

Feline Conjunctivitis

The diagram below details some of the primary infectious causes of conjunctivitis in cats, which may be more commonly encountered in practice. For further information on other primary and secondary causes, please refer to the further reading. Where you are unsure with regards to any ocular case, conversation with, and/or referral to a veterinary ophthalmologist should be considered.

Key

- Required in most cases
- Required only in certain specific cases
- Not required

HERPESVIRUS 1 (FHV-1)

Presentation

This is the most common primary cause of conjunctivitis in the cat. Clinical signs differ according to the cat's age and immune status. For older kittens and young cats, presentation is either acute or chronic. In the acute form, alongside bilateral conjunctivitis, which often involves severe chemosis and ocular discharge, keratitis and upper respiratory tract (URT) signs may also be present. Chronically, URT signs are less commonly seen, with the main complaint being bilateral ocular discharge.

Diagnosis

FHV-1 can be confirmed by virus isolation, and infected cats shed the virus for 1-3 weeks post-infection. Bear in mind that virus isolation is frequently negative, and false negative results are possible. Diagnosis of ocular FHV-1 infection is primarily based on clinical signs and response to treatment. A negative virus isolation result should not automatically mean that FHV-1 infection is ruled out. Infection is often complicated by secondary bacterial infection, and viral reactivation and shedding are common even in healthy felines. Over 80% of infected cats will become carriers, and for half of these cats disease will reoccur.

Topical

Lubrication	●	To support the cornea and conjunctiva
Antibiotics	●	Where secondary infection documented

Systemic

Broad spectrum antibiotics may be required where there is URT involvement. Anti-viral agents are usually reserved for severe cases.



© 2019 Daniele Santillo



© 2019 Iona Mathieson

CHLAMYDOPHILA FELIS

Infection with this Gram-negative bacteria is the most common bacterial cause of conjunctivitis in cats. Infection causes a unilateral conjunctivitis with serous discharge which progresses to bilateral hyperaemia and chemosis. Discharge also becomes mucopurulent. Unlike with other infectious agents, the cornea should remain unaffected.

Diagnosis

Diagnosis is by clinical signs, consistent history (with the potential involvement of other in contact felines) and bacterial detection by PCR.

Treatment

Should include all in contact cats to ensure treatment aims are achieved. Disease can reoccur as the urogenital tracts can act as a bacterial reservoir.

Systemic

First line. Usually susceptible to tetracyclines, with doxycycline being the drug of choice in adult cats.

Topical

Antibiotics	●	Normally susceptible to tetracyclines, however choose based upon the results of cytology / culture & sensitivity
Lubrication	●	To support the conjunctiva / cornea where required

CALICIVIRUS

Presentation

A less common viral cause than FHV-1, any cat may become infected but signs are more severe in the young. Cats present with signs of URT infection and oral ulceration. Conjunctival ulceration may also be seen.

Diagnosis

Confirmed by virus isolation using PCR.

Treatment

Supportive nursing care.

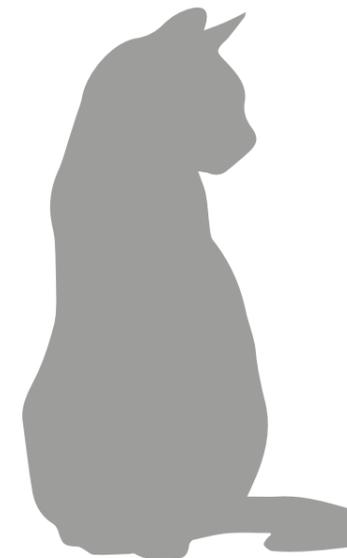
Topical

Lubrication	●	To support the cornea and conjunctiva
Antibiotics	●	Where secondary infection documented

Systemic

Broad spectrum antibiotics may be required where there is URT involvement. Anti-viral agents are usually reserved for severe cases.

PRIMARY CAUSES



MYCOPLASMA SPP.

The involvement of *Mycoplasma* as a primary pathogen is debated. Initially, signs of conjunctivitis (hyperaemia and ocular discharge) are seen, however within a couple of weeks, marked pallor of the conjunctiva may be observed.

Diagnosis

Diagnosis is by culture, however around 90% of healthy cats will harbour *Mycoplasma spp.* without disease.

Treatment

Systemic

First line. Usually susceptible to tetracyclines.

Topical

Antibiotics	●	Normally susceptible to tetracyclines, however choose based upon the results of cytology / culture & sensitivity
Lubrication	●	To support the conjunctiva / cornea where required