This causes a severe infection of the abdominal cavity (peritonitis) or entire body (sepsis). This can be life threatening and needs to be treated aggressively. Cardiac arrhythmias can develop anytime during treatment for GDV. Medical treatment with anti-arrhythmic drugs can be instituted if necessary. The prognosis for GDV varies. Mortality rates can be as high as 45% if the patient develops complications. Dogs that require a gastrectomy or splenectomy are at increased risks for complications and have a higher mortality rate. The reported recurrence rate after surgical intervention including a gastropexy is less than 5%. If gastropexy is not performed, the recurrence rate is greater than 80%.