What Is It?

Inflammatory bowel disease (IBD) represents several types of gastrointestinal disorders that have no specific etiology (cause), but that produce predictable clinical symptoms and have the microscopic findings of inflammatory cells within the tissue. The most common form of IBD in cats, called lymphocytic-plasmacytic enteritis, involves two types of immune cells, lymphocytes and plasma cells. Lymphocytic-plasmacytic enteritis affects the gastrointestinal system causing GI inflammation (enteritis). Chronic inflammation has been speculated to be associated with the development of feline gastrointestinal lymphoma, a GI cancer, but there is no direct link reputable at this time. Feline IBD is frequently diagnosed in conjunction with pancreatitis and hepatitis, inflammation of the pancreas and liver. This syndrome is termed Triaditis. Feline IBD typically presents with diarrhea, intermittent vomiting or increased rate of hair balls, weight loss, and anorexia. Other clinical symptoms include lethargy, poor coat/grooming, liver disease, strain to defecate, muscle loss, and weakness. Pure breed cats are over-represented and have a genetic etiology. However, the majority of IBD has unknown causes with several possible factors such as genetics, infectious, immune-mediated, psychological, GI defense system dysfunction (food allergy), and certain drugs.

Diagnosis

A definitive diagnosis for IBD technically requires persistent repetitive symptoms indicative of the disease paired with a biopsy sample from the gastrointestinal tract. The biopsy sample must be examined microscopically to confirm the presence of IBD and further classify the type of inflammation present. Owners may be unable or unwilling to pursue a biopsy based diagnosis for their cat due to the expense, limited availability of the necessary technology, or other health concerns that make the cat a poor candidate for anesthesia. In these situations, the diagnosis is a presumptive one based on the best educated determination paired with the cat’s response to treatment trials. A biopsy can be obtained with exploratory surgery or less invasive endoscopic and/or laproscopic techniques. Further testing may include specific gastrointestinal panels, fecal testing, abdominal ultrasound, x-rays, basic bloodwork, organ function panels, and others.

Treatment and Management

Broadly, treatment and management aim to decrease the vomiting and diarrhea, promote a healthy appetite, and maintain a healthy weight through proper digestion as much as possible. General common options include:

**Antiparasitics** - Fenbendazole and others are used as the first line of treatment for a number of parasites.

**Dietary** - A prescription diet trial with a novel (never eaten) protein such as rabbit and pea over 6-8 weeks with absolutely no treats may help to determine if there is a dietary component. Hypoallergenic diets and homemade diet options are also options.

**Antibiotics** - Tylosin, metronidazole, and enrofloxacin can help treat bacterial-induced diarrhea.

**Steroids** - Prednisone, one option, is helpful for immune-mediated IBD and to decrease inflammation for all forms of IBD. There can be are significant side effects, and this option is generally not first.

**Immuno-suppressive and support agents** - Azathioprine or cyclosporine (atopica) may be necessary for the treatment plan for refractory cases. Gall bladder medications may be needed. GI and liver supplements, herbs, and adjunctive therapies such as acupuncture, and vitamins can help as well.

**Environmental modification** - Small things at home, like litter box placement, can make a big change!
Prognosis
Every cat is different with response rate, treatment success, improvement of symptoms, and IBD relapse. Cats whose IBD is refractory to medications, food changes, and harbor other illnesses have a poor to grave prognosis. Felines that take medication well and respond to at least one or more treatment possibilities have a fair prognosis. Owners that are willing to stay dedicated to the recommendations can increase the chance of a good prognosis for their cat. Talk with your veterinarian and an internal medicine specialist regarding the best personalized treatment plan for your cat.

Management Tips
Consider providing:
- Easily accessible water
- Consistently portioned meals
- Prescription diet foods
- Wet food to increase water intake
- Several small meals over the day
- Multiple litter boxes with low sides in multiple locations cleaned daily
- Low energy activity & play

Try to:
- Be consistent with medications & food
- Track appetite, urination, drinking, weight, vomiting, diarrhea, energy, etc.
- Limit stress (kids, noise)
- Keep up with preventative care
- Address concerns ASAP
- Secure food bins to decrease the chance of mites, mold, and dust in food
- Use experienced pet sitters, board at a hospital, use in home groomers!
- Keep food consistent
- Have a small supply of meds at home
- Keep cat indoors
- Avoid feeding table food, junk food
- Use an enzymatic cleaner for accidents

Before your pet’s condition becomes unmanageable or they are losing quality of life, it is important to begin end-of-life care discussions. Learn about pet hospice care and/or euthanasia services in your area so you are prepared.