



# Collapsed cat

C&T No.5024

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## Day 1

'Billy', a 9-year-old male neutered DSH, was diagnosed as FIV-positive in 2005. The owner returned from night shift and found Billy in the garden not able to get up. Billy presented to the clinic with hind limb paralysis and forelimb paresis – propped up he could stand for few seconds.

Heart rate was 180bpm, grade 3/6 systolic heart murmur, mucous membranes pink, CRT <2 sec, tick search negative, pain on palpation of the hips and lumbar spine, slight increase in respiratory rate, bilateral femoral pulses and warm extremities, rectal temperature 38.5°C, SG 1.050 ++, creatinine kinase 345 and PCV 22%.

Due to financial constraints we were unable to do any more laboratory testing and the cat was admitted to hospital for examination. Xrays of the lumbar spine and hips were normal. During the course of the day I noted that Billy started to become a little shaky and twitchy.

## Day 2

Billy's temperature was 38.3°C, he still couldn't walk but seemed to feel a little stronger and had quite severe muscle fasciculation and twitching compared with the day before. The most notable muscles showing fasciculations were the flank panniculus muscles, tongue and tail. His tail stood straight up and twitched like he was spraying.

### Differential diagnosis

- Toxoplasmosis.
- Organophosphate (OP) poisoning, causing denervation and lower motor neuron signs

Billy was started on 1 month clindamycin 75mg BID.

**Diet:** Whiskas® tin food and dry food (no Orijen® cat food).

Given there was no life threatening neurological signs we decided to monitor Billy's progress. We figured if it was OP poisoning then he would start to recover away from the source of exposure. Further history from the owner provided further support for the possibility of OP exposure – the farmer next door apparently sprays with OP constantly and had sprayed again over the last few days.

## Day 3

Billy still had muscle tremors and could not walk. He was eating, drinking, urinating and defecating on his own and although he

could not walk, he could stand for short periods. As he was getting stronger every day we sent him home for cage rest.

## Day 8

The owner reported Billy was able to walk small distances now and was slowly improving every day. He was still twitching and had prominent muscle fasciculations of the tongue.

## Day 9

On physical exam Billy could walk well but he was unable to co-ordinate jumping. Generalised muscle fasciculation persisted.

Eight weeks after the initial presentation of Billy to the surgery Richard Malik was visiting and examined Billy. Richard suspected that Billy indeed had some 'Organophosphate-induced disease' and sourced the article: The recognition and treatment of the intermediate syndrome of organophosphate poisoning in a dog', *Journal of Veterinary Emergency and Critical Care* 12(2) 2002 pp99-103. After reading this article I believe Billy had chronic OP poisoning – OP-induced delayed neuropathy (OPIDN).

We sourced 2-PAM (praladoxime iodine) through our local hospital and administered a dose of 20mg (3mLs) IM SID. Three doses 24 hrs apart were given at 3 different sites due to the volume of the injection. One hour post treatment Billy seemed fine, vitals were OK and he was not distressed. Two weeks after treatment Billy seemed the same, with no improvement according to the owner.

I believe that Billy had OPIDN and as a result has permanent peripheral nerve damage. If we had have recognised this condition at the onset and administered the 2-PAM at that time then I believe we may have got some resolution of clinical signs.

Our Local Hospital Pharmacy had 2-PAM (albeit iodine not chlorine) and had to keep it stocked and in date. Instead of having to pay hundreds of dollars for large quantities (5 vials), this is a great way of getting unusual drugs cheap.

### Videos of this case available online



Figure 1. A still from the video clip.

We're very grateful to Quentin for going to the additional trouble of making 4 videos of this case available to members to view in the *Control & Therapy* Series section of our website, [www.cve.edu.au](http://www.cve.edu.au)

We encourage all contributors to include video clips wherever possible.