Message from AVMA Chief Veterinary Officer:

11/22/23

We are indeed seeing more reports of canine respiratory disease in the media. To our knowledge, so far, a causative agent still hasn't been identified. We know there is considerable concern out there, so also important to recognize is that canine respiratory disease complex in general is a relatively common condition and, most of the time, affected dogs recover without incident.

That said, we've been watching these reports, including more detailed information coming from the states of Oregon and Colorado. In addition to cases in Oregon and Colorado, illness has been reported, either officially or anecdotally, in California, Florida, Georgia, Idaho, Indiana, Illinois, Massachusetts, New Hampshire, Rhode Island, and Washington. State officials in Oregon say they have received about 200 case reports from veterinarians in that state since mid-August. They have told us that they are working with state and national diagnostic laboratories to identify the causative pathogen, asking veterinarians to report cases in Oregon to the department as soon as possible, and advising dog owners to work with a veterinarian if their pet is ill. While some cases may have bacteria associated with them, we have heard current suspicions are that a virus is a likely culprit. The Colorado State University College of Veterinary Medicine and Biological Sciences says, "The possible virus, which is under intense observation by Colorado State University veterinarians, has been linked to cases of severe pneumonia and, tragically, resulted in some fatalities."

The ODA says cases reported to them appear to primarily fall within three general clinical syndromes:

Chronic mild to moderate tracheobronchitis with a prolonged duration (6-8 weeks or longer), that is minimally or not responsive to antibiotics.

Chronic pneumonia that is minimally or not responsive to antibiotics.

Acute pneumonia that rapidly becomes severe and often leads to poor outcomes in as little as 24 to 36 hours.

AVMA is urging dog owners to work with a veterinarian if their pet is ill, and suggesting veterinarians report cases to their state veterinarian or state public health veterinarian (depends on who is responsible for companion animal disease in their state). With respect to that latter recommendation, we recognize that the parameters around reporting will vary by state.

Until a causative agent is identified, and assuming a viral etiology, treatment is usually supportive (i.e., good hydration, nutrition) with the intent to prevent secondary bacterial infections. If a bacterial cause is identified or strongly suspected, then antibiotics may be indicated. Initial therapy is prescribed based on likely respiratory pathogens and information about the coverage provided by various antibiotics. In severe cases, a parenteral antimicrobial combination that includes a fluoroquinolone and penicillin or clindamycin has been recommended. More severely affected dogs may need more aggressive treatment, which may include hospitalization (with isolation) and provision of IV fluids, oxygen support, nebulization and coupage. Because tracheal irritation is a common feature of respiratory disease in dogs, care should be taken to prevent further irritation to the trachea by avoid a neck lead and removing

barking triggers. A helpful article on Canine Infectious Respiratory Disease Complex (generally) and its treatment is available here: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7132485/).

Separately, the San Diego Humane Society (SDHS) is dealing with a canine respiratory illness outbreak that has been exacerbated by overcrowding. The organization said that four of its dogs died after being infected with Streptococcus equi subsp. zooepidemicus (S. zooepidemicus), which has been complicated by infection with additional bacterial agents in some cases (see November 13 statement).

At this time, there are no indications that there is a connection between the San Diego situation and the cases in Oregon, Colorado, and other areas of the country.

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