

# A CASE OF ENDOCARDIAL FIBROELASTOSIS IN A LLAMA (*Llama cria*)

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## ABSTRACT

In this communication, we aimed to describe a case of endocardial fibroelastosis in a *Llama cria*. Macroscopic examination revealed that the endocardial tissue of the heart had a gray-white appearance. However, cardiovascular malformations and myocardial necrosis/injury were not seen. Microscopic examination of the heart showed severe endocardial thickening due to the proliferation of elastic and collagen fibres.

**Key words:** Endocardium, fibroelastosis, heart, histopathology, llama

Endocardial fibroelastosis (EFE) is a rare heart disease characterised by thickening of the endocardium due to collagenous and elastic tissue (Rodriguez *et al*, 2018). Primary EFE is a congenital heart disease with an unknown cause that affects humans and animals. No other anatomical cardiac or vascular anomalies are encountered in this condition (Paasch and Zook, 1980; Robinson and Robinson, 2016; Zook *et al*, 1981). In the secondary form, there may also congenital cardiovascular malformations, viral myocarditis (Noren *et al*, 1974), cardiomyopathy (Liu, 1970), myocardiosis, localised endocardial thickening which is secondary to myocardial necrosis and endomyocardial injuries (Zook and Paasch, 1982), myocarditis observed with carnitine deficiency (Wolfson *et al*, 1990) and glycogen storage diseases (Zook *et al*, 1981), left hypoplastic heart syndrome (Lurie, 2010; McElhinney *et al*, 2010) and autoimmune reactions (Aoki *et al*, 2011) but distinction between primary and secondary forms may be difficult (Krahwinkel and Coogan, 1971). First EFE was reported in cats and dogs (Eliot *et al*, 1958). This condition was also reported in people, horse, cattle, chicken, tiger and pallas cat (Bentley, 1999; Carvalho *et al*, 2019; Cushing, 2013; Gudenschwager *et al*, 2019; Hananeh and Ismail, 2018; Lurie, 2010; Pass, 1983; Rodriguez *et al*, 2018). In this case report, we aim to present an EFE case in *Llama cria* with histopathological findings.

## Case Report

A 7 months old *Llama cria* of Antalya Zoo, was necropsied after death, and internal organs

were sent to the department. Tissue samples were fixed in 10% formalin and then following routine follow-up procedure, tissues embedded in paraffin, 5 µm cut sections were made and stained with Haematoxylin-Eosin and Verhoeff-van-Gieson. Stained sections were examined under light microscope. Macroscopically, there was no myocardial necrosis, endomyocardial injuries or cardiovascular malformations, but endocardium was grey-white colour. Liver was diffusely pale. Microscopically, there was diffuse mild degeneration in liver and necrosis in some hepatocytes. In the heart, left endocardium was markedly thick due to dense connective tissue proliferation (Fig 1). With Verhoeff-van-Gieson staining, dark stained, dense elastic fibrils within the area of endocardial thickening was observed (Fig 2).

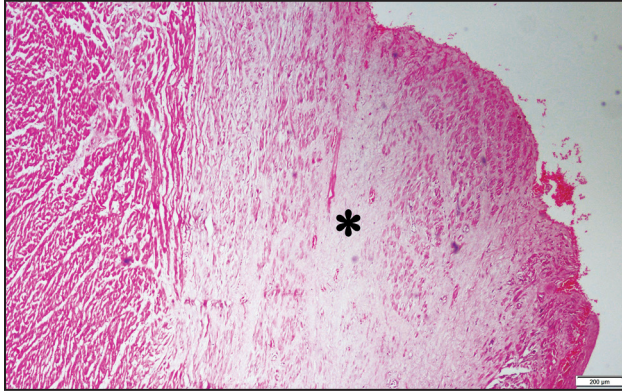
The microbiological analysis of fresh tissue samples did not reveal any bacterial or viral agent.

## Discussion

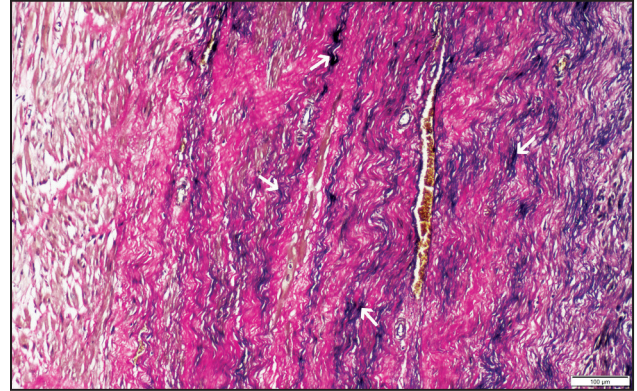
Macroscopically, fibroelastosis was mostly characterised by diffuse opaque and whitish endocardial thickening in the left ventricle (Lurie, 2010). Similarly, we observed diffuse grey to white thickening of the left ventricle. Microscopically, ventricular endocardial thickening due to accumulation of elastic and collagen fibres was demonstrated by Verhoeff-van-Gieson staining which has been reported previously (Eliot *et al*, 1958). EFE should be distinguished from a heart tumour fibroelastoma which affects heart valves and adjacent

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**Fig 1.** Wide fibroelastosis area in the endocardium extending into the myocardium. (asterisk). Haematoxylin-Eosin, Bar: 200  $\mu$ m.



**Fig 2.** Elastic fibrils in the EFE area (arrows), Verhoeff-van-Gieson, Bar: 100  $\mu$ m.

endocardium reported in humans (Lurie, 2010). We distinguished the case of fibroelastoma due to the diffuse appearance.

Primary EFE is a familial disease in humans (Paasch and Zook, 1980), feline species (Paasch and Zook, 1980; Rozengurt, 1994; Zook and Paasch, 1982). There have been suggested mechanisms of genetic transmission in some reports (Hanukoglu *et al*, 1986; Westwood *et al*, 1975). Most patients with primary EFE die due to congestive heart failure within 1 year after birth (Rozengurt, 1994). We believed that our case is primarily congenital EFE because of absence any other cardiac and vascular anomaly. However, genetic analysis could not be performed. There is a report of atrioventricular septal defect in llama (Cebra *et al*, 2015) but according to the authors' knowledge, there is no any report of EFE in llamas.

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