Large Bowel Diarrhea in Dogs: What’s New?

Dogs with large bowel diarrhea usually have small amounts of feces with mucous and/or fresh blood, frequent defecation with urgency, and tenesmus. The term canine idiopathic large bowel diarrhea (CILBD) was coined to describe this syndrome. Previously, many cases were called irritable bowel syndrome, but CILBD is more appropriate because studies of GI motility and visceral sensitivity in affected dogs are lacking. Two different groups of canine patients with CILBD have been defined: dogs that are fiber-responsive and those with suspected stress-associated large bowel diarrhea. Diagnostic criteria for CILBD include chronic or chronic recurring diarrhea for at least 4 weeks, diarrhea of large bowel origin, a lack of identifiable cause (such as Trichuris vulpis infestation or dietary indiscretion), and minimal or no changes observed during colonoscopy. Most dogs respond to fiber supplementation, but not all—some require behavior modification.

Commentary: CILBD is a diagnosis of exclusion that applies to dogs with chronic or chronic recurring large bowel diarrhea in the absence of any other identifiable disorder. Disorders to be excluded include whipworm infestation, clostridial infection, diet-responsive colitis, inflammatory bowel disease, and granulomatous colitis associated with mucosa adherent-invasive Escherichia coli in specific breeds. Dogs affected by CILBD lack evidence of colonic inflammation. This article reviews the limited published studies on CILBD and presents information on 18 new cases that accounted for 22% of dogs referred for chronic large bowel diarrhea. Most dogs respond to fiber supplementation; other treatment options (e.g., motility modifiers, antispasmodics, behavior-modifying drugs) are systematically discussed in this informative article.—P. Jane Armstrong, DVM, MS, MBA, Diplomate ACVIM


Population Structure & Gene Flow for Canine Heartworm

In an effort to examine the population genetic structure of Dirofilaria immitis, 192 nematode samples were collected from 9 geographic regions throughout the United States and Mexico. Analysis and comparison of genome sequences demonstrated that the population clusters into 4 genetic groups strongly influenced by geography. Populations are divided east-to-west by the Rocky Mountains but connected north-to-south by the Mississippi River. There is a significant amount of gene flow in the eastern United States and Gulf Coast regions, and the authors warn that should drug resistance alleles arise they would rapidly spread along the East Coast. This study provides the necessary information to create a predictive model of gene flow in canine heartworm that will inform future disease control strategies.


TRIFEXSTM (pronounced — tri-ef-eks’tim) Chewable Tablets

Before using TRIFEXSTM chewable tablets, please consult the product insert, a summary of which follows:

Caution: Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian. For human use, contact a physician.

Indications: TRIFEXSTM is indicated for the prevention of heartworm disease (Dirofilaria immitis) in dogs. TRIFEXSTM is a broad spectrum antiparasitic that is indicated for the prevention and treatment of hookworm disease (Ancylostoma caninum, Ancylostoma braziliense), and the treatment and control of adult hookworm (Ancylostoma caninum, adult Ancylostoma braziliense), Toxocara canis and Toxocara cati) and adult whipworm (Trichuris vulpis) infections in dogs and cats. See the full prescribing information for adult dogs of 10 pounds or greater and 5 pounds of body weight or greater.

Contraindications: There are no known contraindications to the use of TRIFEXSTM Chewable Tablets.

Warnings: Not for human use. Keep this and all drugs out of the reach of children.

Adverse reactions have been reported following concurrent extraluminal use of ivermectin with 1 or more of the components of TRIFEXSTM Chewable Tablets (see ADVERSE REACTIONS).

Precautions: Treatment with TRIFEXSTM should be discontinued if there is no observable improvement in the condition of the dog within 7 days. The duration of treatment is dependent on the severity of the disease and the response of the dog to the treatment. The safety of TRIFEXSTM has not been established in dogs that are pregnant or nursing, or in dogs that have been previously treated with fenbendazole for a parasitic infection and are not responding to the treatment. In cases where the dog is not responding to the treatment, the use of TRIFEXSTM should be discontinued and an alternative treatment should be administered. The safety of TRIFEXSTM has not been established in dogs that are known to be sensitive to fenbendazole, monepantel, and/or pyrantel pamoate.

Use in breeding females: The use of TRIFEXSTM in breeding females has not been evaluated. Use in breeding females with puppies may result in the transmission of the drug to the puppies through the milk or through the dam. Use in breeding females should be discouraged if the benefits of the drug outweigh the risks to the dam and/or the puppies.

Use in lactating females: The safety of TRIFEXSTM in lactating females has not been evaluated. Use in lactating females with puppies may result in the transmission of the drug to the puppies through the milk or through the dam. Use in lactating females should be discouraged if the benefits of the drug outweigh the risks to the dam and/or the puppies.

Use in conjunction with other anthelmintics: The use of TRIFEXSTM in conjunction with other anthelmintics has not been evaluated. Use in conjunction with other anthelmintics should be discouraged if the benefits of the drug outweigh the risks to the dam and/or the puppies.

Use in combination with other drugs: The use of TRIFEXSTM in combination with other drugs has not been evaluated. Use in combination with other drugs should be discouraged if the benefits of the drug outweigh the risks to the dam and/or the puppies.

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