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Invited presentation

Are there any clues for lesion localisation in neurologic disorders?

Ebru Eravcı Yalın

Istanbul University-Cerrahpasa Veterinary Faculty, Department of Surgery, Istanbul, Turkey.

Abstract

The main component of a neurologic examination are evaluation of mental status and behavioral changes, posture and gait analysis, postural reactions, cranial nerve examination, pelvic and thoracic limbs reflexes and paravertebral palpation, palpating muscle tone and muscle atrophy, cutaneous trunci reflex and nociception testing, urinary bladder palpation and perineal reflex. After this neurologic examination we can localize the neurologic lesion by using our neuroanatomy knowledge. For diagnosing and localisation the neurologic lesion, we do not need a deep neuroanatomic knowledge and to perform every step of the neurological examination. To know clinical signs are observed when spesific regions of the nervous system are affected is sufficient for us. Differentiating the presence of the forebrain lesion in a large circling dog, and the vestibular lesion in a small circling dog, diagnosing a neck or back lesion according to posture of the patient and making a localisation for spinal cord lesion with only patellar reflex and withdrawal reflex, are possible with functional neuroanatomy knowledge.

Keywords: neurologic examination, withdrawal reflex, gait analysis, cat, dog