



Sudden (Acute) Diarrhea

Basics

OVERVIEW

- Sudden or recent onset of abnormally increased water content and/or solid content in the bowel movements

SIGNALMENT/DESCRIPTION OF PET

- Dogs
- Cats
- Any pet can suffer from acute diarrhea; kittens and puppies are affected most frequently

SIGNS/OBSERVED CHANGES IN THE PET

- Sudden (acute) diarrhea is usually self-limiting (will resolve quickly), an isolated episode and does not affect the pet in general
- Other cases are mild, do not affect the pet in general, and resolve after a few days
- Sometimes it is sudden (acute) or very sudden (peracute) severe disease; more common in dogs (for example, parvovirus-related diarrhea) than cats
- Signs of more severe illness (such as vomiting, fever, abdominal pain or discomfort, blood in the stool [known as “hematochezia”], vomiting blood [known as “hematemesis”], severe dehydration, weakness, or depression) should prompt more aggressive diagnostic and therapeutic measures
- Fecal accidents, vomiting, changes in fecal consistency and volume, blood or mucus in the feces, or straining to defecate
- Rectal examination by your pet's veterinarian may reveal blood, mucus, or altered consistency of the bowel movement

CAUSES

- Systemic illness may lead to diarrhea as a secondary event
- Dietary indiscretion—eating garbage, non-food material, or spoiled food
- Dietary changes—sudden changes in amount or type of food, including change in brand of food
- Dietary intolerance—abnormal digestion or absorption of food (maldigestion or malabsorption) of foodstuffs; body “over responds” to a particular ingredient in the food (dietary hypersensitivity)
- Metabolic diseases—such as hypoadrenocorticism (Addison's disease; disease in which adrenal glands produce inadequate levels of steroids), liver disease, kidney disease, and pancreatic disease can cause acute or chronic diarrhea
- Intestinal blockage (obstruction) or foreign bodies—eating non-food items (foreign bodies); folding of one segment of the intestine into another segment (known as “intussusception”), or twisting of the intestines and intestinal blood vessels (known as “intestinal or mesenteric volvulus”)
- Unknown cause (known as “idiopathic”)—hemorrhagic gastroenteritis, a specific condition characterized by bloody inflammation of the stomach and intestines and very high packed-cell volume (PCV) caused by the

cellular portion of the blood being a high percentage of the blood volume as compared to the fluid portion (a sign of dehydration)

- Infectious causes
- Viral—parvovirus (canine parvovirus infection and feline panleukopenia), coronavirus, rotavirus, canine distemper virus
- Bacterial—*Salmonella*, *Campylobacter*, *Clostridium*, *Escherichia coli*
- Parasitic—hookworms, roundworms, whipworms, strongyles, and tapeworms, *Giardia*, coccidia
- *Rickettsia*—salmon poisoning (*Neorickettsia*)
- Fungal—histoplasmosis
- Drugs and toxins—such as heavy metals (example, lead), organophosphates (chemicals found in insecticides), nonsteroidal anti-inflammatory drugs (NSAIDs), steroids, antimicrobials, anthelmintics, cancer drugs, lawn and garden products

RISK FACTORS

- Young dogs and cats present for diarrhea from dietary indiscretion, intussusception, foreign bodies, and infectious causes more often than older pets

Treatment

HEALTH CARE

- Depends largely on the severity of illness and underlying cause of the diarrhea
- Pets with mild illness can be treated as outpatients with symptomatic therapy; pets with more severe illness or that fail to respond to symptomatic therapy should be treated more aggressively
- Fluid therapy and correction of electrolyte imbalances is the mainstay of treatment in most cases
- Crystalloid fluid therapy may be administered by mouth (orally), under the skin (subcutaneously), or into a vein (intravenously), as required; can give oral fluids (water or carbohydrate- and electrolyte-containing fluids) to pets that are not vomiting
- Fluid therapy goal is to return the pet to proper body fluid (hydration) status (over 12–24 hours) and replace any ongoing losses due to diarrhea and/or vomiting
- Severe body fluid loss can occur with acute diarrhea; aggressive shock fluid therapy may be necessary
- Potassium supplementation may be necessary

ACTIVITY

- Pets should have limited activity until the diarrhea has stopped

DIET

- Pets with mild illness that are not vomiting—a period of fasting (12–24 hours) often is followed by a bland diet, such as boiled rice and chicken or a commercial therapeutic diet (for example, Hill's Prescription Diet i/d; Purina Veterinary Diets EN)
- Diet recommendations are based on the severity of illness and underlying cause of the diarrhea
- Limit exposure to garbage, foods other than the pet's normal diet, and objects that may be eaten (potential foreign bodies)

SURGERY

- Treatment of intestinal intussusception (the folding of one segment of the intestine into another segment)
- Treatment of intestinal blockage (obstruction), intestinal twisting (intestinal or mesenteric volvulus), or removal of foreign bodies

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

- Antidiarrheal drugs can be classified as drugs that change the movements of the intestinal tract (known as “motility-modifying drugs”), drugs that decrease secretions in the intestinal tract (known as “antisecretory

drugs”), or drugs that coat or protect the lining of the intestines (known as “intestinal protectants”)

- Motility-modifying drugs generally operate by increasing the movement of certain segments of the intestinal tract (known as “segmental motility”) and thus increasing the time for materials within the intestinal tract to move through it (that is, it increases transit time; an example of this type of motility-modifying drug is loperamide) or by decreasing forward movement or motility of the intestinal tract (examples of this type of motility-modifying drug are the anticholinergics); these medications are not necessary in mild disease, as it is generally self-limiting; these medications should be used no longer than 1–2 days because of side effects
- Sudden (acute) diarrhea that does not resolve with antidiarrheal drugs merits further investigation
- Antisecretory drugs (such as opiates, anticholinergics, chlorpromazine, and salicylates) are used to decrease the volume of fluid in the feces
- Bismuth subsalicylate may be of some benefit because of the antisecretory properties of salicylate
- Intestinal protectants generally are not helpful in pets with acute diarrhea and have not been shown to change intestinal fluid or electrolyte loss
- Treatment for intestinal parasites if parasites are suspected (empirical treatment) or if parasites or their eggs are seen on analysis of feces (definitive treatment); medication based on type of parasite suspected or diagnosed
- Antibiotic therapy is probably unnecessary for most cases of mild illness and may actually cause diarrhea; pets with bacteria-caused inflammation of the intestines (known as “enteritis”), severe illness, low white blood cell counts (known as “leukopenia”), or suspected breakdown of the gastrointestinal mucosal barrier (as evidenced by blood in the feces) should be treated with broad-spectrum antibiotics
- Probiotics (such as *Lactobacillus* or *Enterococcus*) may be helpful; probiotics have been suggested to have beneficial effects on the health of the pet by providing a source of enzymes for better digestion of nutrients in the diet and stimulating factors in the immune system
- Kaolin/pectin is an alternative treatment for diarrhea

Follow-Up Care

PATIENT MONITORING

- Most sudden (acute) diarrhea resolves within a few days
- If clinical signs persist, additional diagnostics and treatments may be necessary
- Recheck stool samples in those pets that had parasites identified by fecal analysis
- Monitor for intussusception in pets with sudden (acute) diarrhea, especially young dogs with parvoviral diarrhea and parasitism

PREVENTIONS AND AVOIDANCE

- Puppies and kittens should be vaccinated against infectious causes of diarrhea (such as parvovirus) and treated for intestinal parasites per recommendations from your pet's veterinarian
- Routine stool sample analysis for intestinal parasites
- Limit exposure to garbage, foods other than the pet's normal diet, and potential foreign bodies
- Feed a consistent, high-quality diet

POSSIBLE COMPLICATIONS

- Intussusception (folding of one segment of the intestine into another segment), thought to be associated with increased intestinal motility
- *Campylobacter* enteritis is contagious to people
- Some strains of *Giardia* may be contagious to people
- Roundworm larvae can migrate through the body causing visceral larval migrans and hookworm larvae can migrate under the skin causing cutaneous larval migrans in people, particularly children

EXPECTED COURSE AND PROGNOSIS

- Most sudden (acute) diarrhea resolves within a few days without treatment or with minimal treatment
- Determined by the severity of illness, underlying cause of the diarrhea, and necessary treatment (medical, surgical or both)

Key Points

- Sudden or recent onset of abnormally increased water content and/or solid content in the bowel movements
- Any pet can suffer from acute diarrhea; kittens and puppies are affected most frequently
- Acute diarrhea is usually self-limiting (will resolve quickly)
- Signs of more severe illness (such as vomiting, fever, abdominal pain, blood in the stool [hematochezia], vomiting blood [hematemesis], severe dehydration, weakness, or depression) should prompt more aggressive diagnostic and therapeutic measures
- Limit exposure to garbage, foods other than the pet's normal diet, and objects that may be eaten (potential foreign bodies)
- Follow the recommendations of your pet's veterinarian regarding proper vaccination and deworming schedules

Notes

Enter notes here

