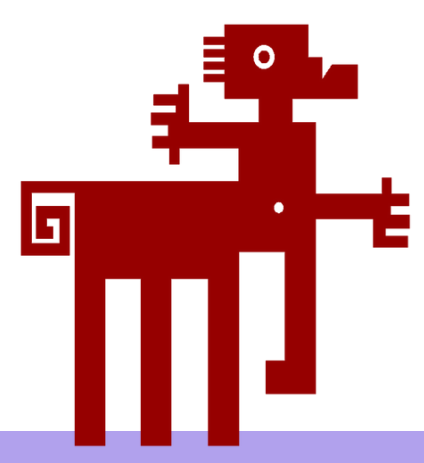


FELINE LEISHMANIOSIS, A NEW WIKIPEDIA PAGE



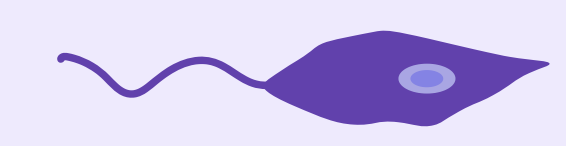
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FINAL DEGREE PROJECT - JUNE 2025 - MY-ANH DOAN TAN PHAT

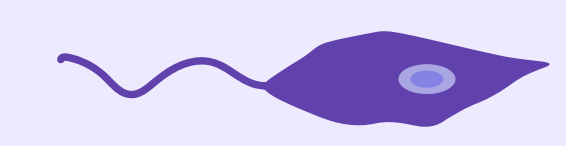
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INTRODUCTION

Feline leishmaniosis is a veterinary parasitic disease caused by protozoan parasites of the genus *Leishmania*, transmitted by the bite of infected phlebotomine sandflies. Although less common than in dogs, this infection is increasingly recognized in cats, especially in endemic regions.

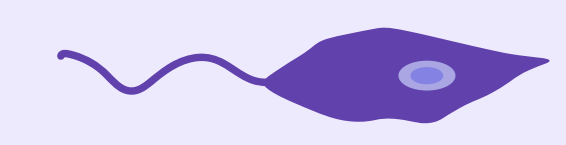


species affected: Domestic cats (*Felis silvestris catus*)

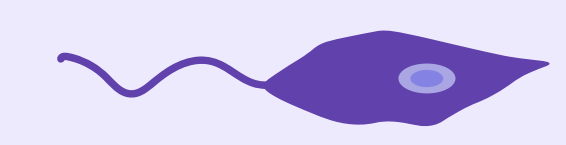


etiological agents: **LEISHMANIA INFANTUM**

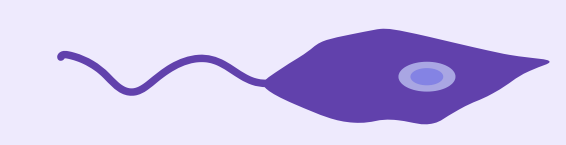
L. major, *L. tropica*, *L. mexicana*, *L. braziliensis*, *L. amazonensis*, *L. panamensis* and *L. guyanensis*.



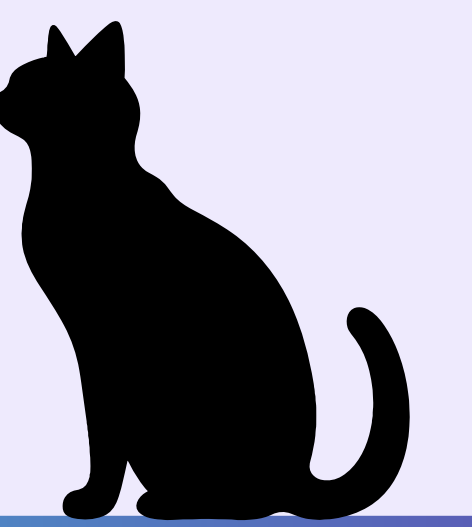
vector: Sandflies of the *Phlebotomus* and *Lutzomyia* genera



endemic areas: Mediterranean basin, Middle East, Central and South America

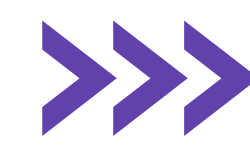
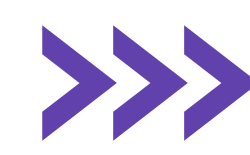
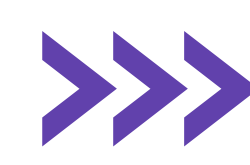


risk factors: short-haired cats, adult, male, outdoorsy (free-roaming or shelter cats)



MOST COMMON CLINICAL SIGNS

- **cutaneous** : ulcers and nodules on the head and distal limbs
- **ocular** : anterior uveitis
- **oral** : lesions or nodules on tongue and gingiva, stomatis, gingivitis
- **systemic** : lymphadenomegaly, lethargy, weight loss



LABORATORY ABNORMALITIES

- **polyclonal gammopathy**
- **anemia** (non-regenerative)
- **renal azotemia**
- **proteinuria**

DIAGNOSTIC

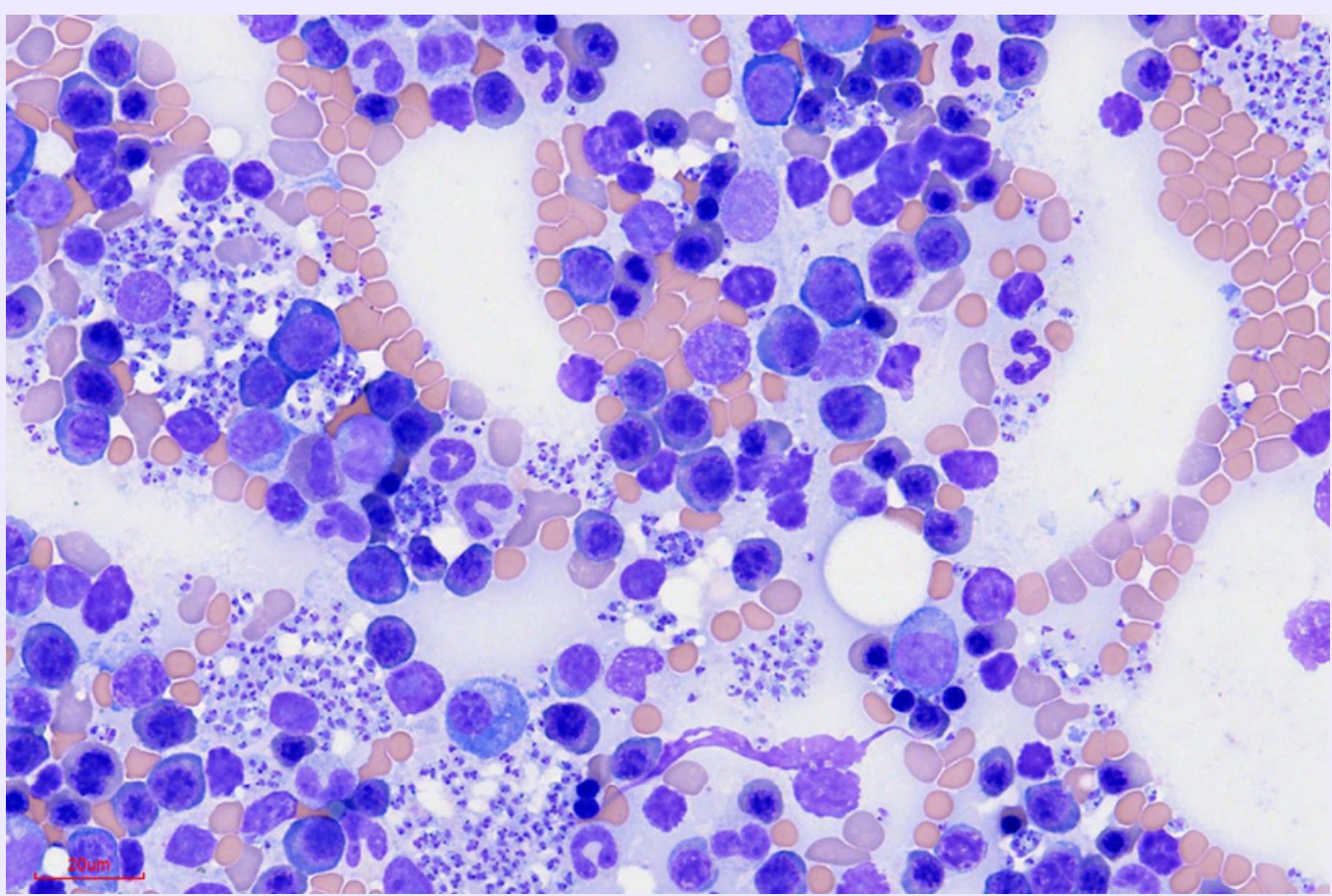
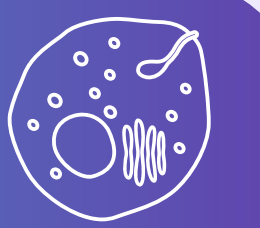


Figure 1. Cytology from a cat with hemolytic anemia affecting erythroid precursors, showing numerous *Leishmania* amastigotes.

1

Clinical and laboratory findings compatible with the disease.

2

Quantitative serology (IFAT, ELISA) to measure antibody levels.

3

Cytology in any lesional tissue such as skin, lymph nodes, spleen, bone marrow or biological fluid to directly observe amastigotes.

4

Histology with immunohistochemistry to detect *Leishmania* antigens in tissue samples.

5

PCR to detect parasite DNA.

Concurrent diseases, immunosuppressive therapies, and co-infections, such as retroviral infections, that impair immune system significantly increase the risk of developing the disease. Infection with Feline Immunodeficiency Virus (FIV) increases this risk by 2.8 times.

COMORBIDITIES

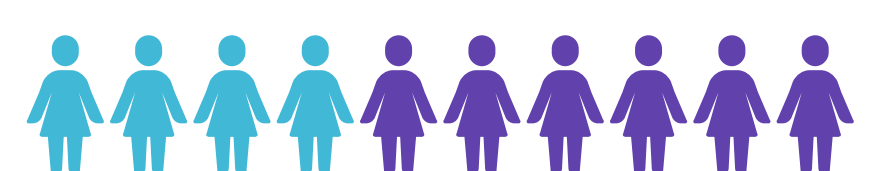
TREATMENT AND MONITORING

Off-label use of medications approved for dogs, such as allopurinol and meglumine antimoniate. Monitoring every 3 months (Complete Blood Count, biochemistry, urinalysis with Urine Protein:Creatinine ratio) to assess renal function and detect early any abnormalities or complications.

HEALTHY INFECTED CATS

Test for FIV antibodies and FeLV antigen, combined with ongoing clinical and serological monitoring, with intensified follow-up when comorbidities or immunosuppressive treatments affect the immune system.

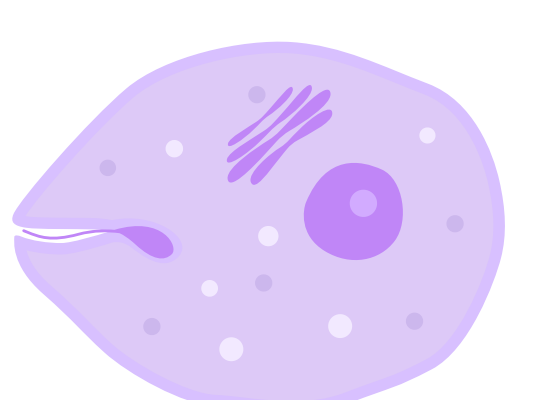
- **prognosis** is good with proper management (several years of survival, even in FIV-positive cats). Although acute renal injury, malignant neoplasia or coinfection with panleukopenia reduce life expectancy.
- **prevention** Seresto® collar is the only approved prevention in cats. Indoor confinement from dusk to dawn during sandfly season is recommended. No vaccines are currently available for cats.
- **difference with canine leishmaniosis** Cats appear to have greater immunocompetence against this infection. Some clinical signs differ from those seen in dogs, such as the predominance of nodular skin lesions in cats, whereas exfoliative dermatitis is more common in dogs.



The cat is considered a reservoir for this infection and is therefore an important public health concern.

CONCLUSION

Feline leishmaniosis is an emerging disease that should be included in the differential diagnosis of cases presenting with clinical signs and laboratory abnormalities compatible with *L. infantum* infection. This infection should be checked when cats received immunosuppressive treatment or are diagnosed with a retroviral infection.



UAB

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https://en.wikipedia.org/wiki/Feline_leishmaniosis