

and three (25%) were castrated males. Eight (67%) cats were domestic shorthairs, and two (17%) were domestic longhairs. One (8%) Maine coon and one (8%) Persian were also included.

The location of the tumors were hip/lumbosacral (3/12, 25%), caudal thigh (2/12, 17%), interscapular (2/12, 17%), lateral abdomen (2/12, 17%), paralumbar (2/12, 17%), and lateral thorax (1/12, 8%). The number of times the tumor had occurred at that location ranged from one to five times, with a mean and median of 2.4 and 2.5 times, respectively. In all cases, surgery had been the only previous treatment for the tumor. For first-time occurrences (4/12), the tumor was judged to be nonresectable at initial presentation. An incisional biopsy was made to obtain a histopathological diagnosis in two cats. The two other cats had debulking surgeries. In two cases of recurrent tumors, the recurrence at the site of the primary tumor was likely resectable, but surgery was not performed due to the finding of presumptive pulmonary metastatic disease. The recurrent tumors in the remaining six cases were judged to be nonresectable by a veterinary surgeon.

As a part of initial staging, all cats had thoracic radiographs

done. Two of 12 (17%) cats had radiographic evidence of gross pulmonary metastatic disease. Histopathological confirmation of metastasis was not pursued. Complete blood counts and serum biochemistry panels performed on all cats revealed no significant abnormalities in any of the animals. Urinalysis results were available for six cats, all of which were within reference ranges.

Review of the vaccination histories revealed that all cats received multiple doses of feline viral rhinotracheitis-calicivirus-panleukopenia (FVRCP) and rabies vaccines. Eleven cats were also vaccinated against FeLV. The sites of vaccine administration and vaccine type could not be reliably determined from the medical records or conversations with the referring veterinarians.

The number of chemotherapy cycles administered to the cats in this study ranged from two to six, with a mean and median of 3.8 and four cycles, respectively. The initial dose of doxorubicin administered ranged from 20 to 30 mg/m², with mean and median doses of 25 mg/m².

Major responses were documented in two (17%) cats. The durations of the MR were 153 and 190 days. Partial

Table 1
Summary of Cases of Nonresectable Feline Fibrosarcoma Treated With Doxorubicin and Cyclophosphamide Chemotherapy

Case No.	Sex*	Age (yrs)	Tumor Site	No. of Occurrences	Doxorubicin Dose (mg/m ²)	No. of Cycles	Response†	Response Duration (days)‡	Survival Time (days)	Other Therapies
1	FS	14	Thigh	1	25	4	SD	—	89	
2	FS	8	Paralumbar	1	20	3	SD	—	42§	
3	FS	11	Paralumbar	1	30	3	SD	—	77	
4	FS	9	Interscapular	3	25	4	PR	100	407	Surgery (3 times)
5	MC	5	Interscapular	3	25	4	PR	41	242	
6	MC	4	Hip/lumbar	4	30	2	PD	—	30§	
7	MC	8	Lateral thorax	1	25	4	MR	153	355	Carboplatin IV [\] and intralesionally
8	FS	14	Thigh	2	20	5	MR	190	286	Surgery
9	FS	10	Hip/lumbar	3	25	6	PR	106	277	
10	FS	17	Hip/lumbar	3	25	6	PR	144	223	
11	FS	11	Lateral abdomen	2	25	2	PD	—	315	Carboplatin intralesionally
12	FS	15	Lateral abdomen	5	25	2	PD	—	140	Carboplatin IV

* FS=female spayed; MC=male castrated

† SD=stable disease; PR=partial response; PD=progressive disease; MR=major response

‡ Response duration=the time (in days) between the date of administration of the doxorubicin dose immediately preceding the response until the date on which tumor progression was documented or the date of surgery to remove resectable residual disease

§ Cat lost to follow-up

\ IV=intravenously