Upper Respiratory Disease (Feline)

SYMPTOMS: SNEEZING, NASAL DISCHARGE, RUNNY EYES, COUGH, ORAL OR NASAL ULCERS, SNIFFLES, FEVER, HOARSE VOICE OR ANY COMBINATION THEREOF

WHAT CATS ARE AT RISK?

Despite the highly contagious nature of all the feline upper respiratory agents, it is important to realize that most cats are at very small risk for exposure. In other words, in order to get this kind of infection, a cat must be in the same home as an infected cat or share the same human caretaker, toys or food bowls. Typically infected cats come from the **shelter**, are **outdoor cats**, or are housed in close contact with lots of other cats (**experiencing crowding stress**). **Persian cats are predisposed** to upper respiratory infection due to their inherent facial flattening. The average house cat that is not exposed to any rescued kittens, lives with only one or two other cats at most, and never goes outside is unlikely to break with infection. **Kittens are predisposed** due to their immature immune systems.

COURSE OF INFECTION

The combinations of symptoms and course of infection is determined by which of numerous infectious agents is responsible. Ninety percent of feline upper respiratory infections are caused by either feline **Herpes** or **Calicivirus**. Neither of these infections are transmissible to humans or to other animals.

Most feline colds run a course of 7 to 10 days regardless of treatment but it is important to realize that these infections are permanent and that Herpesvirus infections are recurring (a property of all types of Herpes infections). In kittens Herpes infections are notorious for dragging out. Stresses such as surgery (usually neutering/spaying or declawing), boarding, or introduction of a new feline companion commonly induce a fresh Herpes upper respiratory episode.

WHEN TO BE CONCERNED

A cold for a cat is usually just a nuisance as a cold usually is for one of us. Sometimes though an upper respiratory infection can be serious. If a cat is sick enough to stop eating or drinking, hospitalization may be needed to support him or her through the brunt of the infection. A cat (usually a kitten) can actually get dehydrated from the fluid lost in nasal discharge. Painful ulcers can form on the eyes, nose or in the mouth. Sometimes fever is high enough to warrant monitoring. In young kittens, pneumonia may result from what started as an upper respiratory infection.

If you think your cat or kitten is significantly uncomfortable with a cold you should seek veterinary assistance with an office visit.

HOW IS THIS USUALLY TREATED?

Since 90% of cases are viral in origin and we have no antibiotics against viruses, it seems odd that most feline upper respiratory infections are treated with anti-bacterial medications. The reason for this is that it is common for these viral infections to become complicated by secondary bacterial invaders. The **antibiotics** act on these. Further, the next most common infectious agent (after Herpes and Calici) is **Chlamydia psittaci**, an organism sensitive to the **tetracycline** family (such as <u>doxycycline</u>). For this reason, when antibiotics are selected, tetracyclines and their relatives are frequently chosen. (Since tetracycline use can permanently stain the teeth of immature animals, these medications are generally not chosen for younger pets.). Oral medications, and/or eye ointments are commonly prescribed. For congestion, some human nose drop products can be used for relief. Consult your veterinarian before attempting any sort of home treatment.