Feline Upper Respiratory Disease Basics

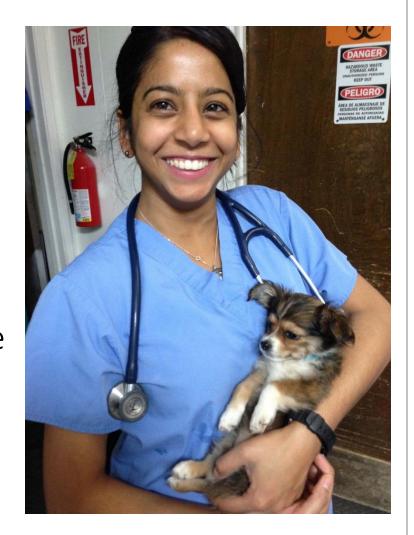




Thank you for joining me today! Feel free to contact me at:

Chumkee Aziz, DVM
Senior Director, Shelter Medicine
ASPCA

sheltermedicine@aspca.org





Outline

1 Causes – Pathogens & Risk Factors

2 Diagnosis – Recognition & Identification

Management – Treatment & Prevention



Causes of Disease



<u>PATHOGENS</u>:

VIRUSES

BACTERIA



HOST FACTORS:

AGE
IMMUNE STATUS
DEBILITATION
STRESS



STRESS

POPULATION DENSITY

HOUSING

SANITATION

VENITILATION/AIR QUAILTY



Pathogens

Herpesvirus

Calicivirus

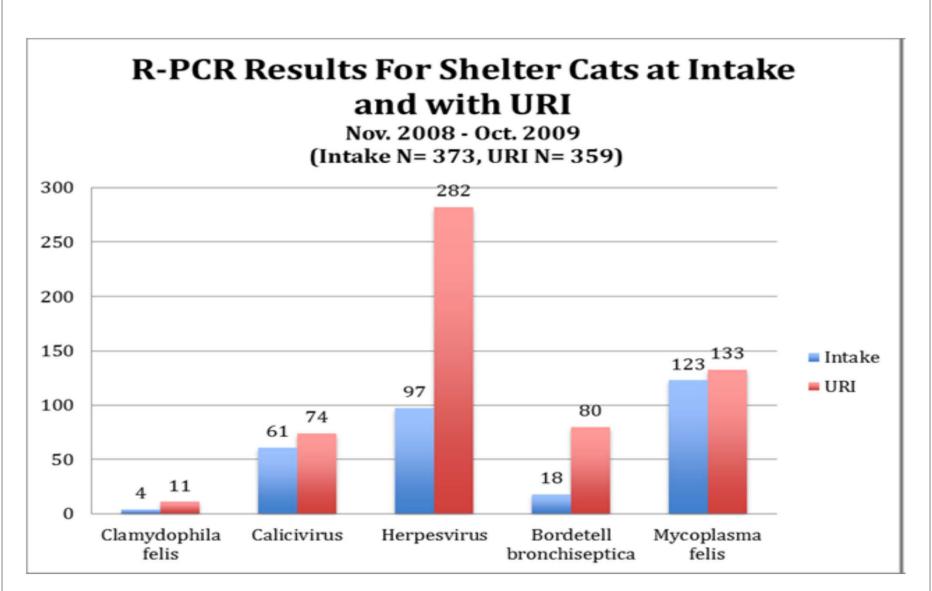
Chlamydophila felis

Mycoplasma felis

Bordetella bronchiseptica

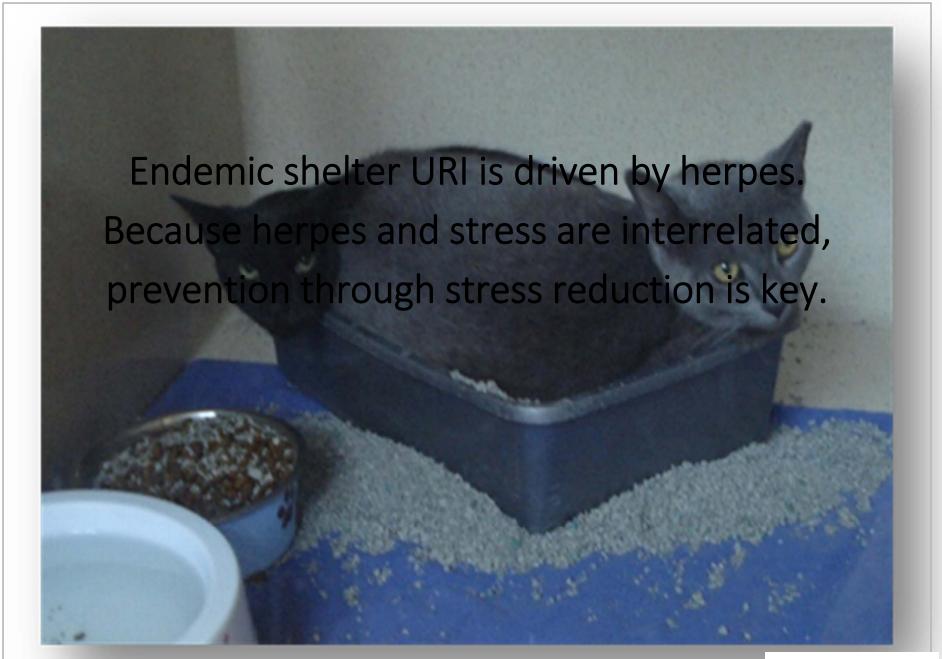
Influenza





Study performed by UC-Davis Koret Shelter Medicine Program





Transmission

- Reactivation by stress*
- Direct contact
- Fomites
- Droplet transmission up to 5 ft
- Aerosolization not as important







Disease Course - Herpesvirus

First timer

- Incubation = 2-6 d
- Shedding period = 14-21 d

Reactivated

- Lag phase = 4-11 d
- Shedding period = 1-13 d (avg 7 d)





Diagnosis of Disease





Suspect Clinical Signs

Oral Ulcers

- Calicivirus
- Herpesvirus
- Quaternary ammonium disinfectant toxicity

Limping or High Fever

Calicivirus

Eye Ulcers

Herpesvirus

Conjunctivitis but no nasal signs

- Chlamydophila
- Mycoplasma



Oral Ulceration



Calicivirus



Herpesvirus



Quat toxicity



Diagnosis of URI

PCR

- Conjunctival & nasal swabs
- Collect during early infection (<7 days)

Culture & Sensitivity

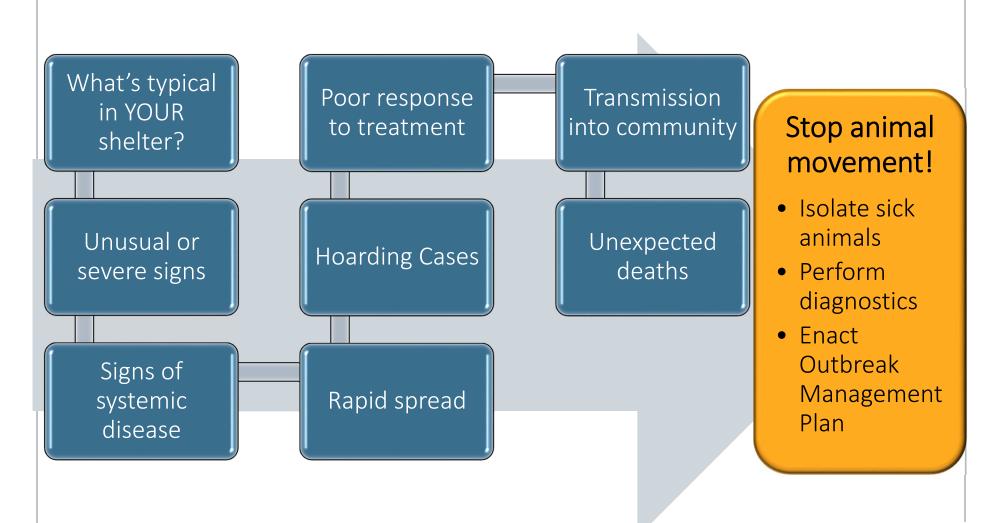
Bacterial pathogens

Necropsy

- Unexpected deaths
- Outbreak



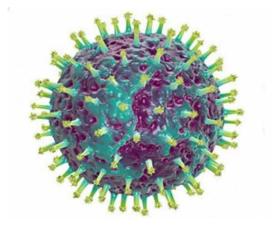
When should I be *really* concerned?



Example: Influenza A (H3N2)

April 2016:

- Previous reports of clinical signs in cats from Korean literature
- H3N2 outbreak in ALL dogs at Indiana shelter
- No direct contact between cats & dogs
- Suspect sign: some cats are drooling
- 9 cats tested positive for H3N2 in 1 ward
- Nasal discharge, congestion, lip smacking
- Did not transmit through shelter





Example: Influenza A (H7N2)

Winter 2016

- Adult cat euthanized for severe respiratory disease tested positive for canine H3N2 in NY shelter
- Something was not adding up: not all dogs in shelter had flu
- Eventually discovered cats had H7N2 low pathogenic avian flu
- Nasal discharge, congestion, persistent cough
- Wave of infection spread in cats
- Off-site quarantine/isolation of 500 cats
- No dogs affected





Management of Disease



Treatment

Minimize patient stress & discomfort

Minimize handling when treating

Treat bacterial infections

Maintain hydration

Promote nutrition



Supportive Care

Keep them separate, comfortable, clean & nourished

- House in quiet isolation space
- Consider pain medication
- Clear away facial discharge
- Encourage eating
- Provide soft bedding

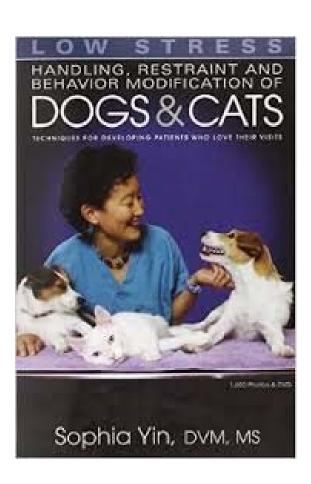




Supportive Care

Low stress

- Familiar routine
- Familiar caregiver
- Spot clean
- Don't move around/treat in cage
- Avoid unproven treatments (lysine, nebulizing)





Treatment Course

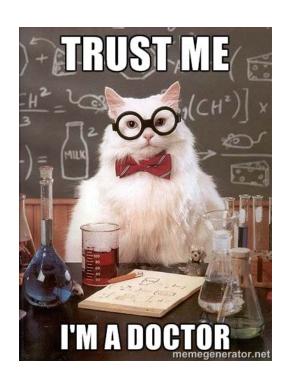
Provide clearly written SOPs for staff

Stop treatment once signs resolve

Must monitor daily

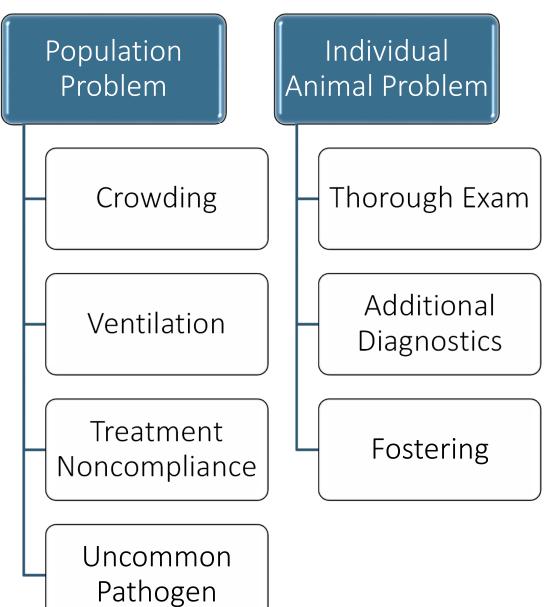
Return to adoptions once signs resolve

Significantly reduced shedding





If signs are not resolving, consider:



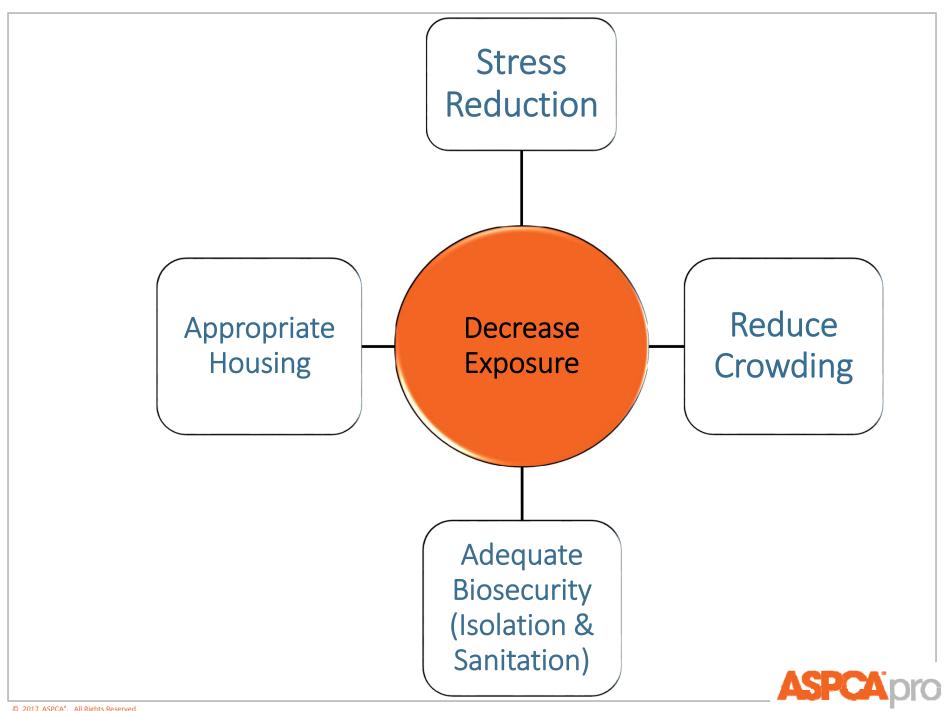


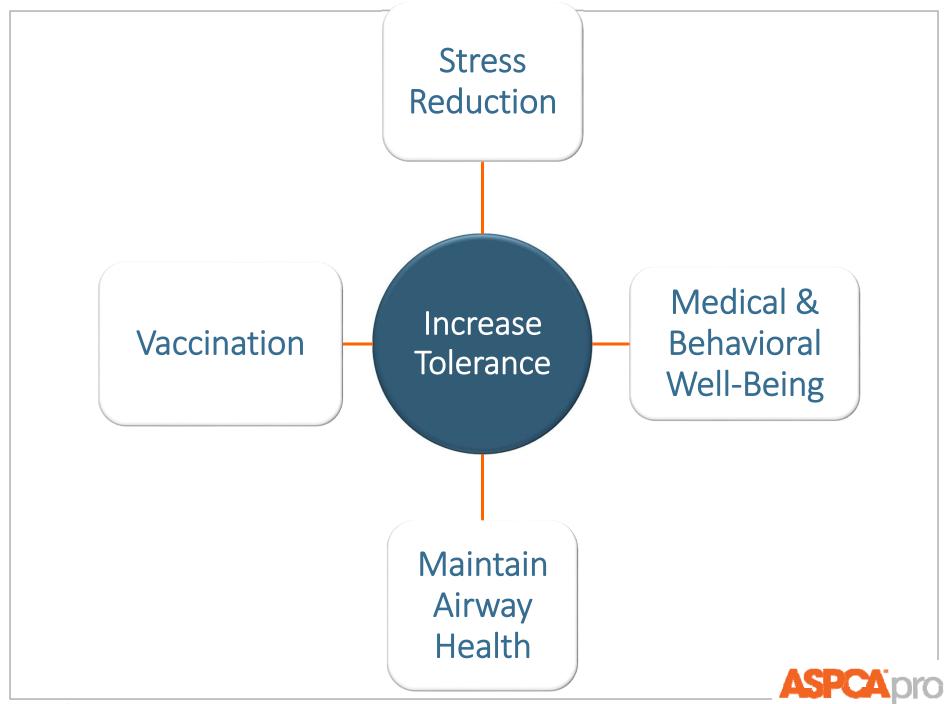
Prevention

Decrease Exposure

Increase Tolerance





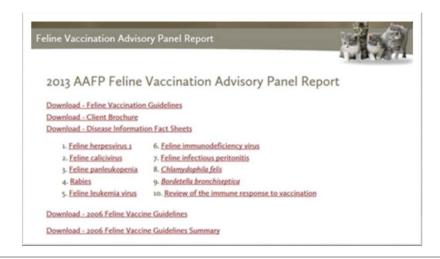


Vaccination

Vaccines for herpes and calici reduce severity & duration of disease

Injectable modified live virus FVRCP for all > 4 wks

- At or prior to intake
- Revaccinate kittens every 2-3 weeks until 18-20 weeks old
- Booster adults once in 2 weeks





Other Vaccinations?

Intranasal FVRC

- Conflicting evidence of effectiveness in shelter
- Potential uses: outbreak, chronic patient, animals < 4 wks' age?
- NEVER use as substitute for injectable FVCRP

Bivalent Calicivirus

- Killed vaccine \rightarrow delayed onset of protection







Biosecurity: Isolation + Sanitation

Clinically affected cats shed highest loads of pathogen \rightarrow isolation required

Separate gown/smock and gloves when in URI iso

Disinfectants?

- Most products will inactivate herpes
- Calici is hardier
- Minimize irritants







Cat Stressors

Changes in routine

Reduced positive social contact

Increased negative social contact

Unfamiliar noises/odors

Disruption of social bonds

Being moved

Confinement in unfamiliar places



What Can We Do?

Reduce stress by upholding the five freedoms of animal welfare for every animal in the shelter





How Do We Ensure the 5 Freedoms?

Match the number of animals cared for at any one time with the capacity required to assure the 5 freedoms for every animal





Stay within capacity to provide 5 Freedoms

Pathway Planning

Managed Admission

Fast Track/Slow Track

Population Rounds

Open Selection

Adoption Driven Capacity

Open Adoptions

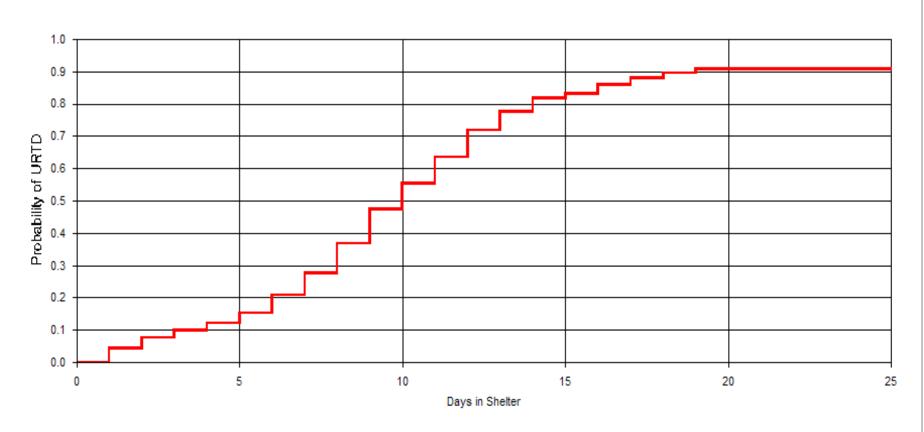


© 2017 ASPCA®. All Rights Reserved

URI & Length of Stay

Probability of URTD by Time in Shelter

All Cats



Dinnage, J. D., J. M. Scarlett, et al. (2009). "Descriptive epidemiology of feline upper respiratory tract disease in an animal shelter." J Feline Med Surg.



Macro-environment

Separation of species

Noise control

Lighting

Air Quality/Odors

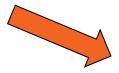
Routine care/caregivers

Prevent unnecessary handling



Macro-environment









Micro-environment

Sufficient Space

Hiding Spots

Interior Décor for Comfort

Enrichment



Micro-environment







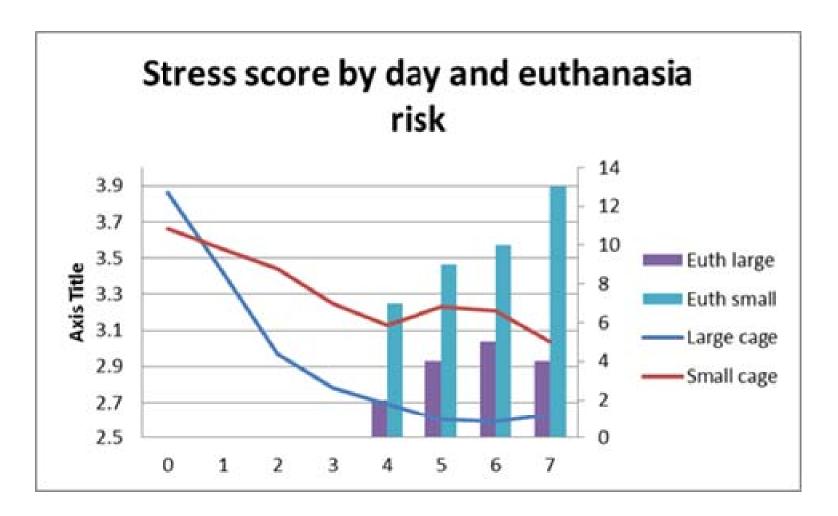


Sufficient Space

- 11 ft²/cat single
- 18 ft²/cat communal
- Allow for stretching & posturing



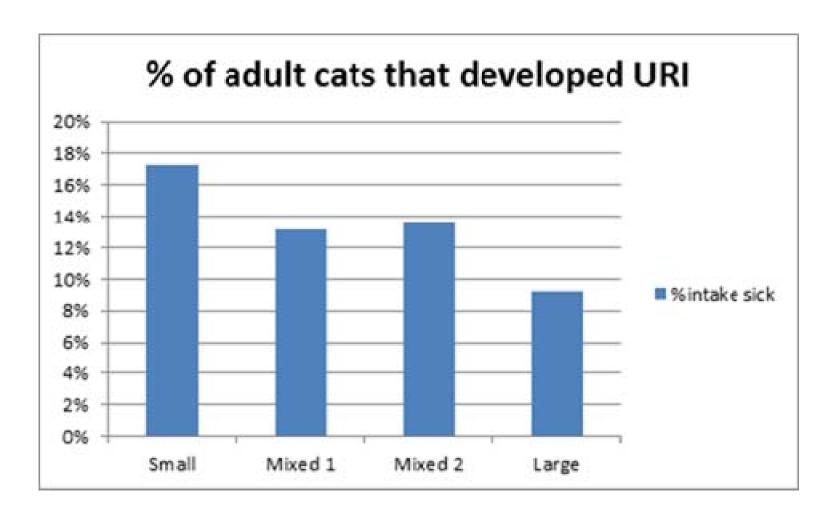
Feline Housing Study - pending from UC-Davis



Study performed by UC-Davis Koret Shelter Medicine Program



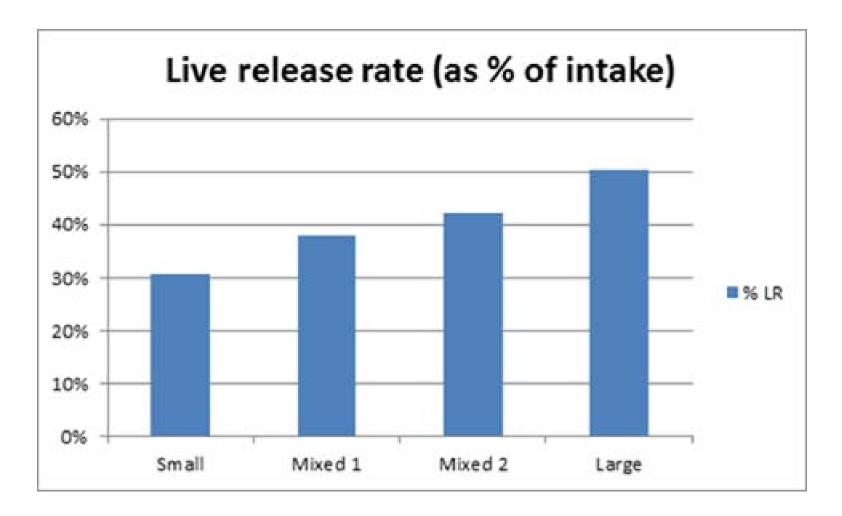
Feline Housing Study - pending from UC-Davis



Study performed by UC-Davis Koret Shelter Medicine Program



Feline Housing Study - pending from UC-Davis



Study performed by UC-Davis Koret Shelter Medicine Program



Hiding Places







Hiding Places









Interior Decor for Comfort

Deeper & longer sleep → 3" soft bedding

Provide both firm/soft

Don't wash bedding daily unless needed





Enrichment

- -Toys
- -Rewards-based training/interactions
- -Scratch pads
- -Sensory stimulation
- -Out of cage time







Group Housing



- 18ft² floor space/cat
- Smaller groups
- Healthy, social adults
- Resources widely distributed
- Must monitor individual and group dynamics



Crowding

Prolonged LOS

Increased disease exposure

Vicious Cycle

Increased costs

Reduced individual resistance to disease

Increased illness



THANK YOU!



