



VETERINARY HOSPITAL & HOTEL

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Inflammatory Bowel Disease in Cats

Inflammatory bowel disease (IBD) is an important and relatively common medical problem of cats. It is not a specific disease. The term IBD represents several processes that are manifested as inflammation of the bowel. It may involve only the small intestine, large intestine, or stomach; in some cases, all parts of the gastrointestinal tract are affected.

Prevalence

IBD is most common in middle-aged to older cats (5-12 years).

Causes/Transmission

The causes of IBD in the cat are unknown. When a cause is not identified, it is called “idiopathic IBD.” Some of the suspected contributors include infection with certain types of bacteria or parasites, toxins, dietary intolerance, and immune reactions. It is also theorized that stress can exacerbate symptoms of IBD.

Clinical Signs

Three general presentations have been identified for IBD: 1) cats with primarily vomiting (including hairballs), 2) cats with primarily diarrhea, and 3) cats with both vomiting and diarrhea. Of these presentations, the most common is vomiting. Other signs may include a waxing and waning appetite or weight loss. It often begins as an intermittent event but, over months to years, progresses to the point that medical care is sought.

Diagnosis

A complete blood count, serum chemistries, retroviral testing (Felv/FIV), urinalysis, and abdominal radiographs (xrays) are important initial tests.

Chronic inflammation stimulates immune cells, primarily lymphocytes and plasma cells, to invade the stomach and/or intestinal wall. Occasionally, eosinophils and neutrophils will be found. Thus, the disease is diagnosed when these cells are identified in abnormal levels in the tissue. A pathologist is responsible for this part of the diagnosis.

In order to obtain these cells, a biopsy is required. This can be done with an endoscope or surgery. An endoscopy is less invasive but full-thickness biopsies cannot be obtained and may not always yield a diagnosis. An endoscope also cannot be used to visualize the entire GI tract. Surgery, although more invasive, allows biopsying multiple sites along the entire GI tract, as well as direct visualization of all the abdominal organs for abnormalities. Other tests that may be useful include a rectal cytology and a cobalamin/folate blood test.

While the presence of an inflammatory process is determined with a biopsy, isolating the cause of the inflammation will usually require other tests. Tests or treatments should be performed to rule out stomach and intestinal parasites, cancer, and infections. Diseases such as hyperthyroidism and diabetes are considered. In addition, diseases of the kidney, liver, and pancreas should also be ruled out. In many cases, the cause cannot be determined.

Treatment

When an underlying cause is identified it can be treated. Treatment is symptom related in cases where a cause has not been determined.

Some cats with IBD respond to a change in diet. This is done in two ways. First, a food is chosen that contains a protein source that the cat has not eaten in the past. If changing protein sources is not helpful, a low residue diet is tried. Unfortunately, a true food trial requires that the test diet be fed *exclusively* for 4-6 weeks. The foods most often blamed for causing an allergic response are beef, lamb, seafood, corn, soy, wheat and cow's milk. Poultry based foods tend to be least allergenic but “hydrolyzed” chicken is not recommended.

If dietary therapy is not successful or feasible, drugs are used to suppress the inflammatory reaction. Corticosteroids and an antibiotic called metronidazole are the most commonly used drugs. Prednisolone is the most effective of the corticosteroids and has the least side effects. However, it is not effective in all cats. Sometimes a stronger drug is used initially to gain control of the disease. Then, prednisolone is tried again as a maintenance drug. Other drugs can be tried if corticosteroids are not successful. There is a newer steroid called budesonide, that remains primarily in the GI tract and has less potential systemic effects than prednisolone. It can be useful in some cats but often works best after the symptoms are initially controlled with prednisolone.

Corticosteroids are renowned for causing a variety of side effects in humans. Fortunately, cats are relatively resistant to these side effects as compared to humans. Regardless, to minimize any possible adverse effects, our goal is to use the lowest possible dose that is effective.

It will be necessary to begin therapy with a rather high dose, but once response occurs, the dose is gradually tapered to the point that the signs are controlled. Long-term therapy is required for many cats. Generally, a cat is treated for a few months then prednisolone is discontinued to see if it is still needed. If the signs of vomiting or diarrhea recur, it is resumed.

Prognosis

In most cases, it is reasonable to hope for control of the disease. However, unless a specific cause can be identified, a cure is not expected. Also, intestinal biopsies can be helpful in determining the severity of the IBD, which helps in considering prognosis.

Transmission to Humans

IBD is not transmitted to humans. Potentially, some of the parasitic causes of IBD could be infectious to humans but, in most cases, a cause is not identified.