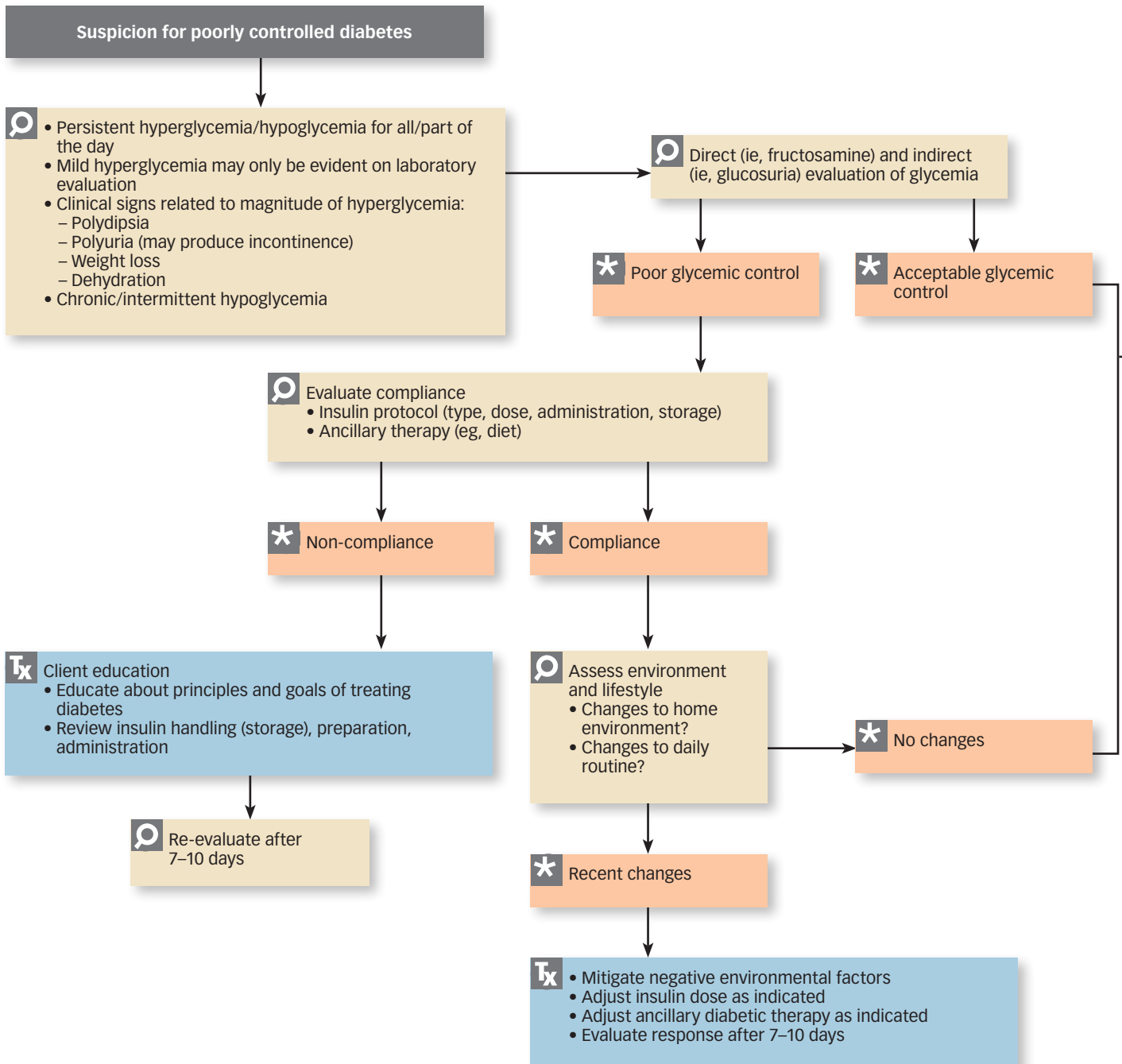


# Lack of Diabetic Control in Cats



## Consequences

Chronic poor control of diabetes may increase risk for:

- Hypoglycemia
- Hyperosmolarity
- Ketoacidosis
- Neuropathy



Evaluate for concurrent disorders

- Physical examination
- Minimum database (CBC, chemistry panel, urinalysis, urine culture)
- Additional testing to confirm diagnosis

**dDx** Disorders that cause insulin resistance

**dDx** Consider:

- **Acromegaly:** Excess growth hormone production caused by pituitary neoplasia can cause severe insulin resistance.
- **Obesity**
- **Bacterial infection:** Includes severe urinary, skin, oral infection
- **Iatrogenic:** Exposure to exogenous glucocorticoid (most common) or progesterone compounds may produce insulin resistance. Glucocorticoids absorbed after application of topical ocular or otic medications/owner hormone creams may contribute to insulin resistance.
- **Pancreatitis:** Severe inflammation may produce insulin resistance; direct damage to pancreatic islet cells may result in loss of functional beta cells and decreased insulin production.
- **Hyperadrenocorticism:** Uncommon, but can produce severe insulin resistance.

**dDx** Disorders that mimic uncontrolled diabetes

**dDx** Consider:

- **Renal disease:** Causes polyuria/polydipsia; early kidney disease may be difficult to recognize with poorly controlled diabetes.
- **Hyperthyroidism:** Loss of body condition with healthy appetite, polyuria/polydipsia; possible but poorly documented cause for insulin resistance.
- **Neoplasia:** Loss of body condition (cachexia/chronic illness) may occur in diabetic cats with neoplasia.
- **Lower urinary tract disorders:** Pollakiuria associated with lower urinary tract disorders (urolithiasis, UTI) may be mistakenly reported as polyuria by owners.
- **Hypercalcemia:** Causes polyuria/polydipsia; look for loss of body condition, inappetence.

<b>dDx</b>	Differential Diagnosis
	Investigation
	Treatment
	Results