Chronic Diarrhea in Cats

Basics

OVERVIEW

• A change in the frequency, consistency, and volume of bowel movement (feces) for more than 3 weeks or with a pattern of episodic recurrence
• Can be either small bowel (small intestine) or large bowel (large intestine or colon) diarrhea, or from both

SIGNALMENT/DESCRIPTION OF PET

• Cats

SIGNS/OBSERVED CHANGES IN THE PET

• Underlying disease process determines clinical signs

Small Bowel Diarrhea (Involves the Small Intestines)

• Normal to increased frequency and volume of bowel movement (feces, stool, poop)
• Weight loss
• Normal to increased appetite (the latter is known as "polyphagia") in cases with abnormal digestion or absorption of food (known as "maldigestion" or "malabsorption," respectively)
• May have black, tarry stools (due to the presence of digested blood; condition known as "melena"
• May have excessive gas formation in the stomach or intestines (known as "flatulence") and rumbling or gurgling sounds caused by movement of gas in the intestinal tract (known as "borborygmus")
• Vomiting—variable
• Poor body condition with some causes of long-term (chronic) diarrhea
• Dehydration—variable
• Thickened intestines, abdominal fluid, and enlarged abdominal lymph nodes may be felt by your pet's veterinarian

Large Bowel Diarrhea (Involves the Large Intestines or Colon)

• Smaller volume of bowel movement (feces) per defecation than normal
• Frequency of defecation significantly higher than normal (greater than 4 times per day)
• Weight loss is less commonly seen than with small bowel diarrhea
• Often see mucus or red blood (hematochezia) in the bowel movement; no evidence of black, tarry stools (melena)
• Painful defecation or straining to defecate (tenesmus) and urgency to defecate
• Difficulty defecating (dyschezia) with rectal or lower colonic disease
• Excessive gas formation in the stomach or intestines (known as "flatulence") and rumbling or gurgling sounds caused by movement of gas in the intestinal tract (known as "borborygmus")—variable
• Vomiting—variable
• Body condition more typically normal
• Dehydration—uncommon
• Thickened intestines may be felt by your pet’s veterinarian

CAUSES

Primary Diseases —

Inflammatory bowel disease (IBD)—various types, including lymphoplasmacytic enterocolitis, granulomatous enteritis, eosinophilic enteritis

• Non-inflammatory causes of abnormal absorption of food (malabsorption)—dilation of the lymphatic vessels (known as "lymphangiectasia"); condition in which a high number of bacteria are found in the upper small intestine (known as "small intestinal bacterial overgrowth"); diarrhea and other signs caused by absence of a long section of small intestine, usually because of surgical removal (condition known as "short-bowel syndrome"); and ulcers in the upper small intestines (known as "duodenal ulcers")

• Tumor or cancer—various types, lymphoma, adenocarcinoma, mast cell tumor
• Partial blockage of the small or large intestines—tumor or cancer, foreign material, inflammatory bowel disease, folding of one segment of the intestine into another segment (known as "intussusception"), and abnormal narrowing of the intestines (known as a "stricture")

• Parasites—such as Giardia, Toxoplasma, roundworms (Toxocara cati, Toxascaris leonina), hookworms (Ancylostoma), Cryptosporidium, Cystoisospora, Tritrichomonas

• Bacterial infections—Escherichia coli, Campylobacter, Salmonella, Yersinia, and Clostridium species

• Viral infections—feline leukemia virus (FeLV), feline immunodeficiency virus (FIV), and feline infectious peritonitis (FIP)/enteric coronavirus

• Fungal diseases—histoplasmosis, aspergillosis

• Metabolic disorders—increased levels of thyroid hormone (known as "hyperthyroidism"), kidney disease (high blood nitrogen), liver disease (failure), diabetes mellitus ("sugar diabetes")

• Poisons
• Side effect of medications

• Maldigestion (abnormal digestion)—liver disease (reduced bile) and syndrome caused by inadequate production and secretion of digestive enzymes by the pancreas (known as "exocrine pancreatic insufficiency")

• Diet—dietary sensitivity, dietary indiscretion (that is, eating substances that should not be eaten), and diet changes

• Congenital (present at birth) anomalies—short colon or portosystemic shunt (a condition in which blood vessels allow blood to flow abnormally between the portal vein (vein that carries blood from the digestive organs to the liver) and the body circulation without first going through the liver

RISK FACTORS

• Dietary changes and feeding poorly digestible or high-fat diet

Treatment

HEALTH CARE

• Often must be specific for the underlying cause to be successful
• When no definitive diagnosis is possible, treatment with an elimination diet (novel protein source or hydrolyzed protein) is effective in about 40-60% of cats with chronic diarrhea

• Fluid therapy for dehydration
• Correct electrolyte (such as sodium, potassium, chloride) and acid–base imbalances

• Supplementation with cyanocobalamin (B12) weekly then at a lower level long-term
DIET
- A lower-fat, novel protein and carbohydrate (a protein and carbohydrate to which the pet has never been exposed) diet or fiber-supplemented diet may be beneficial; feed for 3–4 weeks; response should be detectable within 2–3 weeks following diet changes; may resolve diarrhea due to dietary intolerance or allergy
- Food should be highly digestible

SURGERY
- Biopsy of the stomach, small intestine, and/or large intestine
- Exploratory surgery of the abdomen and surgical biopsy

Medications
Medications presented in this section are intended to provide general information about possible treatment. The treatment for a particular condition may evolve as medical advances are made; therefore, the medications should not be considered as all inclusive
- Medications vary, depending on underlying cause
- Prednisolone or budesonide for inflammatory bowel disease
- Vitamin B12
- Probiotics
- Chlorambucil and prednisolone together for intestinal lymphoma, a kind of cancer

Follow-Up Care
PATIENT MONITORING
- Fecal volume and character, frequency of defeation, and body weight
- Recheck for intestinal parasites or infections (*Toxoplasma, Giardia, Cryptosporidium, Salmonella, Campylobacter* etc.)

PREVENTIONS AND AVOIDANCE
- Depend on underlying cause

POSSIBLE COMPLICATIONS
- Dehydration
- Poor body condition
- Fluid buildup in the abdomen (known as "abdominal effusion")

EXPECTED COURSE AND PROGNOSIS
- Depend on underlying cause
- Resolution usually occurs gradually with treatment; if diarrhea does not resolve, consider re-evaluating the diagnosis

Key Points
- Complete resolution of signs is not always possible, despite a correct diagnosis and proper treatment
- Some causes of long-term (chronic) diarrhea result in actual changes to the lining of the intestines that may require many months to resolve or that may not resolve