Causes and Risk Factors for Pneumonia

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In a Swedish study published in 2017 1, the most common causes of death In Irish Wolfhounds were: 1- Cancers (24%), 2-Cardiac disease (18%), and 3- Respiratory Disease (16%). Thirty-seven percent of the dogs in this study had experienced at least one episode of pneumonia during their lifetime and fifty-three percent of those dogs had more than one episode of the disease. Most importantly, the occurrence of this disease had a statistically significant effect on lifespan in our breed, shortening it by an average of 175 days. Pneumonia is a significant problem in Irish Wolfhounds. However my impression from clinical veterinary practice is that it is NOT similarly a problem in mixed breed dogs or in most other breeds of dogs, and this underlies much of the reason that the average general practitioner is slow to diagnose the condition and may not treat it as aggressively as is recommended by the Irish Wolfhound Health Group or the Irish Wolfhound Foundation.

Respiratory infections may involve either the upper or lower respiratory system. An infection of the upper part of the respiratory system is above the lungs and may affect the throat, pharynx, nasopharynx, sinuses, larynx, and the upper portions of the trachea. These are rarely life threatening. Lower respiratory infections involve the lower portion of the trachea and the lungs (the bronchi, bronchioles, and alveoli), and produce decreased lung sounds, crackles, or wheezes when listening with a stethoscope. Audible wheezes, gurgles, and congestion heard without a stethoscope are generally coming from the upper airways. Pneumonia is any inflammation of the lungs and airways that causes breathing difficulties and a deficiency of oxygen in the blood due to the accumulation of fluid and debris inside the alveoli (the smallest portion of the airway where the transport of oxygen occurs into the blood stream) or a thickening of the tissues between the alveoli. Not every dog who coughs has pneumonia and not every dog with

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pneumonia coughs. Pleurisy, inflammation of the lining around the lungs, may occur as a complication of pneumonia.

The body has evolved some ingenious defense mechanisms to protect itself from injury and infection.

- Aerodynamic filtration the nasal passages are designed to mechanically filter out larger particles, and warm and moisten the air as it enters the respiratory system. Smaller particles are deposited lower in the airways captured in a mucous covering on the mucosa.
- Physical barriers to aspiration The larynx allows passage of air into the trachea while preventing the entrance of food or fluids. When swallowing, the epiglottis, a leaf-shaped flap of elastic cartilage, folds over to prevent blockage of the airway. Other portions of the larynx, the arytenoid cartilages, flex partially open and closed during respiration.
- Cough reflexes These reflexes are mediated primarily by the vagus nerve. Receptors in the epithelium of the respiratory tract are sensitive to both mechanical and chemical stimuli. The bronchi and trachea are so sensitive to light touch that slight amounts of foreign matter or other causes of irritation initiate the cough reflex. Coughing removes the foreign material from the respiratory tract before it reaches the lungs. Coughing can only expel material from the trachea and major bronchi.
- Tracheobronchial secretions and mucociliary transport system This system removes materials deposited in the lower 2/3 of the airway system.

Foreign material, including viral and bacterial particles, which become trapped in the mucous secretions are propelled by cilia, small hair-like structures that produce a wave like motion. This produces a steady movement of foreign materials up the airway.

- Cellular inflammatory response.

 Alveolar macrophages ingest and inactivate inhaled particles, especially at the alveolar and small airway levels. Viral infection of the lungs depresses bactericidal activity of the macrophages
- Local and systemic immunity. Specialized cells located throughout the respiratory system act directly against viruses and bacteria and produce antibodies, proteins that identify and destroy virus and bacteria as well as fight infection. The tonsils have especially high concentrations of these cells.

When the normal defenses are overwhelmed or undermined and the lining of the alveoli becomes inflamed, normal gas exchange is compromised, air movement into and out of the lung tissue is decreased and hypoxia (low blood oxygen levels) may occur.

CAUSES OF PNEUMONIA

Primary viral, bacterial, and fungal infections occur, but pneumonia may complicate ANY pulmonary disease process. In wolfhounds, when we think of cases of pneumonia, we are primarily thinking of disease caused by bacteria, but it is uncommon for healthy dogs to develop these without underlying causes.

 Infections caused by viruses, such as influenza or distemper virus, fungal

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- infections, or even parasitic infections may damage the lung tissue and lead to secondary infections caused by hacteria
- Suppression of the immune system increases the risk of infections by any organism. This immunosuppression may be caused by other infections, drug usage, or other severe metabolic disease.
- **Cancer** of any portion of the respiratory system
- Prolonged recumbency causes lung tissue on the lower side of the body to not be fully inflated. It is important to regularly turn patients who cannot get up on their own. This can cause collapse of the small airways and alveoli, increasing risk of infection. It is further complicated by any loss of consciousness or abnormal mental status, increasing risk of aspiration.
- Anesthesia stops the swallow reflex and relaxes the muscles at the entrance to the stomach that leads to gastric reflux. It also suppresses the cough reflex.
- Trauma may cause compromise of blood flow to the lungs and inflammation, providing conditions favorable to bacterial growth
- Any compromise of the physical defense mechanisms of the respiratory system. These may be acquired or congenital (present from birth) and these may have a heritable genetic component.
 - Ciliary Dyskinesia is a defect in the activity of the cilia, small hairs that sweep mucous and trapped debris out of the airways. This may be a primary genetic disorder passed as an autosomal recessive trait, but this system can also be depressed by noxious substances and may be depressed by some viruses for as long as a year. Primary Ciliary Dyskinesia, or PCD, can only be definitively diagnosed by electron microscopy on samples of respiratory epithelium or spermatozoa and is therefore uncommonly made.

- Laryngeal paralysis, or LP, is an inherited congenital condition not reported in the Irish wolfhound. Acquired LP may be associated with hypothyroidism, but analysis does not support a causal relationship. Dogs diagnosed with LP should be tested for thyroid function, but treatment of this condition does not result in resolution of symptoms. LP may be the earliest sign of progressive generalized neurologic dysfunction, and while a definitive cause has not yet been found, an inheritable condition may be present in these individuals. Stridor, a harsh noise when breathing caused by failure of the arytenoid cartilages to relax, is the most obvious clinical sign.
- Anatomical abnormalities
- Regurgitation, vomiting or problems swallowing can lead to aspiration.
 - Megaesophagus involves a decrease in normal muscle function and dilation of the esophagus, which causes retention of food without passage into the stomach and leads to a significant increased risk of aspiration. It can present as a congenital condition or in an

- adult-onset form associated with a variety of conditions including myasthenia gravis.
- Gastric reflux occurs when stomach contents back up from the stomach into the lower esophagus. This is the primary mechanism by which anesthesia is a risk factor for aspiration pneumonias. Overproduction of stomach acid, the presence of hiatal hernias, and obesity make this condition much more likely.
- Damage to the respiratory epithelium from smoke inhalation, chemicals, or near drowning.

In any case of an individual dog who suffers from more than one episode of pneumonia in its lifetime or in cases where closely related dogs show this problem, it is imperative that we not only look closely for predisposing causes, but also consider that there is an inheritable risk factor in the line and plan future breedings accordingly.

¹ Occurrence of cardiorespiratory diseases and impact on lifespan in Swedish Irish Wolfhounds: a retrospective questionnaire-based study. <u>Orleifson</u> et al. *Acta Veterinaria Scandinavica* 2017; 59: 53.



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