

# DIAGNOSTIC APPROACH TO HYPOGLYCEMIA

David Bruyette, DVM, DACVIM  
Chief Medical Officer  
Anivive Lifesciences  
3250 Airflite Way, Suite 400  
Long Beach, CA 90807  
[David@anivive.com](mailto:David@anivive.com)



[www.veterinarydiagnosticinvestigation.com](http://www.veterinarydiagnosticinvestigation.com)

# APPROACH TO HYPOGLYCEMIA

Fasting glucose concentration

Declining insulin concentrations

Gluconeogenesis

Glycogenolysis

# APPROACH TO HYPOGLYCEMIA

Fasting glucose concentration  
70 mg/dl

Counterregulatory Hormones

- Epinephrine
- Glucagon
- Cortisol
- Growth hormone

# APPROACH TO HYPOGLYCEMIA

Clinical signs and severity of hypoglycemia

Rate of fall

Glucose concentration

Duration of hypoglycemia

# APPROACH TO HYPOGLYCEMIA

Adrenergic signs

Restlessness; Muscle fasciculations

Neuroglycopenic signs

Hunger

Weakness/collapse

Ataxia

Seizures

Blindness

# ETIOLOGY OF HYPOGLYCEMIA

Laboratory error

Hypoadrenocorticism

Juvenile (puppy)

Sepsis

Glycogen storage

Hepatic disease

Hunting dog

Neoplasia (non-pancreatic)

Ketotic hypoglycemic

Islet cell tumors

# INSULINOMA

May produce a variety of hormones

Insulin

Pancreatic polypeptide

Somatostatin

Glucagon

Gastrin

# INSULINOMA

## Signalment

Median age 10 yrs (3.5 to 14)

No sex predilection

Breed predisposition

Boxer

German shepherd

Irish setter

Golden retriever

# INSULINOMA

## Clinical signs

Seizures (68%)

Collapse (34%)

Generalized weakness (33%)

Posterior weakness (33%)

Depression/lethargy (19%)

Ataxia (19%)

Exercise intolerance (10%)

Weight gain (8%)

# INSULINOMA

## Physical examination

Usually unremarkable

Geriatric abnormalities

Status epilepticus

Comatose

# INSULINOMA

Peripheral Polyneuropathy

Hindlimb paresis

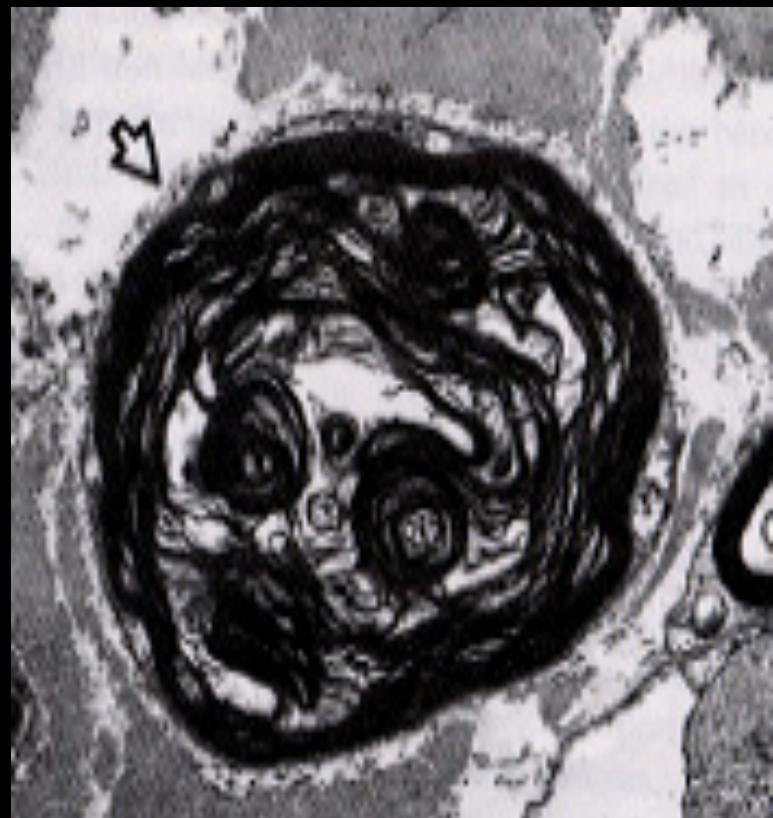
Quadripareisis

Proprioceptive deficits

EMG's

Fibrillation potentials

Positive sharp waves



# INSULINOMA

Diagnosis

Whipple's Triad

Fasting hypoglycemia

Clinical signs of hypoglycemia

Response to glucose administration

# INSULINOMA

Diagnostic approach

Blood glucose < 60 mg/dl

Multiple samples

Close monitoring

# INSULINOMA

Diagnostic approach

Insulin/glucose ratio

Glucose/insulin ratio

Amended insulin/glucose ratio

# INSULINOMA

Diagnostic approach

Insulin/glucose pairs

Normal to elevated insulin

Hypoglycemia

# INSULINOMA

Diagnostic approach

CBC, SMA and UA

Radiography

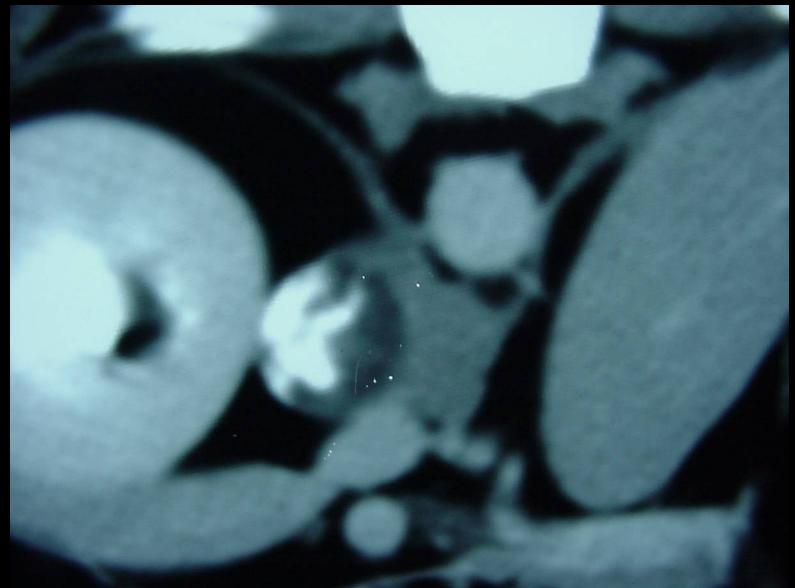
Thorax and abdomen

Ultrasonography

Pancreatic mass

Lymphadenopathy

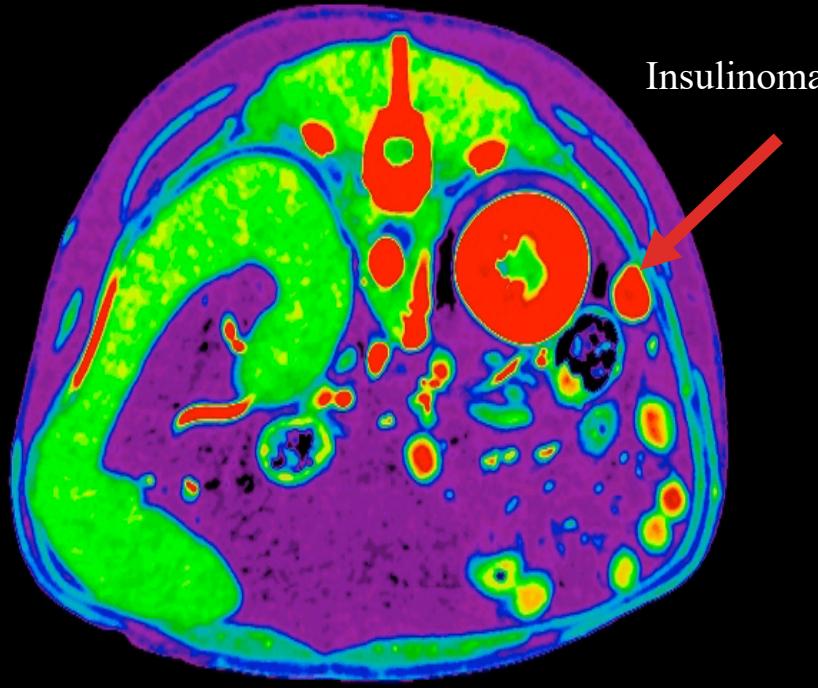
Metastasis

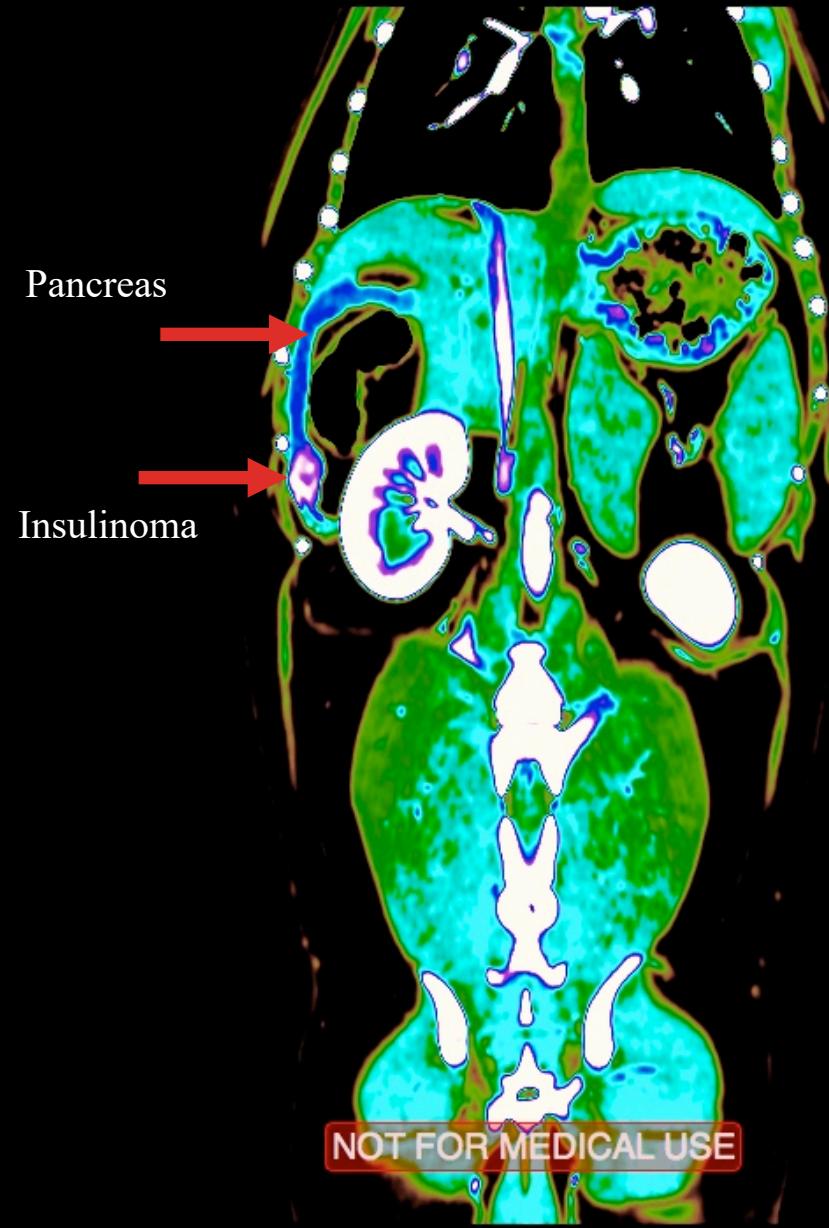


Pre-Contrast



Post-Contrast





Insulinoma



# INSULINOMA

Emergency Treatment

IV Dextrose (50%)

0.5 ml/kg

Followed by 5 % dextrose infusion

Cerebral edema

Mannitol

Glucocorticoids

# INSULINOMA

Treatment

Surgery

Confirmation

Staging

51 % have visible metastasis

22 % hepatic

15 % lymph node

Removal

# INSULINOMA

## Surgery

### Localization

Right lobe	(36 %)
Left lobe	(38 %)
Body	(7 %)
Multiple	(14 %)
No mass	(20 %)

# INSULINOMA

Surgical Procedure

Suture fracture technique

Dissection technique

Similar complication rates

Post-operative pancreatitis

No mass ???

# INSULINOMA

## Pathology and Natural Behavior

Small, tan nodules

14 % have multiple masses

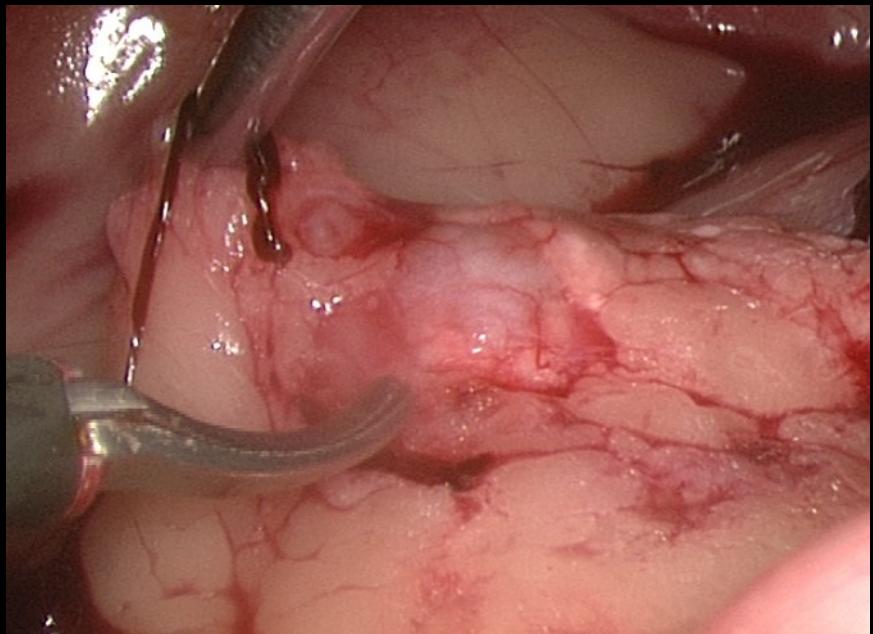
Diffuse hyperplasia is rare



# INSULINOMA

Pathology and Natural  
Behavior

Normal appearing islets  
Irregular nests  
Stromal proliferation



# INSULINOMA

## Medical Therapy

Frequent feedings

Owner awareness of hypoglycemia

Prednisone

0.25 to 2.0 mg/kg BID

# INSULINOMA

Medical Therapy

Diazoxide

Benzothiadiazene

Inhibition of insulin release

Hepatic gluconeogenesis

Decreased glucose uptake

# INSULINOMA

## Medical Therapy

### Diazoxide

5.0 to 30.0 mg/kg BID

In conjunction with thiazide diuretic

2.0 to 4.0 mg/kg BID

Vomiting, diarrhea, anorexia

Administer with meals

Availability

# INSULINOMA

Somatostatin

Octreotide acetate

50 - 100 mcg SC or IV TID to QID

Limited use in dogs

3/5 responded for 9 – 12 months

# INSULINOMA

Streptozotocin

500 mg/m<sup>2</sup> IV infusion

Selective beta cell toxin

Limited renal toxicity with diuresis

Treatments q 3 weeks; 5 treatments

# INSULINOMA

## Prognosis

Median survival

11.5 months (114 dogs)

With metastasis

8.4 months

No metastasis

14.5 months

Diabetes is a good prognostic  
indicator