Diabetes: what does it mean for my cat and me?

The incidence of feline diabetes is on the increase, with a recent UK survey suggesting that nearly 1 in 200 cats are diabetic. This article, from FAB’s feline expert panel, addresses the practicalities of dealing with a diabetic cat. It is designed to be read in conjunction with FAB’s information sheet on ‘managing the diabetic cat’ (available at www.fabcats.org/owners/diabetes/info.html), which discusses how the disease is diagnosed and treated.

Did you know?
- Obesity is a common cause of diabetes, so preventing obesity can prevent diabetes in some cats.
- Early in the course of the disease you may not notice anything is wrong with your cat. Routine health checks at your veterinary surgery, including urine checks, can help pick up early signs of diabetes.
- If diabetic cats are treated and monitored intensively early on, as many as 50-60% of them may recover (ie, their diabetes will be transient, meaning they won’t necessarily need insulin for the rest of their lives). Unfortunately, it is not possible to predict which cats will fall into this category – other cats will require lifelong treatment.

What to expect
If your cat is diagnosed with diabetes, your vet or veterinary nurse will first want to ensure that you fully understand what the disease is, and what the implications are of having a diabetic cat. Any additional concerns that need to be addressed in order to successfully treat the diabetes in your cat (eg, obesity) will be discussed.

Common questions and concerns
- My cat is only 7 years old, so surely can’t have diabetes?
- My cat has just been diagnosed with diabetes – is his brother also at risk?
- Diabetes is caused by many different factors. The disease has been seen in sibling cats but there is no firm evidence that genetics plays a role. It is extremely unlikely that the brother will also get diabetes, but he should be monitored for early signs of the disease through routine veterinary health checks, as your cats may share lifestyle risk factors for the condition that should be addressed, rather than a genetic link. FAB’s ‘WellCat for Life’ programme (see page 2) provides a ‘gold standard’ for what routine monitoring checks are advisable and when these should be performed throughout life, encouraging owners and veterinary practices to work together to form a partnership of care for the benefit of cats.
- Another appointment will be arranged for fairly soon afterwards to assess how you and your cat are getting on.

It will also be explained to you how to store insulin, how to draw up an accurate dose and how to give the injection. You will find out what to monitor your cat for – in particular, signs of an insulin overdose. You may be asked to collect some urine samples from your cat (and advised how to do this), and, if necessary, given advice on what diet to feed, how much food to give and when to give it.

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Many cats will need lifelong insulin treatment. However, when diabetes is detected early in the course of the disease, and optimal

The one exception, however, would be if your cat is a Burmese – the risk in some lines of this breed is 1 in 10, and there have been many cases where siblings have been affected.
Weigh out your cat’s daily food allowance in the morning, and place it in a container to divide between the allocated meals. This way you are less likely to overfeed your cat. You can take out a few kibbles to give as treats throughout the day.

It is important that no ‘extras’ are added to your cat’s daily allocated allowance. This includes milk and cat milk!

Increase your cat’s exercise levels gently in collaboration with the pet slimmers’ nurse, who can help to design an exercise programme. Cats can exercise by use of toys, light torches, etc. Remember, ‘little and often’ is generally more beneficial for weight loss.

There are occasions when you will need to give your cat a special diet. For instance, if your cat has diabetes, it will not be able to give you a precise answer. Cats can be unpredictable in their response to treatment – both in terms of the type of insulin and the dose that they need. While some cats will become stable very quickly, others can take months to stabilise. This can undoubtedly be frustrating, but it is vital not to get impatient. Increasing the dose of insulin too quickly or too frequently can lead to serious problems, and it can end up taking even longer to stabilise the diabetes. A very low dose of insulin is always used to begin with. Then, depending on your cat’s response, this is increased by a very small amount, and no more frequently than every 3–5 days. Try not to get frustrated if it is taking months to stabilise your cat – this is normal and you will get there in the end. Patience definitely pays off!

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Tying playing the food in different areas and escape from the ‘puzzle’ feeder is also ideal – making your cat work a little to get its food.

If you have more than one cat, it important to feed them separately and to watch over them when they eat. If just one of the cats is obese, try feeding the others on a high carbohydrate diet around the house/room to encourage your cat to exercise more. A food ball or ‘puzzle’ feeder is also ideal – making your cat work a little to get its food.

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General, you can continue feeding your cat at the same times that you fed it before it became diabetic. So, if your cat grazes food throughout the day, it is fine for you to continue to do this. The only exception is if your cat is on a weight loss or calorie-restricted diet and would eat the whole ration all at once. If this is the case, the food needs to be divided into separate meals. The precise feeding times can be tailored to you and your cat – discuss a feeding regime with your vet.

Treat your cat in for a check-up so that the treatment can be tailored to your cat, and who may feed it, is ‘on side’. The only exception is if your cat is on a weight loss or calorie-restricted diet and would eat the whole ration all at once. If this is the case, the food needs to be divided into separate meals. The precise feeding times can be tailored to you and your cat – discuss a feeding regime with your vet.

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diabetic cats
OWNER INSTRUCTION SHEET

**cat:**
Name .................................................. Date diabetes diagnosed ..................................................

Weight at time of diagnosis .................................. Estimated ideal weight ..................................................

diet:
Food ..........................................................

Amount to be fed ........................................... Frequency/timing of feeding ..................................................

**insulin:**
Insulin type .................................................. Dose ..........................................................

**storage instructions** The insulin bottle should be kept in the door of the fridge at all times. It is important that it is not frozen or left out at any time, as this will damage the insulin.

**administering the insulin** When the insulin bottle is taken out of the fridge it should be gently turned up and down to mix the contents (do not shake the bottle vigorously as this will damage the insulin). The correct amount of insulin should be drawn up in the appropriate syringe provided by your vet, and injected under the skin on the scruff of your cat's neck, as demonstrated by your vet. More than one type of insulin syringe is available, and it is very important to use the correct type. The wrong syringe might mean your cat receives an incorrect amount of insulin, which can be dangerous.

**additional medication:**

**monitoring your cat for signs of inadequate control of diabetes:**
Please keep a diary for your cat, recording the following observations:

- **Bodyweight** Take recordings at least every 2 weeks if your cat is on a weight loss programme. A subjective assessment of body condition should also be made regularly.
- **Demeanour** eg, Bright and active, or lethargic and weak.
- **Appetite** Amount eaten daily; eg, normal amount, less than normal (approximately how much less?) or cat more hungry than normal?
- **Thirst** Amount drunk daily; volume (either measured or approximate) or normal/increased/decreased?
- **Coat** General condition
- **Urination** Frequency/volume of urination; if cat uses a litter tray, normal/increased/decreased frequency and/or volume of urination (eg, more or larger 'clumps' of litter). Weighing tray daily (at the same time) can also give a measure of any change in volume of urine being produced.
- **Urine ketones** Measured periodically using a dipstick, as directed by your vet.

**monitoring your cat for signs of insulin overdosage (hypoglycaemia):**
Signs of hypoglycaemia (low blood sugar) can occur at any time but are most likely at the time of maximal insulin action, which is usually around 4–6 hours after giving insulin, depending on the type of insulin your cat is receiving. The lower the blood sugar levels go, and the more rapidly they drop, the more severe the signs will be. In order of increasing severity these include:

- Wanting to hide, lethargy, weakness
- Hunger
- Disorientation and/or apparent blindness
- Shaking, wobbliness
- Collapse
- Seizures

Hypoglycaemia can be life threatening if left untreated so it is very important that early signs are recognised and treated.

**what to do if you notice any of these signs:**
If signs are mild and your cat will eat, offering food may be enough to relieve the signs. If signs are more severe, or if your cat will not eat, glucose syrup, honey, jam or sugar water can be rubbed on the gums. Your veterinary surgeon should then be contacted for further advice. If signs have progressed to collapse or seizures, an emergency vet should be contacted immediately.