

# **Atypical or Odd Clinical Presentations in Veterinary Patients**

**By Joseph M. Bruner DVM ACVIM**

This presentation examines a series of unusual and clinically challenging cases in dogs and cats - situations where the physical exam, neurologic signs, or lab results don't immediately match the underlying disease. Using video examples, case reviews, and recent studies, the session demonstrates how unexpected symptoms can change our diagnostic approach and expand our understanding of both common and rare disorders.

We begin with movement disorders, an area where subtle distinctions matter. Hyperkinetic signs such as tremors, myoclonus, tics, and episodic jerks often prompt concern for seizures, yet many represent non-epileptic phenomena. Cervical "myoclonus" in dogs, for example, was shown in a 2023 JAVMA study to be strongly associated with acute cervical intervertebral disc disease - even though 75% of affected dogs had no neck pain. Similarly, idiopathic head tremor syndrome (IHVS) remains a benign, self-limiting condition in most dogs, but recent ACVIM data reveal that nearly one-third of cases actually have structural brain disease, emphasizing the need for careful neurologic evaluation. Other movement-related presentations blur the line between neuromuscular and endocrine disease. Myoclonus in older Cavalier King Charles Spaniels, episodic mandibular tremors, and facial myokymia - described as "worms wiggling under the skin" - illustrate how focal hyperexcitability can arise from diverse etiologies, including KCNJ10 mutations, inflammatory neuropathies, or idiopathic syndromes. Endocrine disease adds another layer: dogs with hyperadrenocorticism may develop profound muscle stiffness, trismus, or gait rigidity. In one study of 37 dogs with Cushing's disease, only five showed improvement despite treatment, underscoring the chronicity of steroid-related myotonia. The presentation then shifts to behavioral and gastrointestinal intersections. Excessive licking of surfaces (ELS), often mistaken for compulsive behavior, has been associated with underlying GI disease. In a study of 19 affected dogs, 14 had identifiable gastrointestinal pathology, and most improved with targeted treatment or diet trials. This reinforces the importance of ruling out medical causes before labeling behaviors as primary compulsions. We also examine spontaneous vocalization - brief, sharp cries occurring "out of nowhere." Recent data from over 270 dogs show a strong association with cervical spinal disease, particularly intervertebral disc extrusion, even in neurologically normal patients. These cases remind clinicians that pain behaviors may be fleeting, inconsistent, or easily missed during examination. Beyond neurologic and behavioral presentations, the talk highlights atypical laboratory and anatomic findings. Endocrine disorders such as hypothyroidism and hyperadrenocorticism have well-documented associations with gallbladder mucocoeles, and recognizing these links can guide earlier screening and intervention. Conversely, some findings that appear abnormal are actually normal variants - such as the characteristically enlarged spleens of Basset Hounds. Understanding these breed-specific norms prevents unnecessary diagnostics and client anxiety.

Throughout the presentation, video clips illustrate how these unusual signs appear in real patients, helping clinicians refine their pattern recognition. The overarching message is that unexpected clinical signs often have logical explanations once the underlying pathophysiology is understood. By remaining curious, avoiding assumptions, and integrating emerging research, veterinarians can more accurately diagnose and manage conditions that initially seem perplexing.