



Leptospirosis: Urine trouble!

Eleanor Haskey

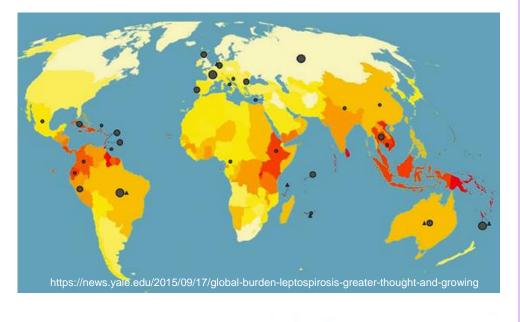
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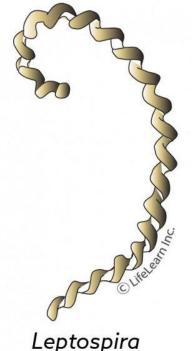




What is Leptospirosis?

- > First described in 1899
- > All mammals are susceptible
- Leptospires:
 - Thin, flexible, motile, filamentous spirochete bacteria
 - Either pathogenic or saphrogenic
- Estimated >1 million cases worldwide each year = 59,000 deaths
 - 2017 92 cases reported in the UK
- Veterinary statistics:
 - UK 2016 0.8 cases/10,000 dogs
 - USA IDEXX 40,000 submitted samples (2009 2016) = 5% +

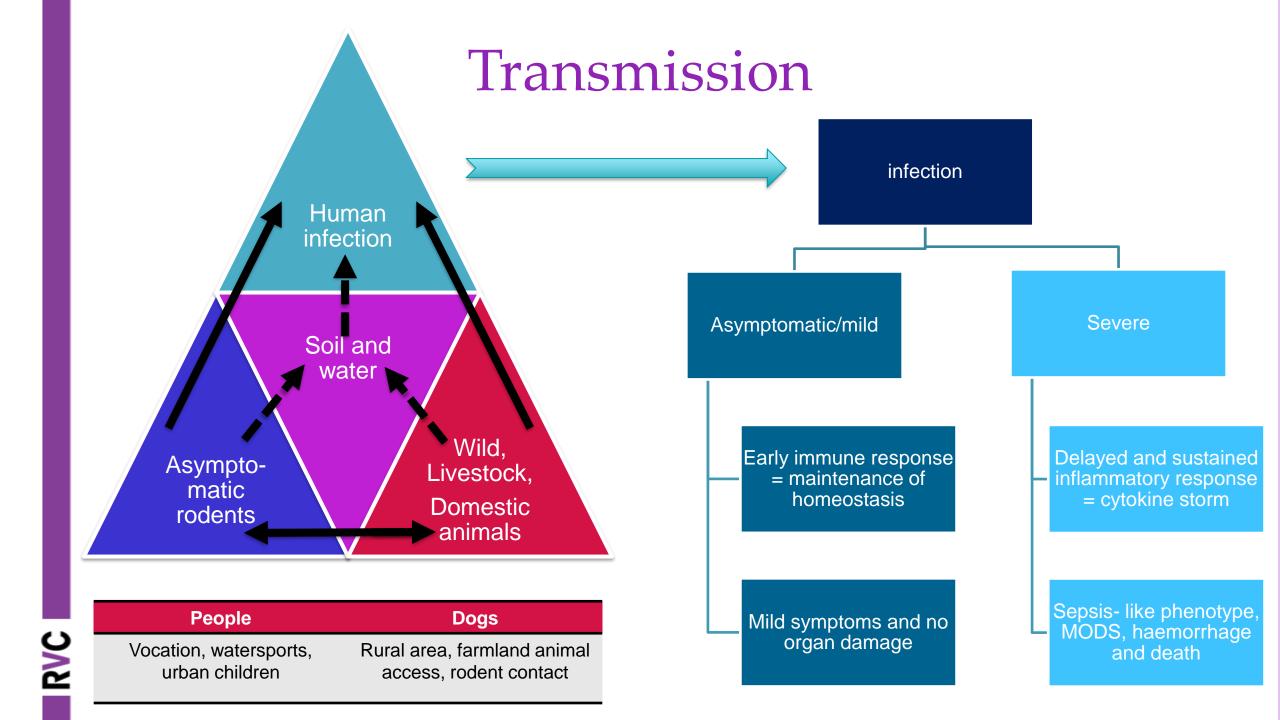




Different Serovars

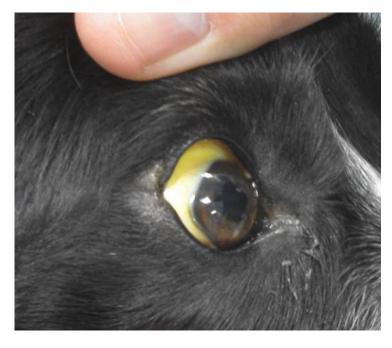
Serovar	Reservoir hosts	Domesticated animal
Canicola	Dog	Dog, Cat, Horse, cow, pig
Icterohaemorrhagic	Rat	Dog, Cat, Horse, cow, pig
Bratislava	Rat, Pig, Horse	Dog, cow, horse
Pomona	Cow, Pig	Dog, cat, Sheep, Goat, Rabbit
Brataviae	Rat, mouse	Dog, Cat, Cow
Grippotyphosa	Vole, raccoon, skunk	Dog, cat, cow, pig, sheep, goat, rabbit
Autumnalis	Mouse	Dog, Cow
Hardjo	Cow	Dog, pig, horse, sheep

- 100s of pathogenic serovars grouped in genotype-based classification
- Each genotype is classified to one or more maintenance/reservoir host species
- Genotypes causing clinical disease in dogs remain poorly characterised
- Other factors determine disease

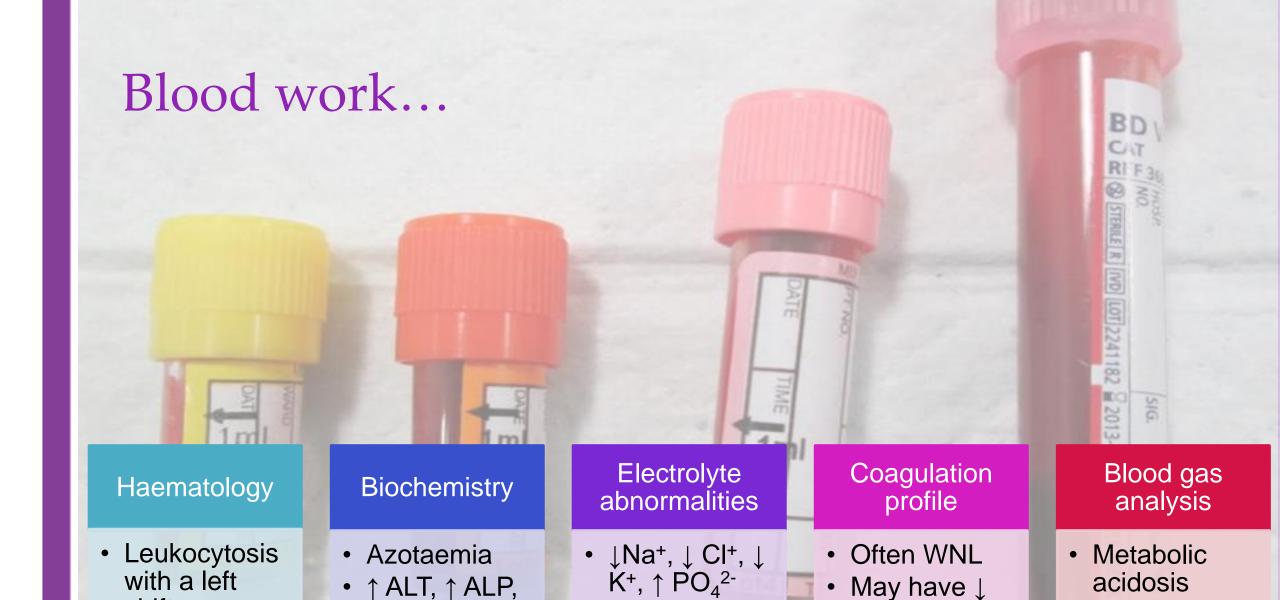


History and clinical exam

- Signalment
- Risk factors
- Vaccination history
- General signs:
 - Anorexia
 - Vomiting
 - Abdo pain
 - PU/PD
 - Dehydration
 - Icterus







fibrinogen + ↓

platelets

bilirubin

• ↑ CK activity

<u>~</u>

shift

↓ platelets

Urinalysis

- Urinestix:
 - Glucosuria, proteinuria, and bilirubinuria
- Urine sediment:
 - leukocytes, casts, and erythrocytes
- Urine specific gravity:
 - <1.020 common



Leptospirosis identification

Microscopic Agglutination Test (MAT)

- Most frequently used test
- Detects serum antibodies against leptospires in the dog's blood
- Titers can be negative in the first 10 days therefore a second sample should be obtained

In house assays

- ELISA snap test
- Detect IgM or IgG antibodies to leptospires
- Bedside quick result
- Cannot differentiate between serovar

Polymerase Chain Reaction

- Best performed on blood and urine
- Identify infection earlier than routine serologic testing, but high sensitivity may result in occasional false-positive diagnoses

Imaging

Thoracic Radiographs

Pulmonary haemorrhage

Abdominal Ultrasound

- Increased renal cortical echogenicity
- Renomegaly, hepatomegaly
- Pyelectasia
- Medullary band sign



Treatment

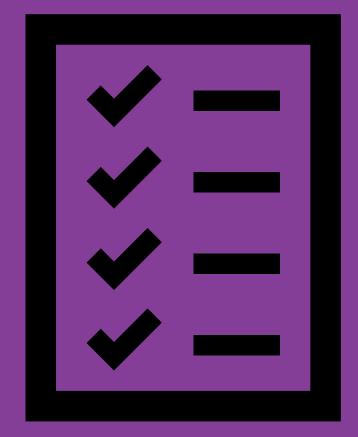
Antibiotic Therapy

- > Immediately inhibit multiplication and reduce fatal complications
- > Penicillins (Ampicillin) are the antibiotics of choice 14 days
- Eliminated mostly via renal tubules
 - may need to be adjusted accordingly in azotaemic animals
- Once penicillin therapy is completed, other antibiotic classes should be administered to eradicate the carrier state

Nursing considerations

- > CV monitoring
 - Perfusion parameters
 - Management of hypertension
- Adjusting fluid therapy
 - Dehydration and shock
 - Match ins with outs urinary catheter/UOP
 - Monitoring for fluid overload
- Management of IV catheter and central line
- Liver support
 - Antioxidants
 - Ursodeoxycholic acid / Destolit

Kirby's Rule of 20





Nursing Considerations

- Managing vomiting, gastric dysmotility and diarrhoea
- Monitoring of acid base and electrolyte abnormalities
- Monitoring for signs of bleeding and
 DIC
- Nutrition
- Pain management

Oliguric/anuric kidney injury

- Signs of overload
- Cease IVFT
- Consider frusemide

Consider CRRT



Prevention

Eliminate carrier state – doxycycline/fluoroquinolone 4 weeks

Personally:

- Education
- Hygiene
- Vaccination and prophylactic treatment?

In the clinic:

- Infection control plan isolation, barrier nursing, disinfection
- Contaminated urine is highly infectious to humans

In the environment:

- Pest control, hand hygiene, vigilance if in the high risk category
- Vaccination dogs, cattle, pigs and horses

Vaccination



- Vaccines against canicola and icterohaemorrhagiae available since the mid-1980s
- New vaccines that include serovars canicola, icterohaemorrhagiae, bratislava and grippotyphosa
- Annual vaccination recommended gives 84% protection in clinical state and 88% against renal carrier status
- Anaphylactic reactions can occur

Recovery and Prognosis

- > 70% Recovery = Resolution of azotaemia and other associated electrolyte, metabolic, and biochemical abnormalities
- Clinical recovery is usually complete
- Dogs that recover may have permanent renal insufficiency
- All recovered patients should be monitored closely for development of/complications associated with chronic kidney disease

Questions?



http://www.iris-kidney.com/guidelines/grading.html

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