

# Splenic Masses

## Associated Terms:

Hemangiosarcoma, Angiosarcoma, Spleen Cancer, Spleen Nodule or Spleen Tumor

## OVERVIEW

**Splenic hematoma** & **Splenic nodular hyperplasia** are the most common non-cancerous lesions found in the spleen & account for 20–40% of all splenic lesions. They are benign nodules/masses of clotted blood. Surgical removal is CURATIVE.

**Hemangiosarcoma** is a common malignant tumor of the spleen usually seen in older dogs (8–10 years of age). Any large breed dog appears to be at an increased risk especially German Shepherds, Golden Retrievers, Labradors & standard Poodles.

## CLINICAL SIGNS & SYMPTOMS

**Clinical signs** associated with splenic masses can be subtle & include weakness or may be more obvious e.g. collapse & sudden death if the mass ruptures & bleeds internally. Mucous membranes, such as the gums, may be pale; the heart & respiratory rates can be increased.

Other signs can include:

- Abdominal Distention: distended lower abdomen.
- Fainting
- Inappetence
- Weight Loss
- Weakness

## DIAGNOSTICS

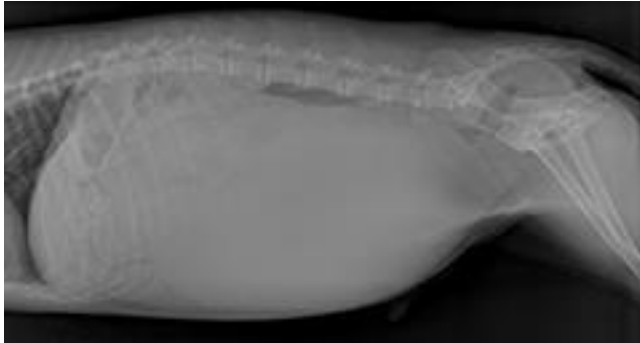


Figure 1.  
Radiograph of a dog showing a large splenic mass occupying most of the abdomen.

Your primary-care veterinarian may run several tests to obtain a presumptive diagnosis & to prepare for surgery.

These may include blood tests, urinalysis, a clotting profile, examination of fluid obtained from the abdomen; the chest & abdominal radiographs (Figure 1).

Abdominal ultrasound is another useful method to identify & characterize masses in the abdomen as well as look for free fluid or blood.

Echocardiography (ECHO: ultrasound of the heart) may be recommended as some dogs may have tumor spread to the heart.

## TREATMENT



Figure 2.

A spleen with a large splenic mass following complete removal of the spleen at surgery.

### *Surgery is the primary method of treatment for dogs with splenic masses.*

This involves removal of the spleen (splenectomy). Removal of the spleen is preferred to a biopsy as it serves as both a diagnostic & therapeutic procedure (Figure 2).

Patients are stabilized prior to surgery. This may require fluid therapy or a blood transfusion & intensive care monitoring.

The final diagnosis relies on microscopic examination the mass after surgical removal.

Splenic hematomas & hemangiomas as well as other benign disease can have a similar clinical presentation & must be differentiated from hemangiosarcoma.

Up to 2/3 of dogs with splenic masses have a malignant tumor (2/3 of these are hemangiosarcoma).

Dogs with a ruptured splenic mass requiring a blood transfusion are more likely to be diagnosed with hemangiosarcoma.

The remaining patients have benign masses that are effectively treated with splenectomy.

## **AFTERCARE & OUTCOME (Prognosis)**

Your dog's activity should be restricted to short leash walks only during the first 2 weeks of healing. Your dog may need to wear an E-collar, body suit &/or t-shirt to prevent self-trauma to the surgical site.

**Benign splenic masses are effectively cured with surgery.**

Unfortunately, survival times with surgery alone for dogs with hemangiosarcoma may be 2–3 months or less. One year survival is less than 10%. Ultimately dogs die from metastatic disease. Chemotherapy may increase survival times up to 6–8 months.

## **POSSIBLE COMPLICATION(s)**

Complications may include:

- Hemorrhage (ongoing bleeding)
- Pancreatitis (often manifested by vomiting)
- Cardiac arrhythmias (irregular heart rhythm): ECG to look for arrhythmias is recommended after surgery. While this may require treatment, most arrhythmias resolve within 24–48 hours.

If you have any questions, please feel free to ask your veterinarian &/or veterinary surgeon.

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