Feline Ophthalmology

Although eyes are remarkably similar between domestic species, the feline eye presents some unique features both in normal anatomy and response to disease. In addition, there are a number of ocular conditions which occur only in the cat. In general, the cat eye exhibits a much less pronounced response to inflammation than seen in the dog. The cornea is slower to demonstrate edema or vascularization and corneal pigmentation is extremely rare. Thus, detection of the early stages of ocular disease in cats can be more challenging. Some of the more common conditions of the feline eye are discussed here.



Herpesvirus keratitis characterized by superficial dendritic corneal ulcers.

Severe keratoconjunctivitis with chemosis, corneal edema and ulceration.

CONJUNCTIVITIS in cats most often occurs secondary to systemic upper respiratory infections. Etiologic agents include: Herpesvirus, Calicivirus, Mycoplasma, Chlamydia. Often the ocular symptoms persist long after apparent resolution of the respiratory disease, possibly due to infection within the nasolacrimal duct. Diagnosis can be made by immunofluorescent antibody testing or virus isolation, however false negatives are common. A polymerase chain reaction (PCR) test is the most sensitive diagnostic method. A conjunctival or corneal scraping or (preferably) a biopsy is frozen in saline and sent overnight to a specially-equipped laboratory (currently Colorado State University). The test involves amplification of DNA within the sample to identify the presence of the virus. Antiviral medications available include idoxuridine (compounded), trifluridine (Viroptic®) and vidarabine (compounded) -- virus sensitivity is variable and medication must be continued TID-QID for 3-6 weeks. Unresponsive cases should have an evaluation of the immune system including FeLV and

Veterinary Vision – Animal Eye Specialists http://www.veterinaryvision.com/dvm_forum/dvm-feline.htm