DIAGNOSING ORAL ULCERATION IN DOGS & CATS

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ORAL ULCERATION* OBSERVED

Observe clinical history (e.g., trauma, exposure to chemicals, radiation), and conduct physical and oral examination and diagnostic tests (e.g., CBC, serum chemistry profile, cytology, histopathology)

Acute (i.e., abrupt onset, short duration [<3 weeks]) or chronic (i.e., duration ≥3 weeks) presentation?

ACUTE
Obtain clinical history (e.g., trauma, exposure to chemicals, radiation), and conduct physical and oral examination and diagnostic tests (e.g., CBC, serum chemistry profile, cytology, histopathology)

Exogenous (i.e., mechanical) or endogenous (i.e., organic) cause?

EXOGENOUS
Conduct further diagnostic evaluation

DIAGNOSIS
Traumatic ulceration
- Thermal
- Electrical
- Chemical
- Mechanical

TREATMENT
See Chronic, next page

DIAGNOSIS
Stomatitis
- Local irritation with plaque sensitivity (i.e., contact mucositis with ulceration)

TREATMENT
See Chronic, next page

DIAGNOSIS
Acute necrotizing ulcerative gingivitis (in dogs)

TREATMENT
Supportive care
- Antibiotics to control secondary infections

DIAGNOSIS
Calicivirus (in cats)

TREATMENT
- Elimination of the primary/inciting cause
- Treatment as recommended

DIAGNOSIS
Erythema multiforme

TREATMENT
Extraction of all teeth affected with stage 3 or 4 periodontal disease
- Strict daily plaque prevention at home

CHRONIC
See Chronic, next page

Endogenous (i.e., organic) cause?

DIAGNOSIS
Local irritation with plaque sensitivity (i.e., contact mucositis with ulceration)

TREATMENT
See Chronic, next page

DIAGNOSIS
Areas of marked inflammation and ulceration, often located caudally in cats

TREATMENT
Supportive care
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*Oral ulceration is a full thickness breach of the epithelial continuity of the oromucosal surface, which may extend into the tissues underlying the epithelium, including the submucosa, muscle, and/or periosteum.
Obtain clinical history (eg, trauma, exposure to chemicals, radiation), and conduct physical and oral examination and diagnostic tests (eg, CBC, serum chemistry profile, cytology, histopathology)

Exogenous (ie, mechanical) or endogenous (ie, organic) cause?

EXOGENOUS

Conduct further diagnostic evaluation

DIAGNOSIS
 Persistent irritation from malpositioned teeth

TREATMENT
 Elimination of tooth to mucosa contact through crown reduction and restoration or extraction

DIAGNOSIS
 Local irritation with plaque sensitivity (ie, contact mucositis with ulceration)

TREATMENT
 Dental scaling and polishing, followed by daily application of wax gel after daily plaque control

If patient does not respond to treatment, administer pentoxifylline (dogs, 20 mg/kg PO q12h [extra-label]; cats, 100 mg PO q12h [extra-label]) with doxycycline (5 mg/kg PO q12h) and niacinamide (dogs, 200-500 mg PO q12h; cats, 125 mg PO q12h)

If patient remains unresponsive to treatment, perform full-mouth extractions

ENDOGENOUS

Conduct further diagnostic evaluation

DIAGNOSIS
 Local irritation with plaque sensitivity (ie, contact mucositis with ulceration)

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If patient remains unresponsive to treatment, perform full-mouth extractions

DIAGNOSIS
 Stomatitis

TREATMENT
 Extraction of multiple teeth, followed by daily plaque control at home

Full-mouth extraction

DIAGNOSIS
 Malignancy

TREATMENT
 Surgical excision, with ≥2 cm clean margins

Daily home care (eg, daily tooth brushing, application of wipes to control plaque and calculus accumulation)
**DIAGNOSIS**

Uremia
(due to marked azotemia)

**TREATMENT**

Treat underlying cause of uremia

**DIAGNOSIS**

Eosinophilic granuloma
- Located under the lips, hard palate, or soft palate in cats
- Commonly located in the caudal oral cavity in dogs
- Cats and certain dog breeds (ie, Cavalier King Charles spaniels, Norwegian breeds) predisposed

**TREATMENT**

- Cats: Flea control, corticosteroids, laser ablation/vaporization to decrease bacterial load, excision, immunosuppressants (eg, cyclosporine)
- Dogs: Laser ablation/vaporization to decrease bacterial load, antimicrobials, corticosteroids, immunosuppressants (eg, cyclosporine)
- If poor response, biopsy is indicated

**DIAGNOSIS**

- Pemphigus vulgaris
- Bullous pemphigoid

**TREATMENT**

Perform biopsy

**DIAGNOSIS**

- Uremia (due to marked azotemia)

**TREATMENT**

Treat underlying cause of uremia

### References


### FIND MORE

For an image gallery of various presentations of oral ulceration, see [Oral Ulceration](#), page 20.