

Cat Flu

Cat flu is the common term for feline upper respiratory tract disease (FURT) which is a widespread condition that may affect all felidae. There are four main infectious agents that can cause the disease: - feline herpes virus, feline calicivirus, *Bordetella bronchiseptica* and *Chlamydophila felis*. Cats may be suffering with symptoms caused by one or more of these pathogens simultaneously. Classic signs of cat flu include nasal discharge, sneezing, conjunctivitis, pyrexia and anorexia. Occasionally in younger and debilitated cats, more severe signs such as pneumonia can develop.

Mode of transmission

All cat flu agents are spread through direct and/or indirect contact. Examples of these include grooming, shared feeding bowls or aerosol exposure (sneezing). Feline herpesvirus (FHV) and Feline calicivirus (FCV) account for the majority of cases of cat flu (about 80%). See table below for comparison of these two causal agents.

	FHV	FCV
Transmission	Transmitted mainly through saliva, ocular and nasal secretions	Same as FHV FCV may also be shed in urine and faeces.
Clinical signs	Sneezing, anorexia, depression, oculonasal discharge, pneumonia, even death	Pyrexia, painful ulcers on tongue and soft/hard palate, linked to fading kitten syndrome, frequently found in cats with chronic gingivostomatitis.
Infected cats	All cats infected become lifelong carriers. Mainly latent infection.	Cats infected continue to shed virus for several months followed by a

	Episodes of shedding may then occur 1-2 weeks after a period of stress – clinical signs may develop at this point	period of elimination- no reactivation of infections
Survives in Environment	For one day	Up to one week
Diagnosis	Viral isolation swabs (oral or conjunctival)	Viral isolation swabs (oropharynx)

Detection of carrier cats may be difficult as they do not shed virus constantly as explained earlier. Therefore a negative result from the isolation swab is not a definitive diagnosis for a patient and all other factors need to be taken into consideration such as history and clinical signs. However, a positive swab does confirm that the cat is infected with the specific virus.

Treatment

In the case of suspected bacterial cat flu cases , antibiotics will be prescribed. There are no systemic antiviral drugs that are effective against FHV or FCV. Consequently, symptomatic treatment is put into place and generally cats are isolated to prevent further spread of infection. This includes the following:-

- Good barrier nursing/supportive care is important at this point. This includes keeping the cat warm, dry and regular cleaning of discharges away from the eyes and nose to maximise comfort for the patient.
- Nebulisation (with or without Olbas Oil) may be warranted to aid clearance of the nasal passages. The nebuliser should be held by the cat's face for five to ten minutes. If nebulisation is not possible or tolerated, then moving the cat into a warm steamy room may help also.

- Good quality nutrition is vital in these cases. The patient may need to be coaxed to eat by offering warmed aromatic foods, hand feeding or placement of feeding tubes where necessary. Fluid therapy may be required in very severe cases.
- Broad-spectrum antibiotics and eye medication for secondary bacterial infections as required. Corneal ulcers can be treated under anaesthesia once the patient is stable.

Prevention

As transmission is through both direct and/or indirect contact, patient isolation and thorough environmental disinfection are crucial. Client education and support greatly helps prevent or halt the spread of this disease.

Also, vaccination can reduce the risk and perhaps the severity of 'cat flu', but vaccinated cats can still contract or carry the virus depending on the pathogen. This is due to the fact that just like human flu vaccines while vaccines contain the most common viral particles, new and distinct viral strains are constantly emerging.

Despite this, vaccination of all cats in a household is recommended, especially if they go outdoors, mix freely with other cats or stay in a cattery. Ideally, new cats being introduced should be quarantined for three weeks and checked regularly during this period for potential clinical signs.

Conclusions

Cat flu varies in severity and may be caused by a number of infectious agents. Complications or secondary conditions may arise in some patients. Vaccination will help reduce the risk of a cat acquiring the disease, but will not affect the carrier status of an already infected animal. Complete protection cannot be offered as there are different strains of the infectious agents developing all the time.

Prevention and isolation of infected patients is of the utmost importance to stop the spread. Good nursing care is vital to aid these patients to a speedy

recovery. This involves ensuring that the patient is comfortable also keeping them clean and encouraging them to eat.

.