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*Special
Respiratory
Disease Edition*

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Tracheal Collapse

Trachea is the scientific name for windpipe, the tube that connects the nose, mouth, and throat to the lungs. The trachea is meant to be a fairly rigid tube. It consists of muscle connecting a group of cartilage rings. The rings are actually not complete circles; they form a “C” with the open end of the C facing towards the animal’s back. This muscle covering the open end of the C is called the tracheal membrane. The trachea serves as a pipeline bringing air into the chest. Tracheas collapse because the C cartilage flattens due to weak cartilage. When the C loses its curvature, the trachea gets loose and floppy. Instead of being a tight muscle covering, the membrane

moves as air passes through the trachea. When air rushes into the chest, the membrane of the trachea in the chest balloons outward and when air rushes out, the membrane of the trachea in the chest droops down into the C cartilage causing an occlusion. The tickling sensation of the membrane touching the tracheal lining generates coughing. If the tracheal obstruction occurs outside of the chest, the opposite occurs; the collapse occurs during inhalation and the ballooning during exhalation. The victim is almost always a toy breed dog such as a Maltese, Yorkshire Terrier, Poodle, Chihuahua, Papillon, Bichon Frise, etc. The disease usually becomes

problematic in middle age, but can occur at any age. Panting or rapid breathing for any reason makes the collapse and anxiety worse. Also complicating things is the inflammation generated in the trachea. The collapse creates increased secretion and inflammation thus prompting yet more coughing which creates yet more inflammation. Ultimately the tissue of the trachea changes and loses its normal characteristics and the condition gets worse and worse. The trachea may be collapsed along its entire length, only in the chest cavity, or outside of the chest cavity. Most commonly the collapse is at its worst right where the trachea enters the chest.

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Special points of interest:

- Special Needs of Brachycephalic Breeds
- Laryngeal Paralysis and Treatment
- Pneumonitis in Cats
- Kennel Cough
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- RDC in Cats

Treatment Options for Tracheal Collapse

Many dogs with tracheal collapse do not ever show symptoms until a second problem complicates things. Factors that bring out symptoms include **obesity**, respiratory infection, cigarette smoke, dust, and heart enlargement to name a

few. If any of these factors are a concern they must be addressed individually. Antibiotics, cough suppressants, corticosteroids, weight loss, and airway dilators are the treatments of choice. If medical management does not produce

satisfactory results, it is possible that surgery may be of benefit. Basically, a rigid prosthesis is placed and bonded around the trachea. In all surgery cases, the younger the patient, the more successful the surgery is likely to be.

Brachycephalic Syndrome

Most people are not familiar with the term brachycephalic, but if you own a Pug, Boston terrier, Pekingese, Boxer, Bulldog, Shih-tzu or any one of the other breeds with “pushed in” faces, you should become familiar with this word. The word comes from Greek roots *brachy*, meaning short and *cephalic*, meaning head. Brachycephalic breeds are characterized by brachycephalic respiratory syndrome, which affects the different areas of the respiratory tract. Some of these conditions are: *Stenotic Nares*—This is a fancy name

for narrowed nostrils. *Elongated Soft Palate*—The soft palate that separates nasal passage from oral cavity flaps loosely down into the throat, creating snorting sounds. *Tracheal Stenosis*—The windpipe (trachea) may be dangerously narrowed. *Heat Stress*—Due to the upper airway obstructions, so much extra work is required to move air that the airways become inflamed and swollen when a brachycephalic dog pants in the heat. Eye problems including dry eye, excessive tear production, and exophthalmus (eye popping out of the

socket) all afflict these breeds. Another concern is skin fold infections. These are common amid the facial folds of these breeds. And the most common complication facing this breed is periodontal disease. Brachycephalic breeds have 42 permanent teeth like every other dog, but they have a lot less space to fit them in. The teeth are crowded and often grow in at odd angles which, in turn, traps food debris and leads to early periodontal disease. For any questions about the special needs of your brachycephalic breed, please call the office.

Laryngeal Paralysis

The larynx (sometimes called the voice box) is a muscular and cartilaginous structure that connects the pharynx (throat) and trachea (windpipe). Laryngeal paralysis refers to a failure of the laryngeal cartilages to open during inspiration, creating a partial or complete upper airway obstruction. The condition is caused by some condition affecting the recurrent laryngeal nerves leading to a loss of their function. No one is sure exactly what causes the nerves to lose

function, but some of the causes include hypothyroidism, brain lesions, and diseases affecting the nerves. The signs of Laryngeal paralysis most commonly begin as a vague change in the quality of the voice, then progress to noisy breathing sometimes called “roaring,” difficulty breathing in, noisy gagging or coughing, and cyanosis (blue tinge to the tongue and gums due to lack of oxygen). This predisposes the patient to a life-threatening collapse, asphyxia

and death. The signs are often made worse by exercise, hot and humid weather, and obesity. Medical treatments are aimed at reducing swelling, calming the dog, or surgery.

Laryngeal Paralysis is a condition seen commonly in older large breed dogs. It can, however, happen to any breed dog.

Pneumonitis

Pneumonitis is an infectious upper respiratory disease of cats. It is caused by the organism *Chlamydia psittaci* and is spread by contact with discharge from the eye, nose, or mouth. Cats usually develop signs of infection 5 to 10 days after exposure. The organism also causes inflammation of the conjunctiva



(conjunctivitis), characterized by squinting, red, painful eyelids, and excessive tearing. The eye discharge may become yellow or green, and such respiratory signs as sneezing, coughing, or discharge from the nose may appear. Occasionally, the disease reappears in recovered cats after stress or other ill-

ness. Vaccination is the best means of preventing pneumonitis. Because the same organism that infects cats also causes eye infections in people, strict hygiene should be practiced when handling infected cats. Infected cats should be isolated from other cats until recovery is complete. Discharge from the eyes and nose should be removed several times a day with a dampened cloth or facial tissue.

Infectious Tracheobronchitis (Kennel Cough)

Kennel cough is a bronchitis characterized by a harsh, hacking cough which most people describe as sounding like “something stuck in my dog’s throat.” Infectious Tracheobronchitis is a contagious disease of the upper respiratory tract, which includes the trachea (windpipe) and bronchi (large air passages of the lungs). Viruses and bacteria are usually involved. The most common sign of kennel cough is a harsh, dry cough that is often followed by gagging and coughing up foamy mucus. Otherwise, the patient appears alert and generally

healthy. The disease spreads rapidly from one dog to another, but it does not affect people. Signs appear in 3 to 10 days after the dog contracts the disease. This disease is self-limiting. Meaning that, unless complications (such as pneumonia) occur, the signs usually disappear in 1 to 3 weeks. Antibiotics and/or supportive treatments are often needed. Exercise stimulates coughing and should be severely restricted. Sudden changes in air temperature or pressure on the neck from collars and leashes may also stimulate coughing. Bordatella

Bronchiseptica is the bacteria that causes kennel cough. Bordatella infection can be picked up by rabbits, guinea pigs, pigs, cats, and other dogs. It is very contagious to other dogs. That is why we recommend keeping all dogs current on their Bordatella vaccine. You never know when you’re dog will be in contact with an infected carrier. It is **strongly** recommended that your pet be vaccinated if they ever go to a boarding kennel, grooming parlor, animal shelter, local park, vaccine clinic, or obedience school.

Rhinotracheitis in Cats

Rhinotracheitis is caused by a herpesvirus that attacks the eyes, nasal passages, and trachea (windpipe) of cats. Once infected, a cat shows respiratory signs, such as sneezing, coughing, and runny eyes and nose, within 2 to 5 days. Infection is spread by contact with discharge from the eyes, nose, or mouth of infected cats or contact with contaminated clothing, hands, feeding utensils, or other articles. In mild cases, recovery occurs in 1 to 2 weeks,

while more severe cases may last for several weeks. Adult cats usually recover, but the disease is more serious in kittens, and fatalities are not uncommon. Some cats become persistently infected and suffer from chronic sneezing or periodic relapses. Vaccination is the best means of preventing

this disease. All cats should be vaccinated yearly. While no treatment is available to treat the virus, various medications are given to control clinical signs and prevent secondary bacterial infections and pneumonia. In severe cases, hospitalization is often necessary.

Many cats with rhinotracheitis lose all interest in food because of a decreased sense of smell. Forced oral feeding or intravenous feeding may be necessary until the cat’s appetite improves.

Respiratory Disease Complex in Cats

Various infectious organisms have been isolated from the respiratory tract of cats. Most of these organisms are contagious, and some can cause fatal disease. These organisms include rhinotracheitis virus, calicivirus, Chlamydia psittaci, Mycoplasma, and various bacte-



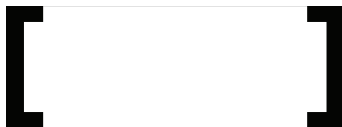
ria. In most cases, isolation of the offending organism is neither necessary nor cost-effective. Respiratory diseases are transmitted by direct contact with infected cats or discharges from their eyes, nose, mouth, or other body fluids. Some of these organisms are spread by contaminated clothing, hands, feeding utensils, grooming equip-

ment, and other articles. In a few cases, the organisms are airborne for short distances. The most common signs of respiratory disease are sneezing, coughing, discharge from the eyes, nose, or mouth, difficult breathing, gagging, lack of appetite, and weight loss. Some infections last only a few days, while others may be present for weeks or months. Often hospitalization is key to treatment.

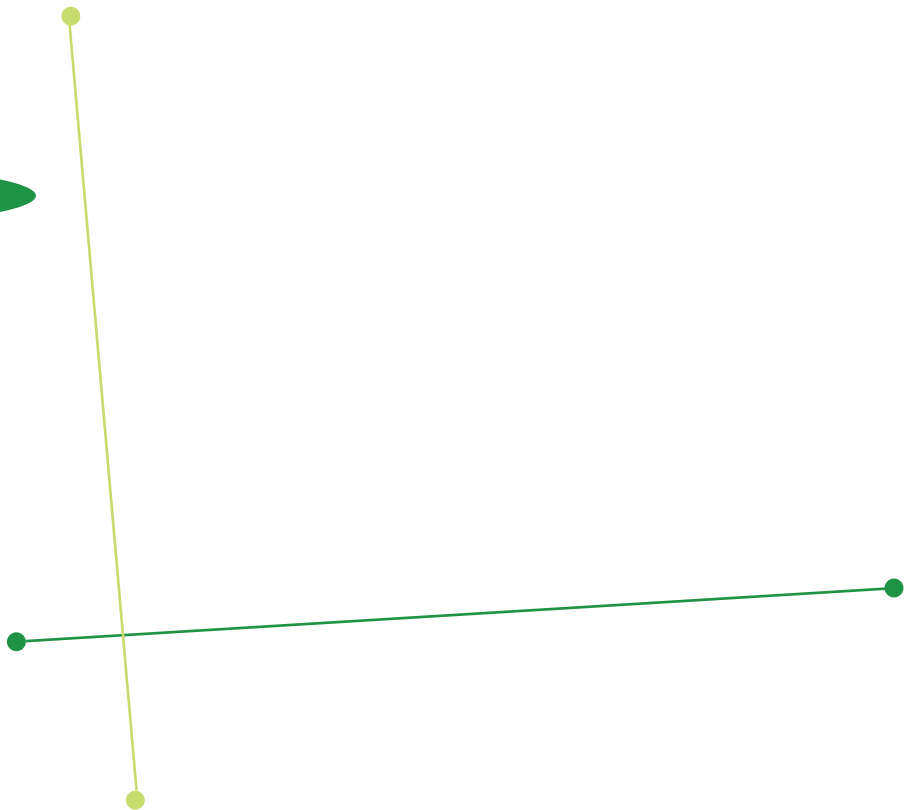


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● Celebrating Healthy Pets
Through Wellness



“Staff Stuff”

One of our long-standing employees (one familiar to everyone) is leaving us for good. Darcy Englert our Healthcare Team Supervisor is moving to North Carolina to be closer to her family. Her last day will be on September 23rd; if you get a chance to come in and wish her luck before her last day, make sure you do! Darcy has served as our Healthcare Team Supervisor for going on 5 years now. She has been everyone’s supervisor, co-worker, mentor, (at times) mother, and friend. While we are saddened to see her go, she will forever remain in our hearts and prayers. She will be deeply missed. We wish her and her family the best of luck in their new endeavors.

Vyolet Albano will be taking Darcy’s place as Healthcare Team Supervisor. Darcy leaves very big shoes to fill, but Vyolet has

already shown that she is more than capable of tackling this position. We wish her luck in her new job.

We have kittens for adoption. We ask for a \$25.00 donation to adopt the kittens to help off-set the cost of their deworming, fecal sample check, and feline leukemia/feline immunodeficiency virus test. They are very playful and loveable. Call the office for more details or stop by to visit them.

Whitney recently received her Senior Hunting title. Her training continues to become more difficult, but she attacks it with the same vigor as she did a puppy and we wish her continued success.

You might have noticed some of the outside renovations that have transformed our walkways lately. We are proud to announce that, for the convenience of our

clients, we have hired a contractor to come out and pave our parking lot. This should be completed within the next month.

More sad news: Linda Grimm, one of our Healthcare Team members, will be leaving us to move out of the area. She was a welcome addition to our team. We will miss her and we wish her the best of luck.

Tina celebrated her 4 year anniversary here at ESVH.

We’re having our team training meeting at Perkins on August 31st. We’re going to play “Battle of the Breeds” which is very much akin to Family Feud. The staff is divided evenly into two teams and then we are asked questions ranging from medical questions to hospital policy questions. Prizes are awarded for correct answers and also the winning team.