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Complicated Corneal Ulceration in Cats: Clinical Diagnosis and Surgical Management of 80 Cases

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Abstract: Objectives: To describe the most common clinical and endoscopic findings associated with complicated corneal ulcers in cats, and to determine the short-term outcomes after surgical treatment of these cats. Animals Eighteen client-owned cats of different breeds (52 females and 28 males), ranging in age from 3 months to 6 years, with corneal ulcers. Procedures: Cats were clinically evaluated to initially determine the concurrent corneal abnormalities. Endoscopic examination was performed to determine the anterior and posterior segments abnormalities. Superficial and deep stromal ulcers were treated using conjunctival flap. Corneal sequestrum was treated by partial keratectomy and conjunctival flap. Anterior synechia was treated via peripheral iridectomy and separation of the adhesion between the iris and the inner cornea. Symblepharon was treated by removal of the adhered conjunctival membrane from the cornea. Incurable endophthalmitis was treated surgically by extirpation. Short-term outcomes after surgical managements of selected corneal abnormalities were then assessed clinically and endoscopically. Results: Deep stromal ulcer with descemetocele, endophthalmitis, symblepharon, corneal sequestration and anterior synechia with secondary glaucoma and corneal scarring were the most common complications of corneal ulcer. FHV-1 was a common etiologic factor of corneal ulceration. Persistent corneal scars of varying shape and size developed in cats with deep stromal ulcer, anterior synechia, and corneal sequestration. Conclusions: Domestic shorthaired and Persian cats were the most predisposed breeds to FHV-1 infection and subsequent corneal ulceration. Immediate management of patients with corneal ulcer would prevent serious complications. No age or sex predisposition to complicated corneal ulceration in cats.

Keywords: cats, complicated corneal ulceration, clinical, endoscopic diagnosis, FHV-1 **Conference Title:** ICNO 2016: International Conference on Neuro Ophthalmology

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