Top 20 Feline Conditions Part 2

Paws to update yourself on this list of the top 20 feline, 6-10!

6. [Injection site sarcoma]

Cat after radical surgery to remove injection-site sarcoma

- **Classic case:** Mass at/near site of previous vaccination with vaccine up to ten years previously
- **Dx:** Follow the [“3-2-1” rule] created by the Vaccine-Associated Feline Sarcoma Task Force: Any mass that...
  - Persists more than 3 mos after vaccination
  - Is greater than 2 cm diameter
  - Increases in size more than 1 mo post-injection
- Fine needle aspirate or incisional biopsy (often more diagnostic)
- Staging: histopathology, thoracic radiographs, CBC, serum chemistries, urinalysis, +/- CT and MRI
- **Tx:**
  - Surgery at referral center - need radical excision; 5-cm wide margins, 2 fascial planes deep
  - Adjuvant radiation therapy
  - Adjuvant chemotherapy may benefit
- **Pearls:**
  - Prognosis:
    - Local recurrence/ invasion is most common cause of death
    - Metastasis most common to lungs
    - Median survival after surgery is 274 d at referral hospital vs. 66 d at primary care center
  - Always document in medical record: vaccine name, serial number, expiration date, manufacturer, site and route of administration
  - Individualize vaccine recommendations
  - Association with specific vaccines or medications is controversial
  - [Vaccine site recommendations]:
    - Rabies: SQ distal right pelvic limb
    - FeLV: SQ distal left pelvic limb
    - FVRCP: SQ distal right thoracic limb

7. [Panleukopenia]
   - **Classic case:**
     - Dehydration, depression, fever, hypothermia, vomiting, diarrhea, seizures

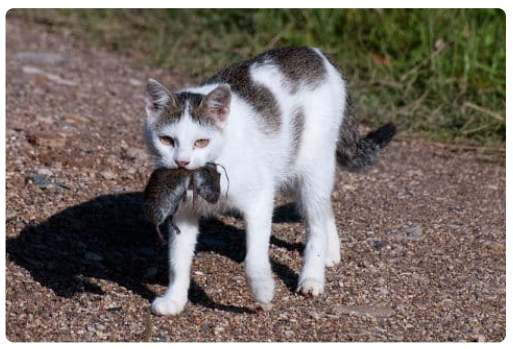
- Thick intestinal loops
- Intention tremors; wide-based stance (cerebellar hypoplasia from *in utero* infection)

- **Dx:**
  - Profound leukopenia (WBC count 500-3000/ul), thrombocytopenia, hypoalbuminemia
  - Canine parvovirus fecal test
    - May be accurate in cats 24-48 hrs post-infection (will be positive up to 2 wks post-FVRCP vaccine)
- **Tx:**
  - Fluids: for dehydration and maintenance needs with IV, SQ, or intraosseous
  - Plasma or whole blood if total protein less than 4 g/dl
  - Parenteral B complex to prevent thiamine deficiency
  - Antibiotics with gram-negative coverage (e.g., ampicillin)
  - Treat persistent vomiting (metoclopramide, maropitant, odansetron)
- **Pearls:**
  - Degree of neutropenia and thrombocytopenia parallel clinical disease and prognosis
  - Use 1:32 bleach solution to kill parvovirus
  - Vaccination is very effective prevention

Kittens are affected most severely by panleukopenia

8. Toxoplasmosis

- **Classic case:**
  - Outdoor cat with access to rodents
  - Indoor cats at risk from insects
  - Clinical signs can occur mos to yrs after initial infection if immunosuppressed
  - Chorioretinitis, neuro signs, GI signs, coughing, icterus, muscle pain
- **Dx:**
  - IgM or IgG paired titers (4-fold increase 2-4 wks apart)
    - Postitive IgG titer = previous exposure (yrs, even)
    - IgM titer greater than 1:64 = active infection
- **Tx:**
  - Clindamycin for 2-4 wks or 2 wks beyond resolution of clinical signs
  - Corticosteroids are contraindicated



Birds and rodents are intermediate hosts for Toxoplasma gondii

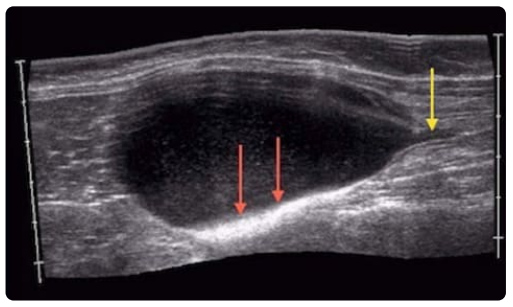
- **Pearls:** ZOONOTIC
  - Can cause birth defects in a developing fetus if a mother is infected for the first time in her life while pregnant
  - Simple prevention: "Pregnant women don't clean cat boxes!"
  - Whoever does clean the box: do it at least once daily (oocysts sporulate and become infective in 24 hr) and wear gloves
  - Dispose of cat feces in sealed bags taken to sanitary landfills, not in toilets or garden soil
  - Keep cats indoors, prevent access to rodents and raw meat
  - Prognosis: good with proper treatment
- Click here for more on human pregnancy and toxoplasmosis, courtesy of the U.S. Centers for Disease Control Toxoplasmosis page

9. Feline lower urinary tract disease (FLUTD)

- **Classic case:**
  - Male, unable to urinate
  - Straining in cat box

- Often obese
- Large, turgid bladder
- Hypothermia, comatose, bradycardia

- **Dx:**
  - Urinalysis via catheterization: hematuria with leukocytes and crystalluria, analysis of urethral plug if present
  - Azotemia, hyperkalemia
  - Radiography: see uroliths
  - ECG: tall-T-waves if hyperkalemia is severe



Obstructed male cat ultrasound. Dilated urethra (yellow arrow) and hyperechoic mineralized sediment in the urinary bladder (red arrows)

- **Tx:**
  - Retrograde urohydropulsion
  - Avoid cystocentesis and manual bladder expression
  - IV fluids
  - Treat bradycardia and/or tall, tented T-waves with 10% calcium gluconate as cardioprotectant
  - Urinary catheterization with closed collection system
  - Perineal urethrostomy is a salvage procedure when less aggressive management has failed
  - Prevention: canned diet with extra moisture and weight management
- **Pearls:**
  - Prognosis: 90-95% survival with prompt treatment
  - Recurrence rate is 15-40%
  - Antibiotics not warranted

10. Diabetes mellitus
    - **Classic case:**
      - Overweight or obese, middle aged or older, male neutered cat (or spayed female)
      - May be very ill with diabetic ketoacidosis (DKA)
      - Polydipsia/polyuria, polyphagia
      - +/- Plantigrade stance due to diabetic neuropathy
    - **Dx:**
      - Fasting hyperglycemia (usually greater than 350 mg/dl)
      - Urinalysis: glucosuria, +/- ketonuria, +/- active sediment
      - Fructosamine: elevated with persistent (wks) of hyperglycemia

Polydipsia is seen with diabetes mellitus

    - **Tx:**
      - Insulin twice daily (glargine or PZI are preferred for cats)
      - **Diet modification very important**: canned, low carb (less than 7%)
      - Do not use a high-fiber diet
    - **Pearls:**
      - Prognosis: good to excellent, remission possible
      - Glucose curves should be done at home by client as in-clinic curves will be altered by stress
      - Avoid repository glucocorticoids in cats as they can cause diabetes

Images courtesy of WizardofOz (fibrosarcoma surgery), Dr. Uelsberg (kittens), Kalumet (ultrasound), Steve Jurvetson (polydipsia), Trish Steel (black cat), and Villa16 (cat and mouse).

Feline