Intestinal Parasites of Cats

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Intestinal parasites are a common occurrence in both indoor and outdoor cats worldwide. Cats may contract parasites from their mothers near the time of birth, through hunting, contact with dirt or soil (on shores or around houseplants), eating houseflies or fleas, or through other routes. Signs of parasites may vary from severe diarrhea and weight loss, to mild subclinical disease. Cats with parasites are often uncomfortable and present a risk of disease transfer to humans.

If your cat is diagnosed with an intestinal parasite, it is important to use appropriate dewormers. Not all parasites are treated with the same medications. Many treatments, such as high fiber diet, diatomaceous earth, or other remedies may improve clinical signs transiently, but do not kill parasites effectively.

Roundworms

The most common intestinal parasite of the cat is the roundworm, (usually *Toxocara cati*, though *Toxascaris leonina* is also a concern). Roundworms are acquired when cats eat an infected host, such as mice, birds, or insects. Kittens may acquire roundworms during nursing from an infected queen. An infected queen may harbor the larvae of the parasite in her body tissues for years, and so being an indoor, dewormed cat does not remove risk to kittens. These larvae can undergo reactivation during pregnancy and lactation and infect the nursing kittens. Typically, kittens are more likely to be clinically affected than adult cats and may have diarrhea, vomiting (sometimes with worms in the vomitus), swollen abdomen and failure to grow. Since *T. cati* also migrates throughout the liver and lungs of the cat, kittens can also cough due to pneumonia.

These white worms live in the small intestine of the cat and grow up to six inches in length. The eggs produced by the female worms are shed in the cat’s feces and can persist in contaminated soil for years. Roundworm infections are diagnosed by finding the adult worms in vomitus, or by finding the eggs on a fecal examination. Not all cats with roundworms will shed adult worms, so microscopic examination of stool is usually required. Treatment is simple and involves a deworming program using multiple doses of one of many available drugs. It is important to complete a full course of deworming using an appropriate dose and schedule. All kittens being adopted into a new home should receive deworming for roundworms.

Roundworms have considerable public health significance. In humans, they can cause a disease called larva migrans. This disease occurs when larvae of one of various parasites migrate into the deep tissues of the human body. In most cases, the larvae are from the dog roundworm, *Toxocara canis*, or the raccoon roundworm, *Baylisascaris procyonis*. However, cases associated with *T. cati* have been documented. Children can become infected by accidental ingestion of eggs from contaminated environments. If a heavy infestation occurs, severe disease in the eye, lung or liver requiring treatment can occur.
Tapeworms

Tapeworms are parasites of the small intestine that typically cause few signs of illness in an infected cat. The most common tapeworm in the cat is *Dipylidium caninum*. Adult tapeworms are ribbon-like worms and can grow up to several feet in length. They are composed of hundreds to thousands of individual segments and can live for 2 to 3 years. A heavily infected cat can contain dozens of tapeworms and can suffer from malnutrition and inflammation of the intestinal wall.

Unlike other intestinal worms, tapeworms rarely shed eggs in the cat’s feces, but rather shed motile units called "proglottid segments". The proglottid segments, about the size of a grain of rice, are passed with the feces and are often found clinging to fur under the cat’s tail or dried up in the cat’s sleeping areas. These segments crawl around, releasing tapeworm eggs into the environment.

The eggs of *D. caninum* are ingested by flea larvae, which eventually develop into adult fleas infected with tapeworm larvae. Cats become infected when they ingest these adult fleas during grooming. Two to three weeks later, the infected cat starts to shed proglottid segments and the cycle is repeated. Control of tapeworms therefore also involves control of fleas, which act as a reservoir for reinfection. Note that treating a flea infestation will not kill tapeworms already infecting the cat.

There are common prescription dewormers that are effective against tapeworms, such as praziquantel and epsiprantel. These medications may be available alone or in combination with other drugs to make a broad-spectrum dewormer. Only one dose of dewormer is necessary to treat tapeworm infections. Unlike roundworms, tapeworms rarely cause human disease.

Hookworms

The cat is host to three types of hookworms: *Ancylostoma tubaeforme*, *Ancylostoma braziliense*, and *Uncinaria stenocephala*. The most commonly found is *A. tubaeforme*. These small intestinal parasites are usually acquired by ingestion of feces, which contain infective larvae, although they can also be acquired through skin penetration. Cats may also be infected by eating rodents carrying hookworm larvae. This parasite is not known to spread to kittens from an infected queen through the placenta or through milk.

Most larvae develop to adult hookworms in the small intestine and live from six months to one year. However, some larvae become dormant and hide in body tissues. It is possible for them to reactivate at some later date and re-establish adult hookworms in the small intestine. The adult hookworms shed eggs into the feces of the cat and infective larvae later develop to repeat the cycle.

Kittens are most severely affected by this blood-sucking worm and may suffer diarrhea with dark or bloody stools, vomiting, weight loss, weakness and anemia. In some cases, especially in adults, the infection can be asymptomatic. Chronic cases can develop significant anemia. The infection is diagnosed by finding the parasite eggs in feces under a microscope. While hookworms can occur in any cat, those from warmer climates are at higher risk of infection. Treatment of hookworm infection is the same as for roundworms, using the same medication and treatment schedules.
Hookworms are transmissible to humans and are one cause of the skin disease called "cutaneous larva migrans". The infective larvae can penetrate human skin and cause a red, itchy rash. When large numbers of larvae infect a human, they may migrate to the lungs and cause significant disease.

**Coccidiosis**

Coccidiosis is caused by the protozoal parasite *Isospora*. This microscopic parasite is not visible to the naked eye and lives within the wall of the intestine. It is thought that almost all cats will become infected with *Isospora* in their lifetime. These protozoan parasites primarily inhabit the small intestine of cats and most infections cause no clinical signs of illness. Kittens are most likely to show signs of diarrhea, which is often bright yellow (sometimes with blood or mucus). In rare cases infection may be fatal. Clinical signs are most common at the time of weaning and are often seen in kittens living in crowded conditions. Kittens suffering from other ailments, such as malnutrition, and concurrent bacterial or viral infections, are most likely to become ill.

*Isospora* infects cats either through the ingestion of infective oocysts (microscopic eggs) from the environment, or when a cat eats a prey animal infected with the parasite. The parasite completes its life cycle in the intestinal tract of the cat and new oocysts are then shed in the cat’s feces. These oocysts usually require several days in the environment before they are infective, although under the right conditions this can occur in as little as six hours. This fact means that good litter box hygiene and prompt removal of feces can help break the fecal-oral route of transmission in a multi-cat environment.

Diagnosis of *Isospora* infection is through identification of the oocysts on fecal examination under the microscope. Sulfonamide antibiotics have traditionally been the drugs of choice for small animal infections, although many infections clear spontaneously. However, these drugs can only curtail some stages of parasite reproduction and cannot eliminate the parasite from an infected cat. Considerable sulfonamide resistance is now present in many areas as well. Other drugs, such as ponazuril and toltrazuril, are being used in many situations.

**Giardia**

*Giardia* is the most commonly diagnosed intestinal parasite found in humans, and its distribution is worldwide. While the infection rate in cats is lower, it also often goes undiagnosed and up to 15% of cats may have giardia at some point in their life. *Giardia* can be found in the small intestine of many types of animal. The question of whether dogs and cats can function as a reservoir for human infections is unclear, but precautions should be taken. This protozoan parasite is most common in cats under one year of age and in multi-cat environments. Most infected cats have no signs of illness.

The parasite lives primarily in the small intestine of the cat, although it can sometimes be found in the large intestine. It is spread by fecal-oral transmission when infective cysts are passed in the stools and then contaminate the environment, including food and water. These cysts can survive for months in the right conditions. When a cat ingests cysts from its environment, signs of illness can occur in less than two weeks. The most common clinical sign is diarrhea, often containing mucus. The diarrhea can be mild or severe and it may be constant or intermittent. Some cats also suffer from weight loss. Young cats and kittens are most severely affected, and they may be dehydrated, lethargic, and suffer from loss of appetite.
This parasite is diagnosed by examination of fresh fecal smears using various techniques, however some laboratories and veterinary clinics are now offering more accurate fecal ELISA tests for *Giardia*. It is currently recommended that all cats diagnosed with *Giardia* receive treatment, whether they are ill or not. The most common drug used to treat this parasite is metronidazole, but resistance to this drug can cause treatment failures. Other drugs, such as albendazole or fenbendazole, may be more effective. Environmental control is also very important, especially in multi-cat environments, where bleach is the disinfectant of choice.

**Tritrichomonas**

Trichomoniasis is caused by infection with the parasite *Tritrichomonas blagburni* (often referred to as *Tritrichomonas foetis*). This organism is related to giardia and has a similar broad distribution. It is most commonly found in cattery cats and other high-density housing situations. Tritrichomonas does not form eggs or cysts, and so does not survive well in the environment. Thorough cleaning of living areas can prevent disease transmission.

Infected cats are often subclinical, but may have repeated episodes of diarrhea, soft stool, weight loss, and flatulence. While clinical signs are often mild and rarely fatal, their chronic nature can make this a frustrating condition. Diagnosis is based on microscopic analysis of fecal smears, or more accurately by PCR or other molecular methods.

Treatment of tritrichomonas can be difficult, as it is not susceptible to many common drugs. The most success has been found using ronidazole, however this carries some potential toxicity and human health concerns. Research is ongoing to find answers on prevention and/or treatment of trichomonosis.

**For more information:**

Companion Animal Parasite Council – Pets and People
http://www.petsandparasites.org/

Cornell Feline Health Center:
http://www.vet.cornell.edu/fhc/Health_Information/brochure_parasite.cfm

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