

Diagnosis of *Tritrichomonas foetus* in cats

INTRODUCTION

Tritrichomonas foetus is an emerging parasite of cats, causing chronic diarrhoea. A number of studies have shown that this parasite is a more common cause of large bowel diarrhoea than previously thought. In the UK, for example, approximately 20% of faecal samples from cats (especially young pedigree cats) with diarrhoea are found to be infected with *T. foetus*¹.



Figure 1 *Tritrichomonas foetus*

DIAGNOSIS OF TRITRICHOMONAS FOETUS

Definitive diagnosis of *T. foetus* relies on confirmation of the presence of the organism in a faecal sample.

The sensitivity of direct faecal smears is, however, very low – only about 14%.

The UVH Parasitology laboratory has just obtained the InPouch™ test kit for the detection of *T. foetus*. The pouch contains special growth medium and the organisms, if present, will multiply in the medium over time, increasing the likelihood of their detection. Overall the sensitivity of this test is good and can detect approximately 55% of infected cats.

*InPouch™ test kit now
available at UVH Parasitology
laboratory for the diagnosis of
Tritrichomonas foetus*

A more sensitive PCR test, that could identify trace amounts of *T. foetus* DNA in faeces, is available from certain diagnostic laboratories in the UK. Although the test does not require live organisms, bacterial DNA-ases present in the faecal sample will degrade released DNA from dead organisms, thereby reducing its sensitivity.

COLLECTING FAECAL SAMPLES

When collecting and submitting a sample for diagnosis, bear in mind that these organisms are very fragile and will die quickly at temperatures <15 °C or above 40 °C or if the sample is allowed to dry out. It is therefore important that a **fresh faecal sample be submitted** to the laboratory within **1-2 hours from voiding**. Samples should also be collected from loose/diarrhoeic faeces – formed faeces will often test negative even if occult infection is present and is a waste of time. Samples must be free of contaminating litter.

It is recommended that a sample be collected directly from the rectum of the cat, using either a sterile cotton swab (wetted in sterile saline) or a faecal loop. Faecal material need not be obtained with the rectal swab/loop since the mucous gathered by the swab/loop will be sufficient to inoculate the pouch.

Cats should not be receiving any antibiotics within several days prior to or at the time of testing.

RESULTS

A positive diagnosis is usually made within 2-4 days. Cultures still negative after 12 days incubation are considered negative.

CONTACT

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¹ Gunn-Moore & Tennant, 2007. *Vet Rec*, 160; 850-851