How to Stop Itching in Shelter and Foster Home Cats

Karen A. Moriello DVM, Dip ACVD
Clinical Professor of Dermatology
School of Veterinary Medicine
University of Wisconsin-Madison

Clinical characteristics and causes of pruritus in cats: a multicenter study on feline hypersensitivity associated disorders


588 pruritic cats
Standard work-up
Itchy Cat “odds”

• 29% Respond to Flea Control
• 24% Non allergy related cause
• 20% Feline environmental allergies
• 12% Food allergy
• 15% Sabotaged work up (the cat)

39% Responded to Ectoparasite Control

Asking the “Right” Questions

• Is the cat ill or does it look unwell?
• Any medication history for any disease?
• Do you have any history about the skin disease?
  • Medical records, receipts
  • Drug history
  • Medication bottles
• Any history of flea or other parasite control?
• Any history of contagion?

Skin lesions after contact?

Ringworm
Fleas
*Cheyletiella*
Ear Mites
Chiggers-orange dots
Low Yield Diagnostic Tests

• CBC
• Serum chemistry panel
• Urinalysis

Itchy cat dermatology “TPR”

• Wood’s lamp examination
• Fungal culture-targeted population
• Hair trichogram
• Ear swab cytology in mineral oil
• Ear swab cytology-stained
• Skin cytology
• Fecal flotation-intensely itchy cat
Wood’s lamp +/- Fungal Culture

Lift crusts

Fluorescence is COMMON
Just a pigment

Dermatophytosis - is it pruritic?
Skin Cytology

Skin Cytology of Cats: Scotch Tape

Look Hard For Yeast-100x
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STEP 1
(Parasite control)

IS IT A MAD ITCHY CAT??
Parasites

• Flea control responsive parasites
  • Fleas
  • Cheyletiella
  • Otodectes
  • Notoedres
  • Sarcoptes

Fleas - the #1 cause of ITCH

Flea allergy dermatitis
Cheyletiella - “Dandruff mite”

Otodectes (Ear Mites)
Lice

Notoedres “cat scabies”
Insect Bite Reactions

Insect bite hypersensitivity

Step 1: Other and/or Flea control responsive ectoparasites

Itching without inflammatory lesions - flea control

Itching with inflammatory lesions - flea control and antimicrobials
STEP 2
(Infection Control)
[continue flea control]

Skin Infections
• Combined bacterial and yeast infections
  • Staphylococcal (bacteria)
  • *Malassezia* (yeast)
• Dermatophytosis (ringworm)

Failed Flea Control? Consider Untreated Microbial Overgrowth
Bacterial and Malassezia (yeast)

Bacterial and Malassezia (yeast)

Culture
Antibiotic Responsive Eosinophilic Lesions

Step 3: Microbial Overgrowth Treatment (continue flea control)

- Topical Antimicrobial Treatment
- Antifungal: Oral Itraconazole
- Systemic Antibiotic: Increasingly based upon culture
- 30 days of treatment without ANY glucocorticoid therapy

When Systemic Antibiotics Are Not An Option

- Topical focal therapy with antibiotic ointment
- Whole body treatment
  - 2% chlorhexidine spray
  - Accelerated hydrogen peroxide spray
  - Chlorhexidine/climbazole mousse
Six weeks later…..
Parasites Infections
Watch, Wait, Document

ITCH
INFECTION

Watch, Wait, and Document
• Write a summary of treatment including products and application
• DO NOT STOP FLEA CONTROL
• DO NOT CHANGE FOOD
• Watch for signs of relapse of itching and/or rash
Six weeks later.....

Parasites
Infections
OTHER?
Demodex gatoi
Food or Environmental Allergies

STEP 3
(Rule out D. gatoi)
[continue flea control]

IS IT A MAD ITCHY CAT???
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Pruritus Scale

Feline Demodicosis

• Two species
• Can have almost any pattern
• Young cats with pruritic ears- *D. gatoi*
• Young cats with generalized pruritus- *D. gatoi*
• Old cats with skin disease- *D. cati*
Over-grooming cats

Unlike dogs, a negative trichogram does not rule out feline demodicosis
Response to treatment for *D. gatoi*

- LIME SULPHUR weekly
- IVERMECTIN 200-300 mcg/kg orally once daily for 6 weeks
- Moxidectin/imidacloprid spot-on weekly for 6 weeks
- Fipronil spray-weekly

**STEP 4**

(Reconsider - could it be an other?) [continue flea control]

**Other**

- Autoimmune
- Fungal
- Neoplasia
- Viral
- Bacterial (deeper infections)
- Medical
- Trauma
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Over-grooming - Itch or Other?

Skin Biopsy and Itchy Cats

Key “Other Diagnostics”

• Sick cat work up
  • Routine laboratory work
  • CBC, Serum Chemistry Panel
  • Urinalysis
• Thyroid test
• Skin biopsy
STEP 5
(Allergy Management)
Feline Allergies

• Flea allergy dermatitis

• Environmental allergies

• Food allergies

Cats are like dogs - just this once

• After ruling out flea allergy dermatitis, it is not possible to distinguish between cats with environmental allergies and cats with food allergy
Feline atopic dermatitis: a retrospective study of 45 cases
Ravens et al Vet Derm 2014

Severe, waxing and waning pruritus
Persistent in face of flea control
Less glucocorticoid responsive than expected
More responsive to antihistamines than expected
50% had bacterial pyoderma
Damaged Whiskers - pruritus

Mild to severe allergies

Face rubbing
Symmetrical Alopecia

ALWAYS MEDICAL

Always Flea Control
Always Infection Control
Always Humane Antipruritic Therapy
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Controlling the Itch

• **Continue flea control**
  • Ears and eyes-focal topical steroids
  • Topical therapy for comfort and to control bacterial and yeast overgrowth
  • Careful use of topical spray steroids
  • Cyclosporine—effective but expensive
  • Oral glucocorticoids

Antipruritic therapy in cats

• Feline cyclosporine
  • 7.5 mg/kg orally once daily for 30 days
  • Q 48 hrs.
• Oral glucocorticoids
  • Methylprednisone
  • Triamcinolone
  • Prednisolone
  • Always dose on LEAN body mass

Advanced diagnostics

• Food trial
• Allergy testing
  • Is immunotherapy an option?
What about a food trial?
• Year round pruritus—is that documented?
• Itch in the face of flea control
• More common in cats with gastrointestinal signs and skin disease
• Food trial-major life style change for foster family
• Food trial—what are the risks if the cat will not eat the diet?
• Only way to diagnose is with a trial and challenge

Feline atopic dermatitis: a retrospective study of 45 cases
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What everyone needs to know
• Life long skin disease
• Controlled but not cured
• Cat will always require some type of topical and/or systemic treatment
• As much as is needed, but as little as possible
• Goal is quality of life
You can do a lot in a short time!

Questions?