MJF COLLEGE OF VETERINARY AND ANIMAL SCIENCE, CHOMU, JAIPUR



DEPARTMENT OF VETERINARY PATHOLOGY

EDEMA HYPEREMIA AND CONGESTION **HEMORRHAGE HEMOSTASIS & THROMBOSIS EMBOLIS** Μ **INFRACTI** ON SHOCK

Embolis

• An embolus (plural emboli) is any foreign body floating in the blood.

• An embolus is an intravascular solid, liquid, or gaseous mass that is carried by the blood to a site away from its point of origin.

 The vast majority of emboli derive from a dislodged thrombus—hence the term thromboembolism

- However other types can occur
- In animals, more common in arteries and capillary
- In human, more common in veins

Type or Composition of emboli Thromboembolism

- Bacteria
- Parasites
- Fat emboli
- Air or gas emboli
- Other types of emboli

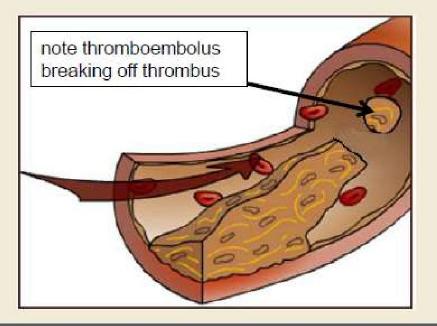
Thromboembolism

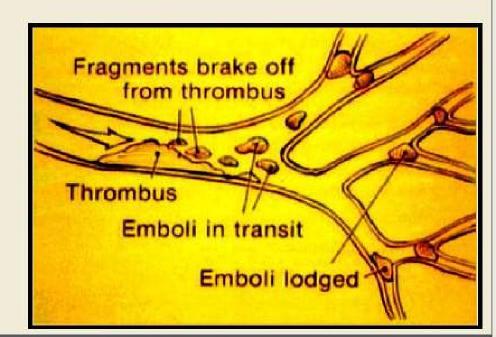
Thromboembolism

- occlusion of a blood vessel by an embolus that has broken away from a thrombus
- · localizes at point where it can not longer "fit" through

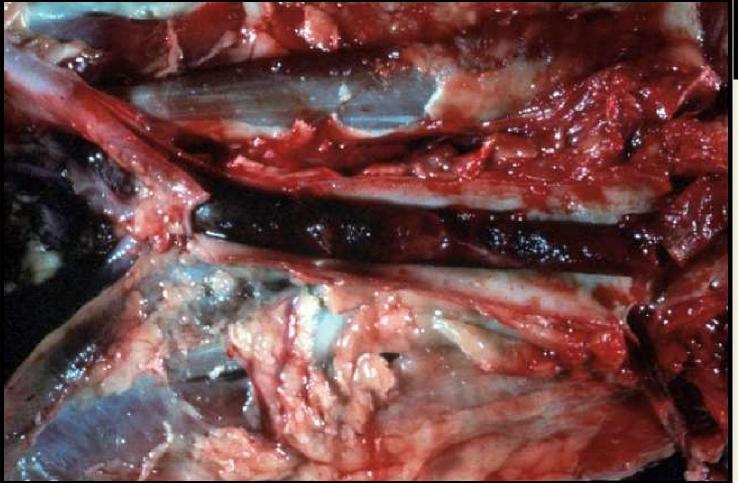
Thromboembolus / Thromboemboli (pl.)

• the piece(s) of thrombotic material transported in the bloodstream to another site





Thromboembolism





Thrombosis at a vessel bifurcation, gives a saddle shape to the thrombus, ie "saddle thrombus"

Fig. 2-35 Saddle thromboembolus, iliac-aortic bifurcation, cat. Cardiac thromboemboli usually lodge at the bifurcation of the aorta into the external iliac arteries with a portion of the thromboembolus entering each iliac vessel to form a saddle thromboembolus. A saddle thromboembolus is not attached to the wall of the aorta or iliac arteries and is easily removed at necropsy. The thromboembolus is composed of layers of platelets and fibrin in which there are enmeshed erythrocytes.

Infectious causes of Thrombosis or Thromboembolism

 bacteria or viruses can cause localized or widespread endothelial damage (thrombosis, +/- thromboembolism)





Bacterial endocarditis in cattle often involves the right AV valves. They often give rise to septic thromboemboli which shower and implant in small branches of the pulmonary artery, resulting in scattered inflammatory foci (ie embolic pneumonia)

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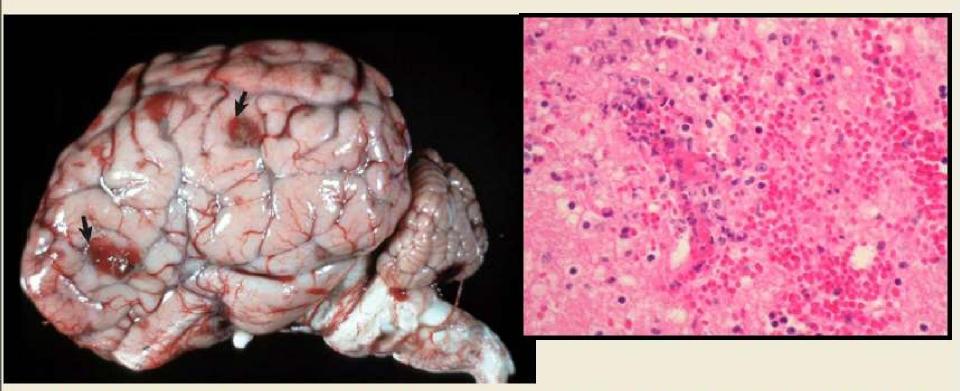
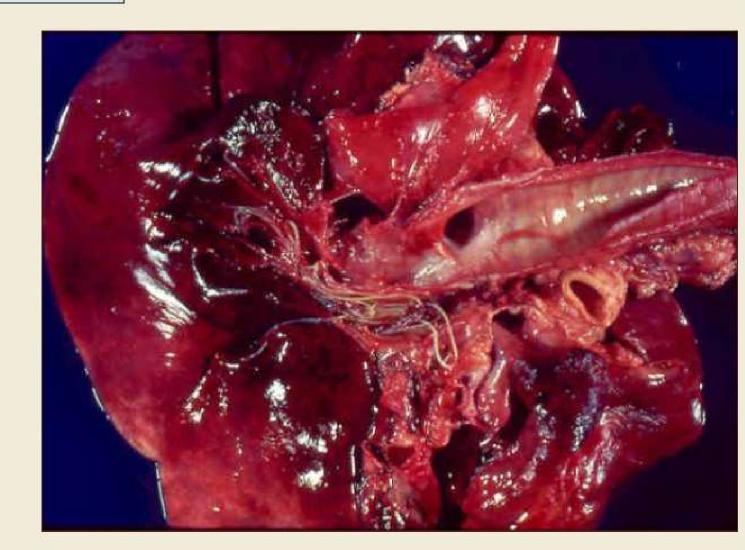


Fig. 14-48 Thrombotic meningoencephalitis (previously referred to as thromboembolic meningoencephalitis), cerebrum, steer. On the surface of the cerebral cortex (arrows) are several red-brown lesions. These lesions are areas of necrosis, hemorrhage, and inflammation secondary to vasculitis and thrombosis caused by Histophilus somni (formerly Haemophilus somnus). Such septic infarcts are distributed randomly (hematogenous portal of entry) throughout the central nervous system, including the spinal cord. The lesions depicted here are unusually severe.

Parasites - nematodes

Dirofilaria immitis



Parasites - Nematode larvae

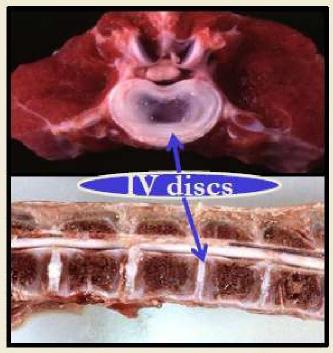
- Ascarid sp
- Strongylus vulgaris



Arteritis with thrombosis, cranial mesenteric artery, horse. Damage to the cranial mesenteric artery, by strongyle larval migration is relatively common in horses. Strongyle larvae are often found within the lesion (image to the right) and occasionally may be found within the resulting thromboemboli (most emboli don't contain the larvae).

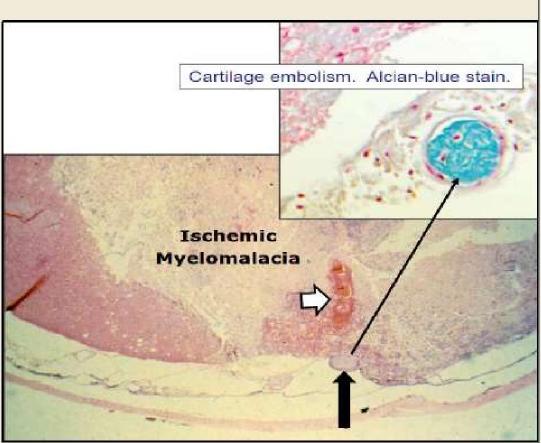
Fibrocartilagenous emboli

- traumatic implantion of intervertebral disk material into spinal vessels
- · causes necrotizing myelopathy (spinal cord infarcts)



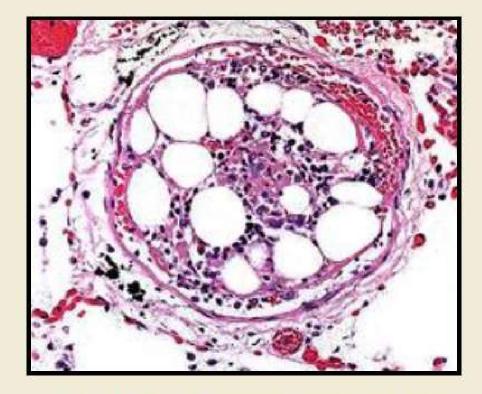
Fibrocartilagenous embolism, spinal cord, dog. Note vessel occluded with a cartilaginous embolism (large black arrow). As a result of the blocked vessel there is ischemic necrosis of the spinal cord (myelomalacia) with a focal area of hemorrhage (white arrow). At higher magnification (inset) the cartilaginous material

in vessels stains bright blue with an Alcian blue stain.



Fat

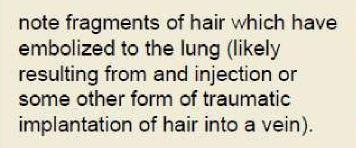
- bone fractures
- prolonged surgery
- osteomyelitis

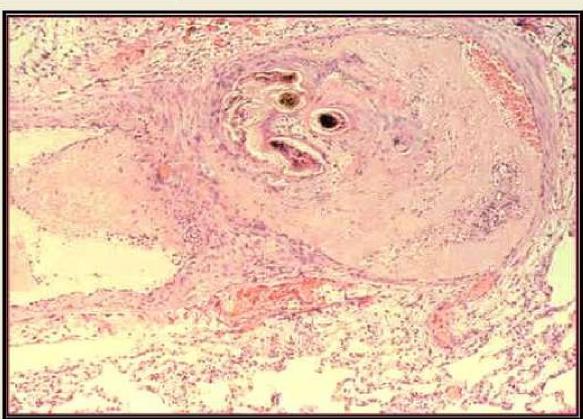


Fat embolus in a pulmonary artery, human. Note, bone marrow embolus in a medium-sized artery in the lung of a human patient following CPR (trauma).

Other

- foreign material (eg hair, air bubbles)
- tumor cells
- amnionic fluid
- etc





Composition of

Emboli

Air or gas emboli

Small amount of air during IV- no clinical

significance

• More than 100 ml – clinical significance **Caisson disease/Decompression** sickness (DCS) / Bends(pain): is a condition that occurs when divers come back to the surface too quickly after being deep under water. It is caused by the formation of nitrogen bubbles in the bl and, in the worst cases, c death.





EDEMA HYPEREMIA AND CONGESTION **HEMORRHAGE HEMOSTASIS & THROMBOSIS EMBOLIS** Μ **INFRACTI** ON SHOCK

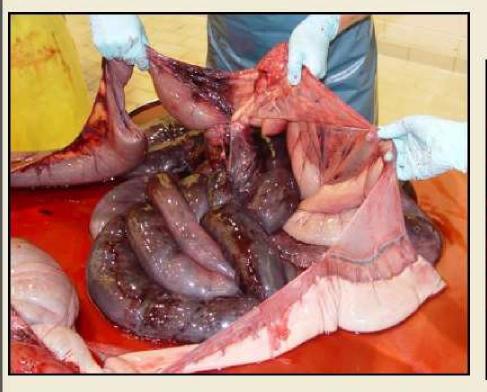
Infarction

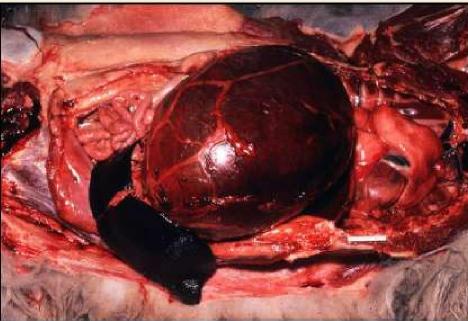
An infarct is an area of ischemic necrosis caused by occlusion of either the arterial supply, or rarely the venous drainage in a narticular tissue • ~40% of human deaths result of CV disease, esp infarction (heart & brain) • Pulmonary, intestinal and renal infarction most common in animals

Infarction :

Etiology Artery or Venous obstruction Thrombi and emboli : Most common Torsion, volvulus Narrowing of an artery Compression of arteries by expanding tumours, abscesses, cysts, or by inflammatory fibrous adhesions \triangleright Poisonous compounds or drugs, such as ergot by inducing contraction of the musculature of arterial walls

Acute Blockage of Portal Venous System





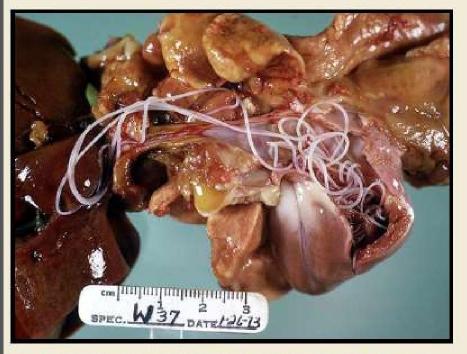
Venous infarction of a segment of small intestine due to strangulation by a pedunculated lipoma

Gastric volvulus (torsion) in a dog \rightarrow twisting of vessels \rightarrow obstructs gastric portion of portal venous system \rightarrow severe venous congestion (acute, local, congestion) \rightarrow ischemia (necrosis) \rightarrow loss of endothelial integrity \rightarrow hemorrhage \rightarrow shock \rightarrow death

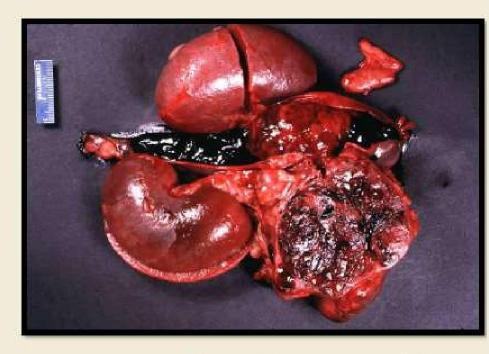
Blockage of Posterior Vena Cava

Etiology

• in dogs, heartworm (high burdens) or tumor invasion



With heavy burden of heartworm, adults can sometime be in right heart (ventricle & atria) and caudal vena cava.

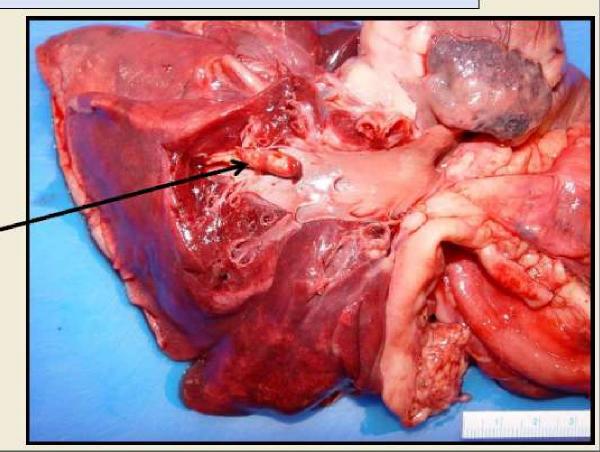


Pheochromocytoma (adrenal medullary tumor), dog. Note local invasion of vena cava which would impair venous return.

Pulmonary Artery Thrombosis

- can be due to a variety of causes:
 - > pneumonia
 - parasities (eg heartworm)
 - hypercoagulability (eg nephrotic syndrome, hyperadrenocorticism)
 - liver abscess (ruminants)
 - deep vein thromboembolism (humans)

note large thrombus in the pulmonary artery of a dog with hypercoagulability due to Cushing's disease (hyperglucocorticoidism)

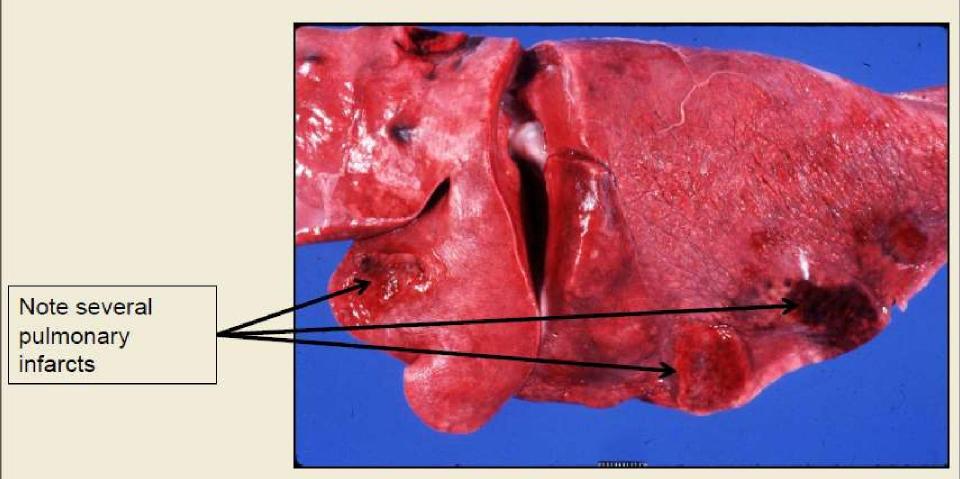


Pulmonary Artery Thrombosis

Result

depends upon size of artery blocked: Large artery → death

Small artery → infarction (usually red)



Types of Infarcts or Gross

Mornhology

1. Red Infarct or hemorrhagic

- Venous infarction (no drainage)
- In loose tissues (e.g., lung) where blood can collect in infarcted zones
- in tissues with dual circulations such as lung and small intestine





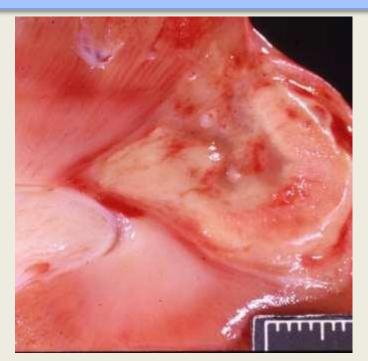
Types of Infarcts or Gross

Marphalagy

2. White infarcts or Pale/anaemic

- Arterial occlusions
- In solid organs with end-arterial circulations (e.g., heart and kidney)
- Tissue density limits the seepage of blood from adjoining vascular beds





Types of Infarcts or Gross

Marphalagy

3. Septic Infarct or Bend
mostly from a septic (bacterial infected) thromboembolus
occasionally necrotic tissue seeded by opportunistic bacteria



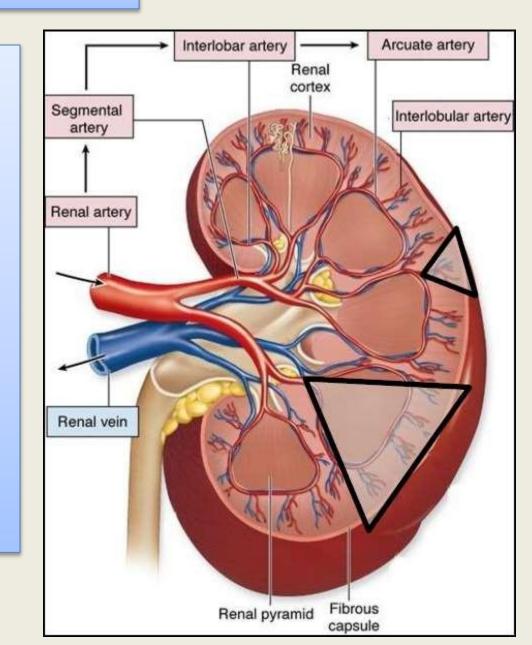
Myocarditis, necrosuppurative focal. dog. This focal area of myocardial necrosis and inflammation is due to a septic infarct resulting from valvular endocarditis due to *Staphylococcus spp*

Pathogenesis of Infarction • Often wedge-shaped

 Early – ill defined & hyperemic/congested

 red – After 24 hrs. coagulation necrosis sharply defined within
 72 hours

• Later – may become more pale



Factors that Influence Development of an Infarct

- 1. Nature of the vascular supply
 - collateral circulation : liver & lung- Not common
 - kidney + spleen -single arterial supply More
- 2 Raterofmervelopment of
- 3. Vulnerability to hypoxia
 - Neurons : 3 to 4 minutes
 - Myocardial cells : 20 to 30 minutes
- 4 O2 content of blood at time of
 - infarctormally low blood O2 due to anemia
 - Increases both the likelihood and extent of infarction.

Infarction – Histology

ischemic necrosis of affected tissue





- scar tissue replaces parenchyma
- · fibrous tissue contracts forming depression / indent on surface





EDEMA HYPEREMIA AND CONGESTION **HEMORRHA** GE **HEMOSTASI** S THROMBOSI S **EMBOLISM INFRACTION**

SHOCK

 "haemodynamic disorder characterized by inadequate systemic blood circulation (hypoperfusion) due to a reduction either in the cardiac output, or in the effective circulatory blood volume"

SHOCK

Final common pathway for:

- Microbial sepsis
- Severe hemorrhage
- Extensive trauma or burns
- Myocardial damage
- Severe pulmonary embolism
- Results in impaired tissue perfusion and cellular hypoxia
- Brain and heart are organs most susceptible to ischemic damage

SHOCK

- On basis of clinical conditions is best divided into four pathophysiological types:
 - (1) Hypovolemic shock
 - (2) Cardiogenic or cardiac shock
 - (3) Blood Maldistribution (Vasogenic Shock)
 - a. Anaphylactic Shock release of vasoactive amines
 - **b.** Neurogenic Shock
 - c. Septic Shock release of chemical

Hypovolemic shock

- Decreased circulating blood volume due to
 - Blood loss from hemorrhage
 - Fluid loss (eg vomiting, diarrhea, burns)

Hypovolemic shock – Decreased Intravascular volume Decreased Cardiac output S/Sx: Decreased BP Shift of interstitial fluid Increased HR. Catecholamine contractility release Increased Aldosterone, ADH Volume Increased SVR Spleenic Discharge Increased Cardiac Output More volume loss Decreased Decreased Systemic Cardiac output and pulmonic pressures Decreased Tissue perfusion Impaired cellular metabolism Nurseonlineph

Cardiac shock

- Failure of heart to adequately pump blood may be due to
 - Myocardial infarction
 - Arrhythmias (eg ventricular tachycardia)
 - Cardiomyopathy
 - Obstruction of blood flow

Similar Pathogenesis like hypovolemic shock

Septic or endotoxic shock

Pathogenesis

microbial substances (esp LPS) are released from bacteria

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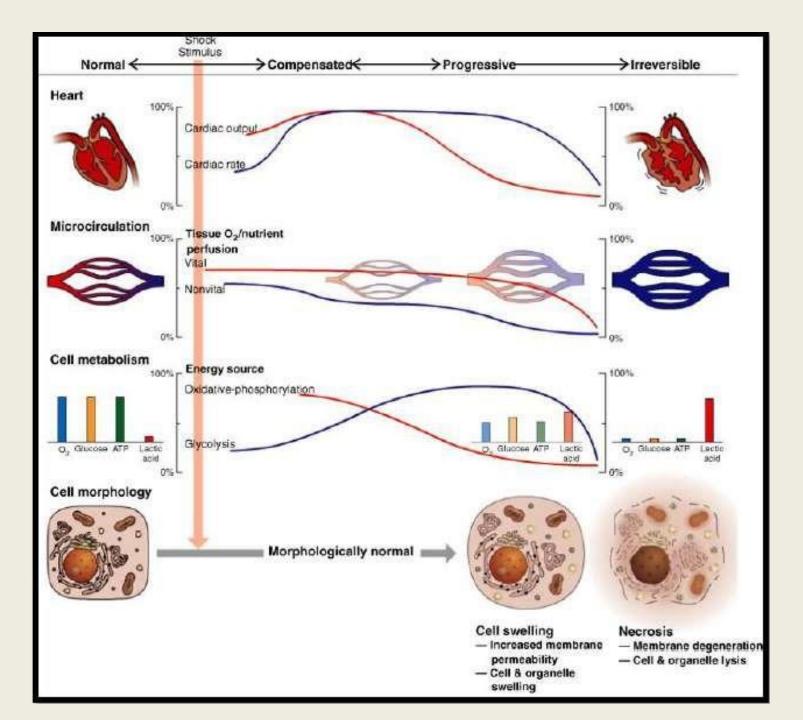
activation / injury of endothelial cells + stimulates WBC's to release cytokines

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vasodilation, prothrombotic (DIC), complement activation, etc

Stages of Shock

- 1. Initial Nonprogressive shock
- 2. Progressive stage
- 3. Irreversible stage



Lesions of Shock

- Pulmonary congestion & edema (cattle and horses)
- Hepatic congestion (dog)
- Kidneys acute tubular necrosis
- Heart hemorrhage and necrosis
- Blood vessels endothelial damage (thrombosis / DIC)
- Brain neuronal cell death
- Adrenal glands hemorrhage and necrosis
- GI tract congestion and necrosis