



What You Need to Know about Dog Flu (Canine Influenza)

Eighty-nine cases in the Chicago area have been confirmed positive for Dog Flu

As veterinarians in the Chicago area continue to battle the current Canine Influenza outbreak, veterinarians in the surrounding areas are taking steps to help prevent further spread of the disease. Many boarding facilities, doggie day care, and dog parks in the region have been temporarily closed to help control the situation. Veterinarians and other pet care professionals should suspect CIV infection in dogs presenting with persistent cough, nasal discharge, and fever, or in dogs with pneumonia or clinical signs of more severe respiratory illness. The most common clinical presentation of CIV infection is a mild upper respiratory tract infection including signs of lethargy, anorexia, low-grade fever, nasal discharge, and cough. Twenty percent of dogs have the potential to develop a severe disease course. Dogs with more severe disease usually present with high fever, an increased respiratory rate, and pneumonia.

Tips for controlling the spread of CIV in a veterinary facility:

- Dogs with suspected CIV infection that enter the facility should be isolated immediately and evaluated in a separate room.
- After evaluation, the floors, walls and tables in the room used should be thoroughly disinfected. Particular attention should be given to doorknobs and other objects that were touched by humans who were in contact with the dog.
- CIV is easily killed by disinfectants that are commonly used in veterinary clinics (e.g., quaternary ammonium compounds, bleach solutions at a 1 to 30 dilution, or potassium peroxydisulfate).
- Hospitalized dogs should be isolated for the protection of other dogs.
- The air supply should be as separate as possible, ideally by a full wall and door; a designated area within a common air space may not be adequate to prevent transmission of the virus.
- At a minimum, gloves and a gown should be worn while handling dogs with CIV infection.
- Staff should wash their hands with soap and water or disinfect them with an alcohol-based hand sanitizer after handling the animal.
- Shoes should be disinfected with an appropriately maintained disinfectant footbath when exiting the isolation room.
- Dogs that are at risk for infectious respiratory disease would be those dogs that visit dog parks, doggie day cares, groomers and boarding facilities.
- Viral disease is best prevented by effective vaccination.
- Merck Animal Health launched the first vaccine for Canine Influenza in 2009, Nobivac® Canine Flu H3N8. The vaccine has been shown to protect dogs against CIV infection by significantly decreasing clinical signs, reducing viral shedding, and reducing CIV-induced lung consolidation. The vaccine is given subcutaneously and a booster is needed two to four weeks after the initial dose.

Testing/Diagnosis Details

To identify the cause of the infectious disease, Merck Animal Health sponsored a diagnostic sampling program. Nasal and pharyngeal swabs were sent to Cornell University Veterinary Diagnostic Laboratory. From March 16 through April 1, 89 dogs tested positive for Canine Influenza through PCR. Many samples are still pending final results, including two post mortem cases. Preliminary reports on the gross necropsy of these cases showed widespread and severe damage to the lung tissue and hemorrhagic pneumonia, suggestive of damage from the Canine Influenza Virus. The first case Merck Animal Health had identified in the region was confirmed on March 16 from a clinic in Darien Illinois and the second case was confirmed on March 24 in Naperville. Of the 89 cases, 76 were from clinics in Chicago. Other cities with positive cases included Hoffman Estates and Northbrook. None of the positive cases had been vaccinated prior for Canine Influenza.

For more information about Canine Influenza, visit www.doginfluenza.com or contact Merck Animal Health Technical Services at 800-224-5318.