

# Sudden (Acute) Vomiting

## Basics

### OVERVIEW

- “Vomiting” is the forceful ejection of stomach contents up through the mouth
- “Acute” is an adjective used in medical writing to indicate a sudden or rapid onset and short course of a disease or medical condition
- Sudden (acute) vomiting is defined as vomiting of short duration (less than 5–7 days) and of variable frequency
- The gastrointestinal tract includes the stomach, small intestines, and large intestines (known as the “colon”)

### SIGNALMENT/DESCRIPTION OF PET

#### Species

- Dogs
- Cats

### SIGNS/OBSERVED CHANGES IN THE PET

- Variable vomiting of food and/or fluid (may be clear, yellow-tinged [containing bile from the upper small intestine], or blood-stained)
- Ingestion of foreign material may be observed in some pets
- Variable sluggishness (lethargy) and appetite loss; may see diarrhea and/or black, tarry stools (due to the presence of digested blood; condition known as “melena”)
- May include signs of dehydration, such as dry gums / moist tissues of the body (moist tissues are known as “mucous membranes”); reduced skin turgor (turgor is the normal fullness or tension of tissues resulting from fluid content); sunken eyes; pale mucous membranes; rapid heart rate (known as “tachycardia”); and weak pulses; other findings on physical examination may include fluid-filled bowel loops; excessive gut sounds; abdominal pain, which may be localized (such as from a foreign body; inflammation of the pancreas [known as “pancreatitis”]; inflammation/infection of the kidneys [known as “pyelonephritis”]; and liver disease); or may be generalized or diffuse abdomen pain (such as from inflammation of the lining of the abdomen [known as “peritonitis”] or severe inflammation of the intestines [known as “enteritis”]); or an abdominal mass (such as a foreign body; folding of one segment of the intestine into another segment [known as “intussusception”]; or twisted (torsed) abdominal organs (such as dilated and twisted stomach); may also be unremarkable exam findings
- May see fever with infectious and inflammatory causes



## CAUSES

- Adverse food reactions—indiscretions (eating rapidly, ingestion of foreign material); intolerances (such as sudden diet change, allergies)
- Drugs—antibiotics, anti-inflammatory drugs (such as steroids and non-steroidal anti-inflammatory drugs [NSAIDs]); chemotherapy drugs; heart medication (such as digitalis); narcotics; xylazine (a sedative)
- Inflammation of the gastrointestinal tract—infectious inflammation of the intestines (enteritis): viruses (canine parvovirus, canine distemper virus, canine corona virus, feline parvovirus [panleukopenia]); bacteria (*Salmonella*, *Campylobacter*); very sudden (known as “peracute”) bloody inflammation of the intestines (known as “hemorrhagic gastroenteritis”) of dogs
- Ulcers of the stomach (gastric ulcers) or upper small intestine (known as duodenal ulcers”)
- Blockage or obstruction of the gastrointestinal tract—such as caused by foreign bodies; folding of one segment of the intestine into another segment (intussusception); cancer; stomach dilating with gas and/or fluid (known as “gastric dilatation”), and subsequently rotating around its short axis (known as “volvulus”)—condition known as “gastric dilatation-volvulus” or “bloat”; loss of intestine motility (ileus); constipation; thickening of the tract lining leading to swelling and blockage (known as “mucosal hypertrophy”)
- Generalized (systemic) disease—excess levels of urea and other nitrogenous waste products in the blood (known as “uremia” or “azotemia”); liver failure; sepsis (presence of pus-forming bacteria and their poisons in the blood or tissues); increased levels of acid in the body (known as “acidosis”); electrolyte imbalance (such as low levels of potassium in the blood [known as “hypokalemia”]; low levels of calcium in the blood [known as “hypocalcemia”]; and high levels of calcium in the blood [known as “hypercalcemia”])
- Abdominal disorders—inflammation of the pancreas (pancreatitis); inflammation of the lining of the abdomen (peritonitis); and inflammation with accumulation of pus in the uterus (known as “pyometra”)
- Endocrine disease—inadequate production of steroids by the adrenal glands (known as “hypoadrenocorticism” or “Addison's disease”); condition in which levels of acid are increased in the blood due to the presence of ketone bodies secondary to diabetes (known as “diabetic ketoacidosis”)
- Nervous system disease—vestibular disturbances (inner ear problems leading to “dizziness” and nausea); inflammation of the membranes covering the brain and spinal cord (known as “meningitis”); inflammation of the brain (known as “encephalitis”); central nervous system trauma
- Parasitism—roundworms (ascarids), *Giardia*, *Physaloptera*, *Ollulanus tricuspis* (cats), salmon poisoning (dogs)
- Toxins—lead, ethylene glycol, zinc, fungal toxins (known as “mycotoxins”), household plants
- Miscellaneous—anaphylaxis, heat stroke, motion sickness, pain, fear

## Treatment

### HEALTH CARE

- Pets with non-serious vomiting are treated on an outpatient basis, hospitalize if severe vomiting; fasting is not warranted unless the vomiting is uncontrolled and there is increased risk of inhaling the vomitus (risk of aspiration pneumonia); no food and water (NPO) and intravenous (IV) fluids, while further diagnostics are performed

### ACTIVITY

- Limit activity until vomiting has stopped

### DIET

- If vomiting resolves, initially offer small amounts of water or ice cubes and if vomiting does not recur, follow with an easily digestible, low-fat, single-protein and single-carbohydrate-source prescription intestinal diet (or homemade such as non-fat cottage cheese or skinless white chicken and rice at a 1:3 ratio)
- If vomiting does not recur, wean the pet back onto the normal diet over 4–5 days

### SURGERY

- Surgery may be indicated, based on the underlying cause of the vomiting (for example, gastrointestinal foreign body, peritonitis, or blockage)

## 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

- May use drugs to control nausea and vomiting (known as “antiemetics”) in pets with severe vomiting causing electrolyte and/or acid–base disturbances or inflammation caused by reverse flow of stomach contents into the esophagus (known as “reflux esophagitis”)
- Several drugs to control nausea and vomiting (antiemetics) are available for both dogs and cats—phenothiazine derivatives (such as chlorpromazine and metoclopramide) and maropitant for dogs only; H1-receptor antagonists (such as diphenhydramine) can be used in motion sickness (for dogs only)
- Maripotent; dolasetron to control nausea and vomiting
- Omeprazole, pantoprazole (proton pump inhibitors, reduce stomach acid production)
- H2-blockers (such as cimetidine, famotidine, nizatidine)
- Ulcers of the stomach and/or upper small intestine—can use H2-blockers (such as ranitidine, famotidine, which also increases stomach emptying) and/or the stomach lining protectant (sucralfate)
- Antibiotics (such as ampicillin or metronidazole) may be indicated in cases with fever or evidence of stomach/upper intestine lining injury (such as vomiting blood [known as “hematemesis”] or black, tarry stools [due to the presence of digested blood; condition is melena])

## Follow-Up Care

### PATIENT MONITORING

- If frequency of vomiting increases or serious problems occur, hospitalize pets for treatment and obtain appropriate diagnostics
- If vomiting persists beyond 7 days, despite medical treatment, pursue appropriate testing for long-term (chronic) vomiting

### PREVENTIONS AND AVOIDANCE

- Maintain pet on a consistent, high-quality diet; do not change food abruptly
- Keep pet out of trash and monitor pet when outside or when playing to avoid eating inappropriate materials (such as rocks, bones, or toys)

### POSSIBLE COMPLICATIONS

- Aspiration pneumonia (inflammation of the lungs, caused by accidentally inhaling food, vomit, or liquids)
- Inflammation of the esophagus (the tube running from the throat to the stomach; condition known as “esophagitis”)
- Dehydration and electrolyte disturbances

### EXPECTED COURSE AND PROGNOSIS

- A bland low-fat highly digestible diet usually will control non-serious vomiting
- Recovery from non-serious vomiting is usually rapid and spontaneous
- Prognosis for pets with gastrointestinal foreign bodies is good after removal of the foreign body by endoscopy or surgery; endoscopy is a general term for the procedure using a special lighted instrument called an “endoscope” that is passed into the esophagus and stomach through the mouth

## Key Points

- Sudden (acute) vomiting is defined as vomiting of short duration (less than 5–7 days) and of variable frequency
- The most frequent cause of sudden (acute) vomiting is dietary indiscretion (that is, eating something that should not be eaten or eating something that is different from the normal diet)
- Maintain pet on a consistent diet; do not change food abruptly
- Keep pet out of trash and monitor pet when outside to avoid eating inappropriate materials (such as rocks,

bones) and while playing to prevent the pet from eating a toy

- Recovery from non-serious vomiting is usually rapid and spontaneous

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