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## ASAC

### Issue Description

*An anal sac adenocarcinoma is an uncommon and aggressive malignant tumor found in dogs that arises from the tissue of anal sac. They are the second most common cancerous cause of hypercalcaemia (high serum calcium) in dogs.*

### Other Names

*Anal Sac Adenocarcinoma*

### Breeds Commonly Affected

English Cocker Spaniel  
German Shepherd Dog  
Alaskan Malamute  
Dachshund  
Springer Spaniel

### Symptoms

Anal sac adenocarcinomas first appear as small lumps associated with one of the anal sacs, but they can grow to a large size. Smaller tumors are undetectable without a rectal examination, while larger tumors can cause pain and straining to defecate. Between 25-50 percent of dogs with these tumors will also develop hypercalcaemia through secretion of parathyroid hormone-related protein by the tumor. Symptoms of hypercalcaemia include increased drinking and urination, vomiting, loss of appetite, weight loss, and bradycardia (slow heart rate). Anal sac adenocarcinomas also have a tendency to metastasize to the lymph nodes, spleen, and lungs. The sublumbar (iliac) lymph nodes are the most common site of metastasis and can become larger than the original tumor.

### Diagnosis

Anal sac adenocarcinomas are often suspected due to location and behavior, but a biopsy is necessary for a definitive diagnosis. Needle aspiration biopsy is a common first step. Cytology reveals clusters of cells with uniform round nuclei. These cells do not have many of the features usually associated with malignancy, such as a high nucleus to cytoplasm ratio or prominent nucleoli. Ultrasonography and radiography are performed to look for metastasis.

### Treatment

Aggressive surgical removal of the tumor and any enlarged sublumbar lymph nodes is essential for treatment of the tumor and associated hypercalcaemia. There is a high recurrence rate, although removal of lymph nodes with metastasis may improve survival time. Radiation therapy and chemotherapy may be helpful in treatment. Severe hypercalcaemia is treated with aggressive IV fluid therapy using sodium chloride and medications such as loop diuretics (increased kidney excretion of calcium) and aminobisphosphonates (decreased calcium release from bones).

### Prognosis

Because of the prognostic significance of tumor size at diagnosis and the presence of metastatic disease, the most favorable prognosis can be expected with early detection and aggressive treatment. Although hypercalcemia has been associated with a decreased survival time in some studies, it has not been a consistent finding.

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