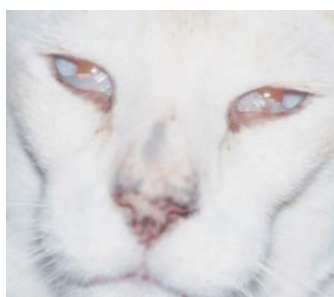


# Feline Herpes Virus (FHV) Infection

## What is FHV?



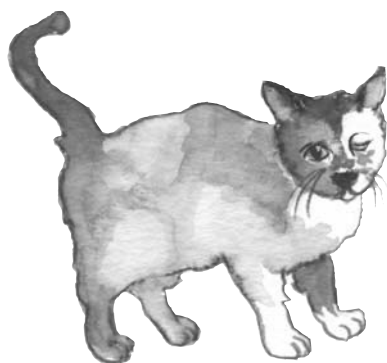
*A cat with painful eyes and the third eyelids up.*

FHV in cats is a viral infection transmitted between cats. A very high percentage of the cat population is exposed to FHV. Young animals are most susceptible. Not all cats infected with FHV will show clinical signs.

FHV behaves in a manner similar to herpes cold sores in humans, i.e once an animal is infected with herpes it will always be present. Infection can not be transmitted to humans.

The virus may target the eyes, causing conjunctivitis, red eyes, copious discharge and occasionally corneal ulceration. Corneal ulceration is painful and debilitating.

The cat will keep the affected eye 1/2 closed, and seek dim light. Infection often also involves the respiratory system, resulting in sneezing and coughing. The clinical course of the infection is variable and recurrence can be common. Exotic breeds e.g. *Himalayans, Burmese, Persians, Siamese etc* may be especially prone to infection. Times of stress may allow the virus to “flare up” and cause clinical signs.



There is no cure for herpes in cats. Medications are used to shorten the course of the disease, and help prevent secondary complications.

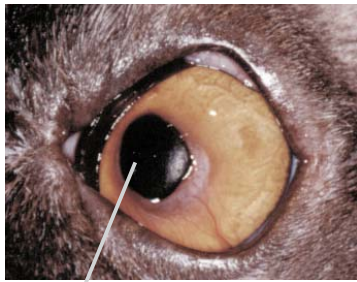
## What treatments are available?

Treatment involves the use of eye drops and/or tablets and cleaning of ocular discharges.

Sometimes there may be an underlying disease which is lowering your cat's immune system, and this may need to be investigated.

# Feline Herpes Virus (FHV) Infection

## What are the potential complications of FHV? What is FKN?



*Corneal sequestrum*

As a complication of FHV, your cat may develop a brown or black plaque involving the surface of the eye, called a *corneal sequestrum*, or *feline keratitis nigrum* (FKN). Often this problem begins as a faint area of brown staining of variable size, then progresses over days to weeks into a black, hard plaque.

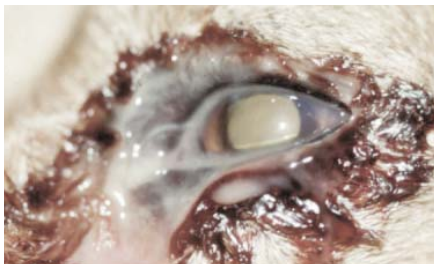
Other corneal problems in the cat, such as corneal injuries, and eyelid problems may also result in FKN as a complication. As opposed to FHV which is usually shallow, FKN often involves deep layers of the cornea. In fact the cornea can rupture as a result of FKN.

## What can be done about FKN?

Due to the protracted course of FKN and its debilitating nature, we recommend surgical excision in most cases. The surgical procedure involves dissection of the plaque away from the cornea using microsurgery. In some instances, a corneal sliding graft may be used if there is a significant defect in the cornea after the plaque has been excised.

Your specialist can explain the procedure to you during your visit. Sometimes the plaque may fall off by itself but this can take a long time, and complications may occur.

## Are there other complications?



*Chronic dry eye*

Other complications of FHV can include clouding of the cornea, and obstruction of the tear ducts. This can result in chronic tearing. Other possible complications include *dry eyes*, and an unusual condition called *eosinophilic keratitis*.

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