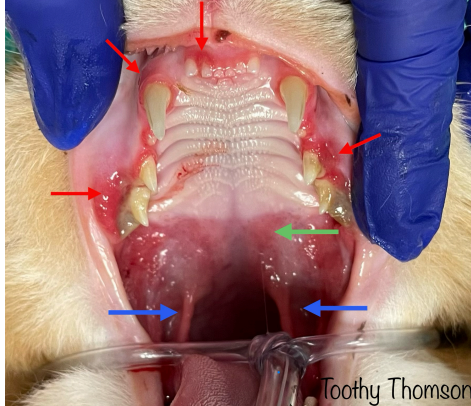




Toothy Thomson Handout

Feline Chronic Gingivostomatitis (FCGS)

Feline Chronic Gingivostomatitis (FCGS) also known more simply as “stomatitis” is an oral disease that affects cats. FCGS is characterized by severe inflammation of the oral cavity(stoma); meaning the inflammation extends past the gingival margin and into the mucosa. The inflammation is often also present along the palatal glossal folds and sometimes along the palate.



This cat has stomatitis. The arrows show mucositis (red), inflammation of the soft palate (green) and the palatal glossal folds (blue)



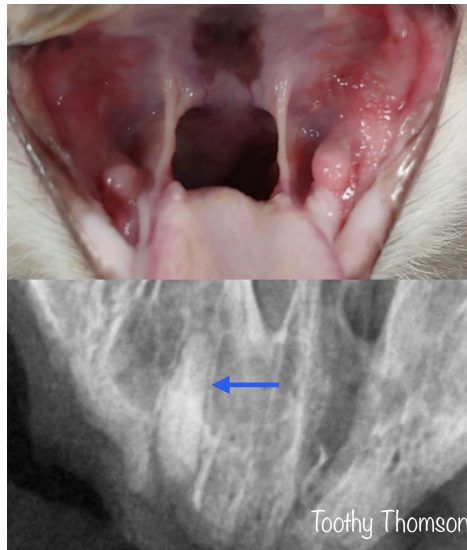
The images on the left show severe gingivitis, the inflammation does not extend into the mucosa. The picture on the right shows normal palatal glossal folds.

FCGS is a very painful and frustrating condition, with a currently unknown cause. Treatment to manage this disease includes oral surgery and medications for several weeks or months.

Stomatitis is believed to be the body's reaction to its own teeth, thus in order to stop the inflammation all tooth material needs to be removed from the oral cavity. As such, the main treatment for FCGS is **full mouth extraction (FME)**.

For treatment to be successful, no tooth material can be left in the cat's mouth; full-mouth dental radiographs are necessary to confirm complete extraction of all teeth and that no root was left behind.

Partial mouth extraction (PME) can be considered in rare cases where there is no inflammation along the canines and incisors. It is important to note that if any inflammation is present at the front of the mouth; PME is not an option. If PME is performed and there is no resolution of the inflammation in the rest of the mouth after a few weeks, full mouth extraction (a second surgery) will be the next step.



This patient with stomatitis was believed to be refractory due to ongoing inflammation despite FME. Pain and inflammation were so severe that he needed a feeding tube. Once we performed radiographs we found a retained maxillary incisor root (blue arrow) which we extracted. Patient was eating a week post-op and inflammation was resolved in 3 weeks.

FME (or PME) is an essential part of treating stomatitis and it is important to note that of the cats who have an FME or PME:

- About 80% see a resolution or significant improvement in the inflammation
- About 10-15% will have minimal improvement
- About 6% are considered refractory and will still have inflammation despite FME and medications. Alternative therapies need to be considered in those cases*
- Of the cats that have some improvement or full resolution, approximately two-thirds (2/3) require medical management beyond the first 2 weeks after surgery (ranging from several weeks to months)

* Medications and alternative therapies **do not work** without FME

While 80% of cats see a resolution or improvement of the inflammation after surgery, it is important to realize that it is not an instant solution. Treating stomatitis will require you to work closely with your veterinarian or veterinary dentist for oral rechecks and medication adjustments for several weeks to months.

When your cat is diagnosed and who will be treating them can affect what medications are recommended before and after surgery. Overall, the primary goal should be to keep your cat comfortable until FME can be performed and try to decrease the inflammation. Afterwards, keeping them pain-free while they recover from oral surgery and continuing to keep decreasing inflammation is the goal. If your pet improves, medications will slowly be weaned to ensure the inflammation does not return.

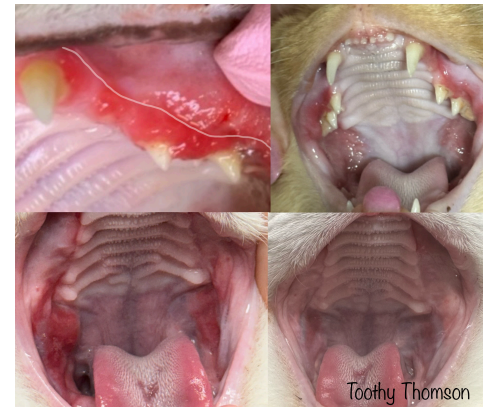
For management of the inflammation, either a steroid (eg. prednisolone) or a Non-Steroidal Anti-Inflammatory (NSAID) (eg. Onsior, Metacam) will be considered before and after surgery. If your pet is quite painful, additional pain control with an opioid (buprenorphine)

may be considered to help with comfort before FME and for a few days after surgery. Dental nerve blocks are used before oral surgery to help with post-op pain management.



Progression pictures of a cat on the day of FME, 2 weeks post-op and at 6, 10, 14 and 20 weeks where there is progressive resolution of inflammation

Antibiotics are **not** indicated in the treatment of stomatitis as this is not a bacterial infection. However, studies have shown that doxycycline used at a sub-antimicrobial dose can specifically help with oral inflammation. This means the antibiotic is used at a dose low enough not to kill bacteria while inhibiting the enzymes that contribute to oral inflammation. All these drugs will be used in combination to keep your cat comfortable and the inflammation under control. Once that is achieved, drugs will slowly be removed. It is possible this may take a few months.



The top pictures show two different cats with mucositis, the white line in the top left indicates the mucogingival margin. The bottom pictures are of a cat at 6 weeks and 10 weeks post-FME

For cats that don't see improvement of inflammation with FME and medications and that are confirmed to have no tooth material left behind with dental radiographs: they will be considered refractory (~6% of cases). Alternative therapies that may be considered include CO2 laser, immune-modulating therapies and stem cell therapy.

Cats can do very well without teeth: a diagnosis of FCGS will require full mouth extraction, medications and lots of vet visits, but being pain-free will make it worth it.