EKC is a progressive proliferative infiltrative keratopathy involving superficial vascularization of the cornea, progressing to involvement of the conjunctiva and third eyelid. Infiltration by eosinophils is the disease hallmark. In 75.6% of examined cases, presentation was unilateral; right eye was affected in 59.0% of cases and left eye was affected in 38.1% of cases. Infiltration by eosinophils may occur at any time during the development of EKC. In 75.6% of examined cases, presentation was unilateral; right eye was affected in 59.0% of cases and left eye was affected in 38.1% of cases. The disease progresses over time, with corneal ulceration being observed in 77.8% of cases.

Records of 45 cases of feline eosinophilic keratoconjunctivitis (EKC) were reviewed. Median age at presentation was 5 years, and domestic shorthair cats accounted for 77.8% of cases.

EKC-associated corneal ulceration may be staring on antiviral therapy before PCR results are obtained.

Global Commentary

This study served as a good review of what we know of feline EKC, including the confusion surrounding the name of the disorder, involvement of FHV-1 in its pathogenesis, clinical presentation, and diagnosis. It also provided new information regarding significant differences in FHV-1 prevalence between cases presenting with and without corneal ulceration. However, it lacked treatment and therapeutic guidance. Since FHV-1 is so prevalent in cats, many specialists will not prescribe topical steroid therapy (as recommended in the study) without concomitant antiviral treatment. Without such treatment, steroids may induce FHV-1 reactivation and worsen patient condition. In fact, because of the involvement of FHV-1 in feline EKC pathogenesis, some advocate beginning treatment with antiviral medications and only subsequently adding steroids in cases that do not improve.

The antiviral treatment provided to some cats, presented with or having a history of corneal ulcer. It may be tapered by decreasing the frequency or by doing so every other day or twice a week, until a minimum frequency is reached which will maintain the desired therapeutic effect. ATOPICA should be given at least one hour before or two hours after a meal. If a dose is missed, the next dose should be administered (without doubling) as soon as possible, but dosing should be no more frequent than once daily. See Product Insert for dosing chart.

Atopic dermatitis in dogs is a clinical condition characterized by scratching, licking, rubbing, and self-trauma due to pruritus. It is estimated that 10-20% of dogs may have atopic dermatitis. The skin may be thickened and粗糙, with small, red, raised lesions called papules or plaques. Lesions may be dry or moist and contain crusts or erosions. The most common sites affected are the face, ears, neck, and legs. Atopic dermatitis is often chronic and recurrent, and treatment is usually lifelong.

To report suspected adverse reactions or for technical assistance, call 1-800-312-2761.

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