Exocrine Pancreatic Insufficiency in Cats

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In the Literature

FROM THE PAGE …

Exocrine pancreatic insufficiency (EPI) has traditionally been considered a rare disorder in cats. EPI is confirmed by a subnormal feline trypsin-like immunoreactivity (fTLI) concentration. Values less than or equal to 8 µg/L are considered diagnostic (reference range, 12-82 µg/L). The cause of feline EPI is unknown, but EPI is suspected to be secondary to chronic pancreatitis in most patients.

In this retrospective study, 150 cats diagnosed with EPI based on fTLI concentrations were identified. Clinical manifestations and responses to enzyme-replacement therapy were reported based on questionnaires completed by the primary veterinarians.

Researchers found that clinical presentation of EPI in cats tends to be different than that typically observed in dogs with EPI (ie, weight loss, diarrhea, and polyphagia). Feline EPI can occur at virtually any age (median, 7.7 years). Ninety-one percent of cats had significant weight loss; 62% had unformed feces. Other signs observed included anorexia, lethargy, and vomiting—all possibly attributable to concurrent disease (eg, common GI, hepatic, and/or endocrine diseases). Hypocobalaminemia was also diagnosed in 77% of cats with EPI. Abnormal serum folate concentrations were uncommon.

An overall (60%) good response to enzyme-replacement therapy was reported. Cases with fTLI measuring less than 4 µg/L were most likely to be associated with a positive response to therapy. Parenteral cobalamin supplementation favorably affected the response to therapy, and the authors recommended cobalamin supplementation in all EPI cats regardless of serum concentrations.

Since 1975, there have been only 10 published papers describing feline EPI. All were single-case reports except one case series of 16 cats published in 2009.

The present study, which described 150 cats, is the largest series of EPI cases yet to be reported and highlights the importance of a disease once thought uncommon. EPI should be included as a possible differential diagnosis for any cat of any age with weight loss, diarrhea, anorexia, and/or lethargy, with or without hypocobalaminemia.
... TO YOUR PATIENTS

Key pearls to put into practice:

1. EPI should be considered in any undiagnosed cat of any age with weight loss with or without diarrhea, anorexia, or vomiting.

2. A subnormal serum fTLI concentration is diagnostic for EPI, and EPI is frequently associated with concurrent hypocobalaminemia.

3. Most EPI cats treated with pancreatic enzyme replacement and cobalamin supplementation show a favorable response to therapy.

References


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