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Successful clinical management of vestibular syndrome in a cat: A Case report

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Abstract

A nine-month-old domestic shorthair cat was presented to the Emergency and Critical Care Unit, Madras Veterinary College with clinical signs including ataxia, head tilt, horizontal nystagmus, circling and falling toward the right side. Neurological examination revealed an absence of the placing reflex in both the right forelimb and hindlimb as well as a lack of palpebral reflex in the right eye. Radiographic imaging demonstrated calcification of the right ear canal. Based on these findings a diagnosis of right-sided vestibular syndrome was made. The cat was treated with antibiotics and anti-inflammatory medications for one week followed by nutraceutical supplementation for one month. Partial clinical recovery was observed after three weeks of treatment.

Keywords: Feline, Vestibular syndrome, Calcified ear canal, Neurological examination

Introduction

Vestibular disease also known as feline vestibular syndrome, affects the inner ear specifically the vestibular system and is the most frequently encountered neurological disorder in small animal veterinary practice (Kent *et al.*, 2010) [3]. The vestibular system serves as the primary sensory apparatus responsible for maintaining balance, posture, and proper spatial orientation relative to gravity (LeCouteur and Vernau, 1999) [5]. Dysfunction of this system leads to vestibular syndrome, which is typically characterized by clinical signs such as head tilt, rolling, nystagmus, and falling toward the affected side (Kornegay, 1991) [4]. The syndrome arises from lesions affecting either the peripheral or central components of the vestibular system (Thomas, 2000) [7]. The most common cause of peripheral vestibular disease is otitis media or otitis interna. In contrast, central vestibular disease may result from the extension of infection from the middle ear through the nerves and blood vessels of the internal acoustic meatus or via hematogenous spread (Lowrie and Vetmb, 2012) [6]. Medical management often includes antibiotics, anti-inflammatory drugs, and anti-nausea medications particularly during the acute phase to alleviate dizziness or vertigo (Boldan, 2023) [1].

Case history and clinical observation

A 9-month-old female Domestic Shorthair cat was presented to the Emergency and Critical Care Unit, Madras Veterinary College, Chennai exhibiting clinical signs of head tilt, horizontal nystagmus, circling, and falling toward the right side. Neurological examination revealed an absence of the placing reflex in both the right forelimb and hindlimb, as well as a lack of palpebral reflex in the right eye. The case was subsequently referred to the Radiology unit for a skull ventro-dorsal radiographic view. Radiographic imaging demonstrated calcification within the right ear canal. Based on these clinical, neurological, and radiographic findings a diagnosis of right-sided vestibular syndrome was established.

Treatment and discussion

The cat was treated with Tab. Amoxicillin and Cloxacillin (15mg/kg, p/o BID for 6 days) and Inj. Prednisolone 0.2 ml intramuscularly for 3 days. Further Neurokind forte syrup 1 ml per day for a month. Cat showed uneventful recovery on follow up treatment

According to Cook (2004) [2] the likely cause of vestibular syndrome in this case was an inner ear infection, as diseases of the ear frequently lead to neurological signs due to damage to peripheral nervous system structures associated with the middle and inner ear. The diagnosis of right-sided vestibular syndrome was further supported by the clinical presentation specifically, circling and falling toward the right side which aligns with Kornegays (1991) observation that head tilt, circling, falling, and rolling typically occur toward the side of

the lesion. In the present case, the nystagmus resolved and clinical improvement was noted within a few weeks of initiating supportive therapy, consistent with findings reported by Lowrie and Vetmb, (2012) ^[6] and Kornegay (1991) ^[4]. Although vestibular disease is generally not life-threatening, the response to medical management and overall prognosis depends on the underlying etiology as well as the type, location and duration of the disease.



Fig 1: (Miotic Pupil, Protruded nictitating Membrane, Head Tilt (Right Side), Dropping of upper eye lid)



Fig 2: Skull VD Radiography – Calcification of Right Ear bulla

Conclusion

Clinical signs including ataxia, head tilt, horizontal nystagmus, circling and falling toward the right-side prominent evidence to diagnose the vestibular syndrome in cats. Radiographic imaging to differentiate the other clinical conditions responsible for appearance of these clinical signs. Treatment included antibiotics and anti-inflammatory medications for one week followed by nutraceutical supplementation for one month.

Conflict of Interest

Not available

Financial Support

Not available

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